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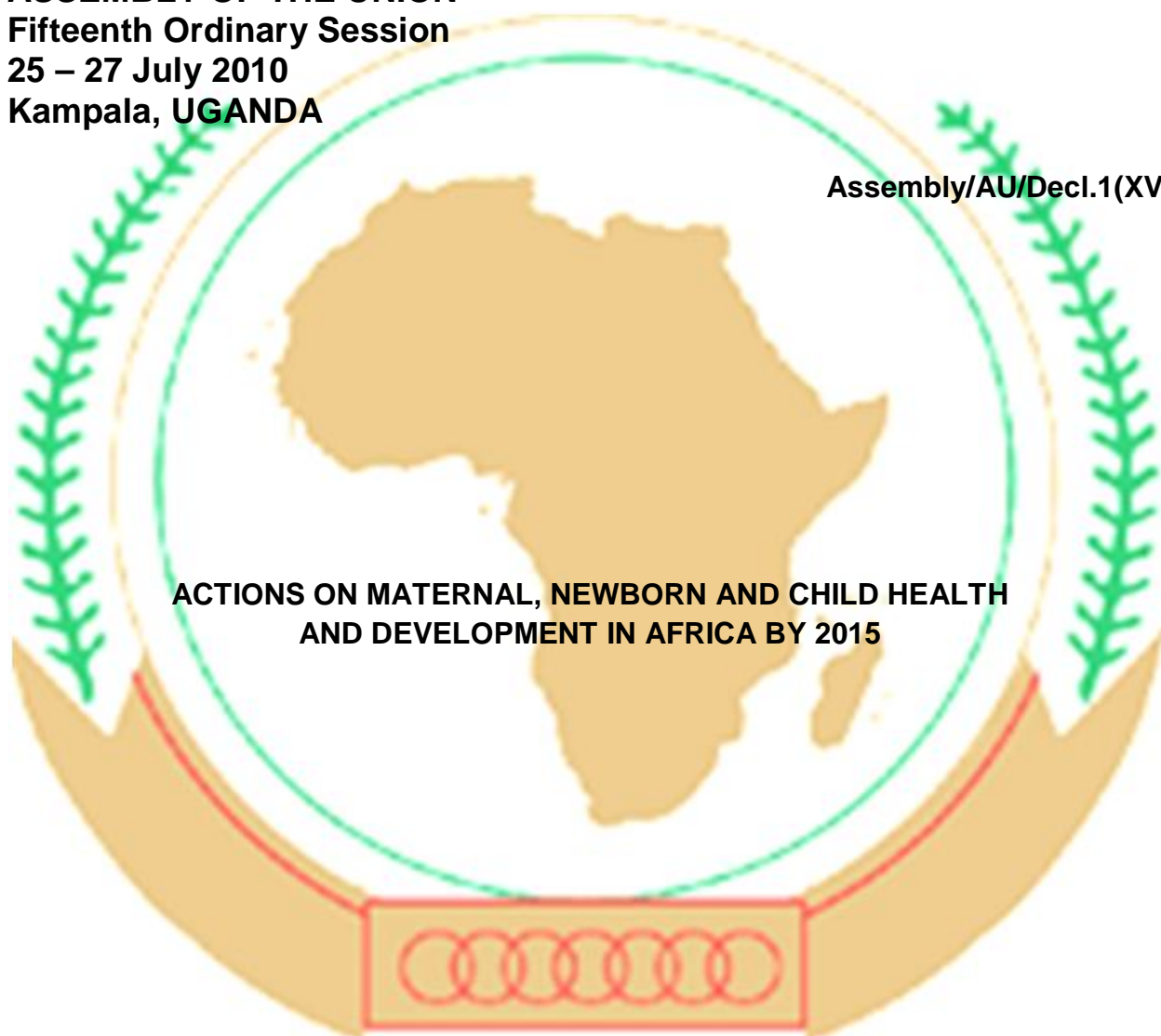
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ASSEMBLY OF THE UNION
Fifteenth Ordinary Session
25 – 27 July 2010
Kampala, UGANDA

