News Release
For immediate release

International Federation of Gynecology and Obstetrics
2015 World Report on Women’s Health says more work needs to be done


The 2015 World Report is a comprehensive review of current and new perspectives and approaches to maternal health, reproductive health and leadership and management being implemented on the ground worldwide.

“As we celebrate the successes of the Millennium Development Goal era, positive growth for universal health care and, most importantly, the recent united adoption of the United Nations Sustainable Development Goals (SDGs) and targets, it is important for us to remember that the recent successes in women’s health do not mean we have eliminated women’s reproductive health problems,” says Dr. C. N. Purandare, President elect of FIGO and Guest Editor of the 2015 World Report on Women’s Health.

“Our world has an unfinished agenda in women’s reproductive health,” says Dr. Richard M. Adanu, Co-Guest Editor of the 2015 World Report on Women’s Health and Editor of the International Journal of Gynecology and Obstetrics (IJGO), FIGO’s journal. “This Report shows us there are many women’s health challenges we have not overcome and we need to collectively strategize to find new approaches or to persist with proven and successful interventions,” adds Dr. Adanu.

The Report articles feature work in these areas:

- Maternal health
  -maternal deaths, obstetric care, perinatal morbidity, personalized medicine, type 2 diabetes prevention, new drug regimens for HIV in pregnancy, induction of labor and cesarean delivery.
- Reproductive health
  -cancer of the cervix, HPV vaccination prevention, breast cancer, adolescent sexual and reproductive health, newborn deaths, abuse and disrespect during childbirth, access to safe legal abortion, methods of contraception, fistula surgery training.
- Leadership and management
  -Task shifting and the role of health professional organizations in improving maternal and newborn health

Please see the attached Backgrounder for a brief description of the Report articles.
The 2015 World Report on Women’s Health is published by FIGO every three years to coincide with its World Congress.

**The International Federation of Gynecology and Obstetrics (FIGO)** is a non-profit organization that brings together obstetrical and gynecological associations from 125 countries/territories worldwide. It is dedicated to the improvement of women’s health and rights and to the reduction of disparities in healthcare available to women and newborns, as well as to advancing the science and practice of obstetrics and gynecology. Based in London, the organization hosts a triennial World Congress that draws more than 7,000 women’s health scientists, clinicians, and other allied health professionals to present the latest science and best clinical practice in obstetrics and gynecology.

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**About The International Federation of Gynecology and Obstetrics (FIGO)**

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Chapter Headings and Article Descriptions:

**Editorial**

*The unfinished agenda of women’s reproductive health*
Chittaranjan Narahari Purandare, Richard Adanu

**Maternal Health**

*Strengthening accountability to end preventable maternal deaths*
Matthews Mathai, Thandassery R. Dilip, Issrah Jawad, Sachiyoh Yoshida
Across 60 per cent of the world, where there is no civil registration system, there is little or no data about maternal deaths. This article describes role of the Maternal Death Surveillance and Response (MDSR) system established to revitalize the accountability of national governments to provide better information and to tackle the real causes of maternal mortality.

*Emergency obstetric care: Making the impossible possible through task shifting*
Caroline Schneeberger, Matthews Mathai
The majority of global maternal deaths occur in Sub-Saharan Africa and Southern Asia due to preventable and treatable complications such as hemorrhage, hypertensive disorder, prolonged and obstructed labor and sepsis. This article describes the advantages and disadvantages of task shifting in emergency obstetric care (EmOC) and the role of this approach in improving maternal and newborn health in the short and long term. Task shifting is the act of moving tasks to healthcare workers with shorter training for emergency obstetric care.

