

## Editorial

# Millenium Development Goal: 5

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The Millennium Declaration in 2000 by all 189 member states of the UN General Assembly during the UN Millennium Summit derived The United Nations Millennium Development Goals. It is a commitment in to action in 21<sup>st</sup> century. There are eight goals, 18 targets and 48 indicators. The millennium development goals are to be achieved by 2015. The 5<sup>th</sup> goal is to improve maternal health [1,2]. There is a progress in achieving the targets of 5<sup>th</sup> goal such as the maternal mortality ratio, home delivery by skilled birth attendant in different countries around the world. However maternal mortality ratio, prevalence of contraceptive method users, unmet contraceptive need, total fertility rate, Couple protection rate and net reproduction rate have been uneven, inequitable, and unsatisfactory. There are so many barriers for maternal health care have been identified in the community. Barrier to receive timely & good Quality Care, Barrier of availability and accessibility of services, political barrier, geographical barrier, cultural Barrier, Women's Literacy and Women Empowerment, time Barrier, economic barrier and barrier to have health personnel at grass root level. This will be leading to delay in seeking care, delay in reaching care and delay in receiving adequate care which will have an impact on maternal mortality ratio in any country. Maternal and Perinatal Death Inquiry and Response (MAPEDIR) tool will be useful to identify these three delays in maternal health care delivery in the community. The three delay factors from the grass root level till tertiary care level has to be identified and corrected in order to receive timely accessibility, timely availability, and timely affordability of various components of the maternal health care services [2]. The quality of maternal health care services is also dependent upon the resources available (Money, Material and Manpower). The health of women and children should be given higher priority at all levels of health care system. Active participation of community with involvement and support of women's self help groups and ASHA workers (Accredited social health

activist) etc., will be very effective in improving women accessibility to different components of maternal health care services and increasing sensitivity to women's needs. The public-private partnership role will also have an impact in improving women's health. We have to find out a mechanism to involve them through appropriate rules & regulations to provide maternal child health care to the community. Regarding maternal health care a road map has already been established based on principles of primary health care in 1998 at Alma Atta. The fulfillment goal and targets of MDG Goal-5 is the joint effort of community and service providers. Public health experts should be an essential part of the executive management team and will have to play a key role in their country by identifying the major problems such as the absence of links between communities, sub centres and referral facilities; shortages of equipment and trained staff at referral facility; and a lack of emergency transport to adequately meet the needs of pregnant women particularly for obstetrical emergencies. The Basic Obstetric and Newborn Care (BEmONC) and 24-h Emergency Obstetric and Newborn Care (CEmONC) will bring favorable changes in reducing maternal mortality in developing country [2]. The logistic support, the infrastructure development, the accreditation of the laboratories in district hospital and tertiary care medical centre and supervision by the public health authority and fixing the accountability will be very helpful for the effective delivery of maternal health care services. Allocation of resources should be linked to states performance as well as to population size. They have to identify the new indicators for performance, and allocation of resources based on the felt need of the on priority by operational research. The rising trend of female literacy rate, legal age for marriage and the decision making power of women will be strengthening the effort for improving maternal health and reducing the maternal mortality ratio 75% between 1990 and 2015. So it is the right time for the public health professionals and other health care personnel with the support of policy makers and government agencies to take steps to provide the services effectively. The operational research has to be carried out by the public health professionals and other health care providers to identify the deficiency at all levels. The community based monitoring of acceptability, accessibility, availability and affordability of reproductive child health care has to be carried out by using community score card system and service providers score card system. Last but not the least, the principle of fact finding not fault finding has to be advocated or implemented.

## Reference

1. Millennium Development Goals (MDGs). 2014.
2. Kumar S. Reducing Maternal Mortality in India. Indian Journal of Public Health. 2010; 54.