attendant present at delivery, backed by emergency obstetric care, decreases the risk of a woman dying in childbirth and can help prevent and treat infections and complications. Postnatal care has a central role in encouraging new mothers to breastfeed, in the resuscitation of newborns, if necessary, and in averting hypothermia and pneumonia.

Despite the importance of maternal health, the available data reflect woefully inadequate access to care. Across the countries and territories, 1 in 4 pregnant women receives no antenatal care, and more than 40 per cent give birth without the assistance of a skilled attendant.

Figure 1.12
The probability of maternal mortality is far higher in the developing world than in industrialized countries

Figure 1.13
Low levels of maternal care contribute to high rates of maternal death in South Asia and sub-Saharan Africa

Combating AIDS, malaria and other major diseases (MDG 6)
Millennium Development Goal 6 focuses on reducing the enormous burdens caused by HIV and AIDS, malaria and other major diseases. While few of the indicators focus on children specifically, the direct and indirect impact of major diseases on children can be profound. Half of the infants who are infected with HIV will die before age two, and more than 15 million children under age 18 have lost one or both parents to AIDS or related causes. Malaria accounts for 8 per cent of deaths in children under five and measles for another 4 per cent.

HIV and AIDS
Worldwide, 2.3 million children under age 15 are living with HIV, and 530,000 children were newly infected with the virus in 2006—mostly through mother-to-child transmission. Girls are at particular risk of contracting HIV, both because of their physiology and because of social and cultural power imbalances in their relationships with men and boys. Preventing new infections is the first line of defence against AIDS. It is also the best way to protect the next generation.

Once a pregnant woman is infected with HIV, there is a 35 per cent chance that without intervention she will pass the virus on to her newborn during pregnancy, birth or breastfeeding. Antiretroviral drug therapy can greatly reduce the chances that transmission will occur and is essential to stemming the rise in maternal and newborn mortality rates in countries where AIDS has reached epidemic levels. With the appropriate drugs and proper care, infants who are HIV-positive can remain healthy indefinitely, though their long-term prospects for survival remain uncertain.

Figure 1.14
Sub-Saharan Africa accounts for almost 90 per cent of paediatric HIV infections

* Data refer to the most recent year available in the period specified.

Antenatal care coverage — Percentage of women 15–49 years old attended at least once during pregnancy by a skilled health personnel (doctors, nurses or midwives).

Antenatal care coverage — Percentage of births attended by skilled health personnel (doctors, nurses or midwives).

Antenatal care coverage — Percentage of newborns under age 18 who have lost one or both parents to AIDS or related causes.

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Yet despite the obvious benefits of drug therapy and its relatively low cost, only 11 per cent of pregnant women in low- and middle-income countries who were HIV-positive were receiving services to prevent transmission of the virus to their newborns in 2005. Preliminary estimates for 2006, which were not yet released when this report went to press, indicate that coverage rates rose to 20 per cent in 2006.10 The vast majority of these women live in sub-Saharan Africa.

Malaria
Malaria causes more than a million deaths each year, up to 80 per cent of them in children under five.11 Pregnant women and their unborn children are particularly vulnerable to the disease, which is a prime cause of low birthweight in newborns, anaemia and infant deaths.