*Moving beyond silos: How do we provide distributed personalized medicine to pregnant women everywhere at scale? Insights from PRE-EMPT*
Peter von Dadelszen (UBC Vancouver), Laura A. Magee, Beth A. Payne, Dustin T. Dunsmuir, Sharla Drebit, Guy A. Dumont, Suellen Miller, Jane Norman, Lee Pyne-Mercier, Andrew H. Shennan, France Donnay, Zulfiqar A. Bhutta, J. Mark Ansermino
Pre-eclampsia remains a leading cause of maternal and perinatal morbidity and mortality worldwide. This article discusses the need to look beyond single clinical entities (e.g. pre-eclampsia, postpartum hemorrhage, obstetric sepsis) and to look for an integrated approach that will provide evidence-based personalized care to women wherever they encounter the health system.

*Prevention of type 2 diabetes among women with prior gestational diabetes mellitus*
Moshe Hod, Eran Hadar, Luis Cabero-Roura
The morbidity and mortality rates related to diabetes are constantly rising and spreading throughout the world. Prevention is a key aspect in the battle against the disease. Obstetricians play a critical role in the fight. This article discusses the prevention of type 2 diabetes among women diagnosed with gestational diabetes.

*New drug regimens for HIV in pregnancy and a national strategic plan to manage HIV: A South African perspective*
Nnabuike C. Ngene, Jagidesa Moodley
In 2012, approximately 35 million people, 70 per cent of whom were women, were living with HIV infection worldwide. South Saharan Africa accounts for 71 percent of this figure. This article describes South Africa’s new HIV drug regimen and national strategic HIV management plan, their outcomes and challenges and the implications of further reductions in mother-to-child transmission rates.

**Quality assurance: The 10-Group Classification System (Robson classification), induction of labor, and cesarean delivery**

Michael Robson, Martina Murphy, Fionnuala Byrne

Quality assurance in labor and delivery is needed. The method must be simple and consistent and be of universal value. In April 2015, the World Health Organization (WHO) proposed the 10-Group Classification System (TGCS) be used as a global standard for assessing, monitoring, and comparing cesarean delivery rates within and between healthcare facilities. At the present time only the Society of Obstetricians and Gynecologists of Canada and the WHO have formally endorsed the system. This article describes the TGCS methodology using data for 2013 from the National Maternity Hospital, Dublin Ireland.

**Reproductive Health**

**Cancer of the cervix: Early detection and cost-effective solutions**

Lynette Denny, Walter Prendiville

More than 85 percent of cervical cancer cases and deaths occur in low-resource countries where the initiation and/or maintenance of cervical cancer screening programs have proved impossible. This article argues that prevention costs less than a cure.

**HPV vaccination: The most pragmatic cervical cancer primary prevention strategy**

Rengaswamy Sankaranarayanan

HPV vaccination is now implemented in national programs in 62 countries, including some low- and middle-income countries. Early findings from routine national programs in high-income countries are instructive to encourage low- and middle-income countries with a high risk of cervical cancer to introduce HPV vaccination and cervical screening programs. This article discusses the most pragmatic prevention strategy.

**A historic and scientific review of breast cancer: The next global healthcare challenge**

Sven Becker

Breast cancer is fast becoming the leading cause of oncologic morbidity and mortality among women worldwide. It is a highly curable disease when detected early, and an inevitable mortal disease when discovered too late. This article provides an overview of current state-of-the-art treatment strategies and explains the contributions of different specialties to optimal and individualized care for breast cancer patients.

**Adolescent sexual and reproductive health: The global challenges**

Jessica L. Morris, Hamid Rushwan

Adolescent sexual and reproductive health comprises a major component of the global burden of sexual ill health. Sixteen million girls aged 15-19 give birth each year, which is approximately 11 percent of all births worldwide. Ninety-five percent of these births occur in low-to-middle-income countries. This article discusses the global issue of adolescent sexual and reproductive health including the barriers and challenges, and opportunities and potential solutions. It also discusses current FIGO work in this important area.
Ending preventable newborn deaths in a generation
Nadia Akseer, Joy E Lawn, William Keenan, Andreas Konstantopoulos, Peter Cooper, Zulkifli Ismail, Naveen Thacker, Sergio Cabral, Zulfiqar A Bhutta
Almost half of under-five deaths are newborns, yet 80 per cent of these are preventable using cost-effective interventions. This article discusses the Every Newborn action plan and its goal of reducing neonatal deaths and stillbirths to 10 per 1000 births by 2035. The plan provides an evidence-based framework for scaling up of essential interventions across the continuum of care with potential to prevent the deaths of approximately three million newborns, mothers and stillbirths every year.

