

Reproductive, maternal, newborn, and child health

The reproductive, maternal, newborn, and child health category casts a wide net, encompassing maternal disorders like maternal hemorrhage and ectopic pregnancy, to neonatal sepsis and jaundice, to vaccine-related funding. Taken together, the burden of maternal and neonatal disorders is most felt in sub-Saharan Africa (with Pakistan also experiencing a high rate of DALYS due to maternal and neonatal disorders), per the Global Burden of Disease Study 2019. As a group, maternal and neonatal disorders caused over 2 million deaths in 2019.

By cause, neonatal preterm birth and neonatal encephalopathy caused the most burden in 2019, leading to over 650,000 and 550,000 global deaths, respectively. But strides have been made over the past few decades: since 1990, the rate of deaths due to neonatal preterm birth has gone down 63.8%, and deaths caused by maternal hemorrhage have gone down 51.1%, from 95,100 in 1990 to 46,500 in 2019.

Altogether, \$13.0 billion in development assistance for health went to reproductive, maternal, newborn, and child health in 2020, a decrease of 4.2% since 2019. By region, sub-Saharan Africa (driven by Nigeria and Ethiopia) was the largest recipient of development assistance for reproductive, maternal, newborn, and child

health in 2018, receiving \$2.8 billion, or 7.1%, of 2018 development assistance for health. South Asia (driven by Pakistan and India) received \$1.0 billion (2.5%).

Historically, US bilateral has been a major disbursing agency for development assistance for reproductive and maternal health, disbursing \$0.9 billion in support in 2020 (Figure A). Since 2009, NGOs and international foundations have disbursed \$1.4 billion, making them also a top

disbursing agency of reproductive and maternal health funds. Family planning and maternal health are the program areas to which most of these funds were targeted (Figure B), and the US was the dominant source of funding (\$1.1 billion in 2020) for maternal and reproductive health. For newborn and child health, Gavi (\$2.0 billion in 2020) and the UN agencies (\$2.2 billion in 2020) have been the main agencies through which development assistance funds have been disbursed in the recent past (Figure D). Funds to support newborn and child health have originated from a few sources including the US, the UK, the Bill & Melinda Gates Foundation, and corporations (Figure F). Immunization (\$3.4 billion in 2020) and nutrition (\$2.0 billion in 2020) are the key program areas that these funds have supported (Figure E).

Figure A

*2019 and 2020 estimates are preliminary

CEPI = Coalition for Epidemic Preparedness Innovations
Gavi = Gavi, the Vaccine Alliance
NGOS = Non-governmental organizations
PAHO = Pan American Health Organization
UNAIDS = Joint United Nations Programme on HIV/AIDS
UNFPA = United Nations Population Fund
UNICEF = United Nations Children's Fund
WHO = World Health Organization

"Regional development banks" include the African Development Bank, the Asian Development Bank, and the Inter-American Development Bank. "Other bilateral development agencies" include Austria, Belgium, Denmark, Finland, Greece, Ireland, Italy, South Korea, Luxembourg, the Netherlands, New Zealand, Norway, Spain, Sweden, Switzerland, the United Arab Emirates, the European Commission, and EEA.

FIGURE A Development assistance for reproductive and maternal health by channel of assistance, 1990–2020

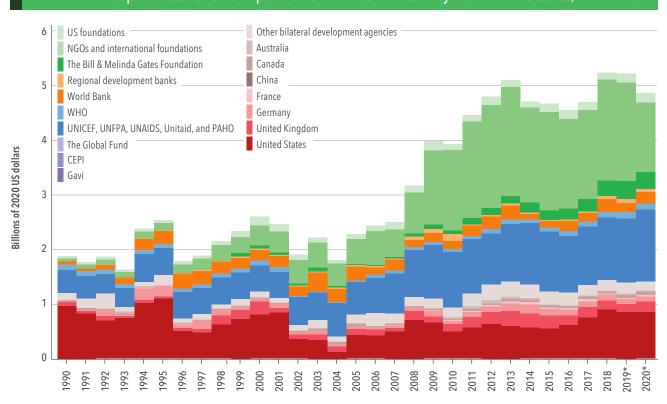




Figure B

*2019 and 2020 estimates are preliminary.

"Other" captures development assistance for health for which we have program area information but which is not identified as being allocated to any of the program areas listed.

Figure C

*2019 and 2020 estimates are preliminary.

IBRD = International Bank for Reconstruction and Development.