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**ACTIONS ON MATERNAL, NEWBORN AND CHILD HEALTH
AND DEVELOPMENT IN AFRICA BY 2015**

Adopted by the Fifteenth Ordinary Session of the Assembly of the Union on 27 July 2010 in Kampala, Uganda



ACTIONS ON MATERNAL, NEWBORN AND CHILD HEALTH AND DEVELOPMENT IN AFRICA BY 2015

We, the Heads of State and Government of the African Union, meeting at our Fifteenth Ordinary Session in Kampala, Republic of Uganda, from 25 to 27 July 2010, following our debate on ***“Promoting Maternal, Infant and Child Health and Development in Africa”***:

Acknowledge the progress made in the implementation of these and other relevant commitments on maternal, infant and child health and the launching of the Campaign on Accelerated Reduction of Maternal Mortality in Africa (CARMMA) by the African Union continentally and nationally but remaining deeply concerned that Africa still has a disproportionately high level of maternal, newborn and child morbidity and mortality due largely to preventable causes;

Mindful that universal access to quality healthcare is a human right and that large segments of our population do not have access to this right which impact on their dignity and leads to morbidity and death;


Also Mindful of the important role we have to play in improving the wellbeing of women and children for Africa’s development through provision of an enabling environment, including strong leadership and political will for concrete actions, allocation of resources as well as effective governance of our health delivery systems;

Welcome the G8 Muskoka Initiative and the pledge to support maternal, newborn and child health.

Hereby commit to the following:

1. Individually and collectively **REAFFIRM** our previous commitments aimed at accelerating the health of our people and the social development of Africa. In this regard, we re-dedicate ourselves and commit our countries to accelerate efforts to improve the state of health of Africa’s women and children and thereby attain all Millennium Development Goals (MDGs) particularly MDGs 4, 5 and 6 by 2015.
2. **COMMIT TO UNDERTAKE** the following actions:

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- (i) Launch CARMMA in our countries and broaden it as an advocacy strategy for the promotion of Maternal, Newborn and Child Health and involve all key stakeholders such as the women, children and young people, persons with disabilities, parliamentarians, community and religious leaders, civil society organizations, the media, and the private sector and institutionalize an annual CARMMA week in solidarity with the women and children of Africa for the next four years;
 - (ii) Strengthen the health system to provide comprehensive, integrated, maternal, newborn and child health care services, in particular through primary health care, repositioning of family planning including reproductive health commodities security, infrastructure development and skilled human resources for health in particular to train Community Health Workers to mitigate the human resource crisis in the Health sector;
 - (iii) Provide stewardship as national Governments and achieve policy coherence by developing integrated health plans within the development plan with cross disease and cross sector health goals and coordinate multi-sectoral actions and multi-agency partnerships;
 - (iv) Provide strong support for sharing and scaling up of identified good practices that have high impact and that are cost effective; and request the AU Commission to map and disseminate such practices;
 - (v) Provide sustainable financing by enhancing domestic resources mobilization including meeting the 15% Abuja target, as well as, mobilizing resources through public-private partnerships and by reducing out-of pocket payments through initiatives such as waiving of user fees for pregnant women and children under five and by instituting national health insurance;
 - (vi) Request the AU Commission in collaboration with partners including the G-8 to develop a mechanism for accessing such fund by AU Member States;
 - (vii) Call on the Global Fund for Fight against HIV/AIDS, Malaria and TB to create a new window to fund maternal, Newborn and Child Health. In this context, we appeal to development partners and donors for the replenishment of the Global Fund during its October 2010 meeting and to ensure that the new pledges are earmarked for Maternal Newborn and

Child Health. We also appeal for equitable access to the Global Fund resources for all African Union Member States;

- (viii) Institute a strong and functional monitoring and evaluation (M&E) framework at country level to provide accurate, reliable and timely maternal, newborn, and child data to monitor progress against agreed indicators and targets, measure health performance and for informed decisions and actions including making maternal deaths notifiable and institute maternal death reviews.
3. **FINALLY COMMIT** to annually report on progress and **REQUEST** the Commission to establish a Task force on Maternal, Newborn and Child Health to amongst others, prepare such reviews and reports.



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