The global epidemic of abuse and disrespect during childbirth: History, evidence, interventions, and FIGO’s mother–baby friendly birthing facilities initiative
Suellen Miller, Andre Lalonde
Recent evidence indicates that disrespectful/abusive/coercive service delivery by skilled providers in facilities, which results in actual or perceived poor quality of care, is directly and indirectly associated with adverse maternal and newborn outcomes. This article reviews the evidence for disrespectful/abusive care during childbirth facilities including discussing one strategy—the Mother and Baby Friendly Birth Facility Initiative, which has been recently implemented by FIGO with global partners.

What can obstetrician/gynecologists do to support abortion access?
Alice G. Mark, Merrill Wolf, Alison Edelman, Laura Castleman
Unsafe abortion causes approximately 13 percent of all maternal deaths worldwide, with higher rates in areas where abortion access is restricted. This article discusses what can obstetrician and gynecologists do to support abortion access and beyond to reduce a preventable cause of maternal mortality.

Evidence supporting broader access to safe legal abortion
Anibal Faúndes, Iqbal H. Shah
Unsafe abortion continues to be a major cause of maternal death. A strong body of accumulated evidence shows that the simple means to drastically reduce unsafe abortion-related maternal deaths and morbidity is to make abortion legal and institutional termination of pregnancy broadly accessible. Despite this evidence, abortion is denied even when the legal condition for abortion is met. This article aims to contribute evidence to support broader access to safe legal abortion.

Global trends in use of long-acting reversible and permanent methods of contraception: Seeking a balance
Ritu Joshi, Suvarna Khadiikar, Madhuri Patel
Unintended pregnancies remain a substantial global public health issue despite considerable advances in contraceptive technologies. However, in low-resource countries, it has been estimated that 222 million women are not using any contraceptive methods to delay or stop childbearing. This article discusses the reasons for the reduced uptake as well as the necessary solutions.

Global efforts for effective training in fistula surgery
Sohier Elneil
Obstetric fistulas remain a major health problem in Africa and Asia. Access to effective and safe obstetric care, including cesarean delivery, is often limited in these countries. However, many positive changes have taken place in the last decades with more women being treated, more specialized units being developed and more doctors being trained. This article discusses the important work the FIGO and
partners’ competency-based training program is doing in this field to ensure a holistic approach to medical and surgical treatment, rehabilitation, and follow-up.

**Leadership and Management**

*Task shifting: A key strategy in the multipronged approach used in India to reduce maternal mortality*

*Himanshu Bhushan, Ajey Bhardwaj*

With a population of 1.2 billion in India, significant differences between richer and poorer nations exist in the availability of healthcare workers. Task shifting from specialist to non-specialist doctors is an important strategy that is being implemented to overcome the critical shortage of healthcare workers by using the human resources available to serve the vast population. This article provides an overview of the maternal health challenges, shares important steps in program implementation and shows how challenges can be overcome to address large-scale public health issues in low-resource countries.

*The role of health professional organizations in improving maternal and newborn health: The FIGO LOGIC experience*

*David J. Taylor*

Despite much progress heralded in a recently released multi Maternal Mortality Estimation Inter-Agency Group analysis that there is a decline in the number of women worldwide who died from complications during pregnancy and childbirth from 546,000 deaths in 1990 to 287,000 deaths in 2010, the decline recorded by low-income countries is negligible. South Saharan Africa and South Asia accounted for 85 percent of all maternal deaths globally. This article discusses the successful work of the FIGO Leadership in Obstetrics and Gynecology for Impact and Change (LOGIC) Initiative in Maternal and Newborn Health to improve the internal and external capacity of eight national professional organizations of obstetrics and gynecology in six African and two Asian countries.