"Other governments" include Afghanistan, Angola, Argentina, Austria, Azerbaijan, Bangladesh, Belgium, Bhutan, Brazil, Brunei, Bulgaria, Côte d'Ivoire, Cameroon, Central African Republic, Chad, Colombia, Croatia, Czechia, Democratic Republic of the Congo, Denmark, Egypt, Estonia, Ethiopia, Finland, Gabon, Greece, Guinea, Hungary, Iceland, India, Indonesia, Iran, Iraq, Ireland, Italy, Jamaica, Jordan, Kenya, Kuwait, Latvia, Lebanon, Libya, Lithuania, Luxembourg, Madagascar, Malaysia, Malta, Monaco, Myanmar, New Zealand, Nigeria, Oman, Pakistan, Palestine, Peru, Poland, Portugal, Qatar, Romania, Russia, São Tomé and Príncipe, Saudi Arabia, Serbia, Singapore, Slovakia, Slovenia, South Africa, South Korea, South Sudan, Sudan, Sweden, Switzerland, Syria, Taiwan (province of China), Thailand, Togo, Turkey, Uganda, Ukraine, United Arab Emirates, Yemen, and Zimbabwe. "Other sources" captures development assistance for health for which we have source information but which is not identified as originating within any of the sources listed. Health assistance for which we have no source information is designated as "Unidentified."

FIGURE B Development assistance for reproductive and maternal health by program area, 1990–2020

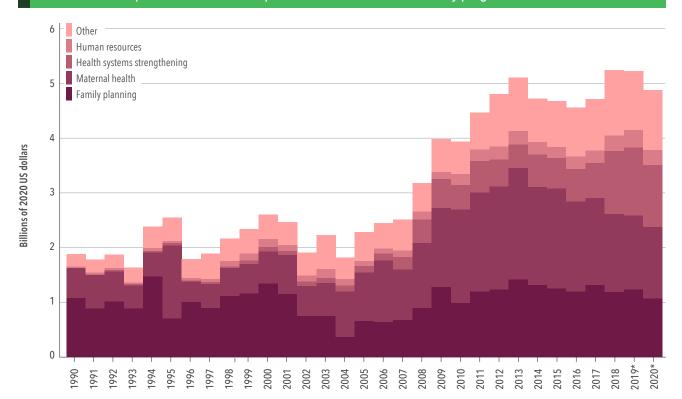
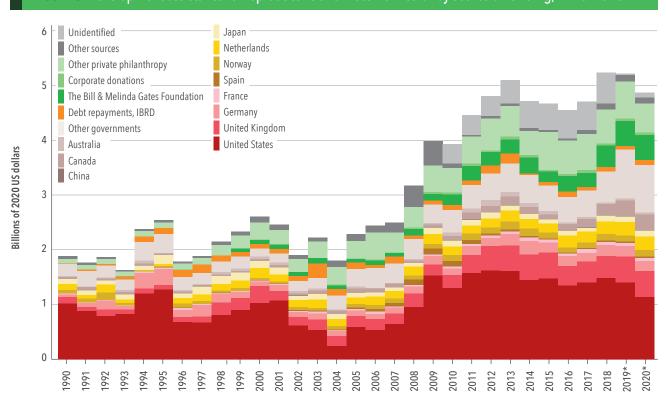
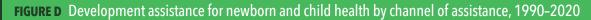


FIGURE C Development assistance for reproductive and maternal health by source of funding, 1990–2020







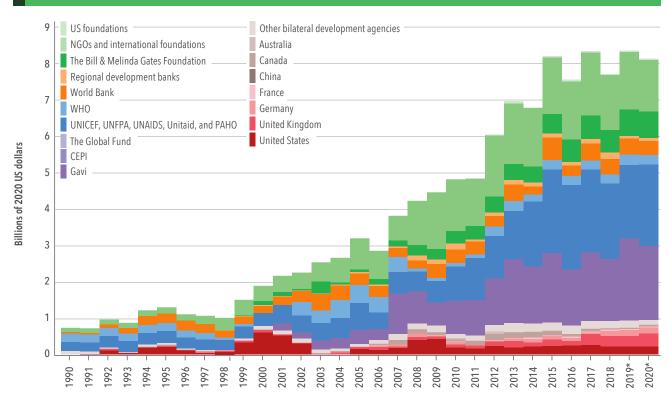


FIGURE E Development assistance for newborn and child health by program area, 1990–2020

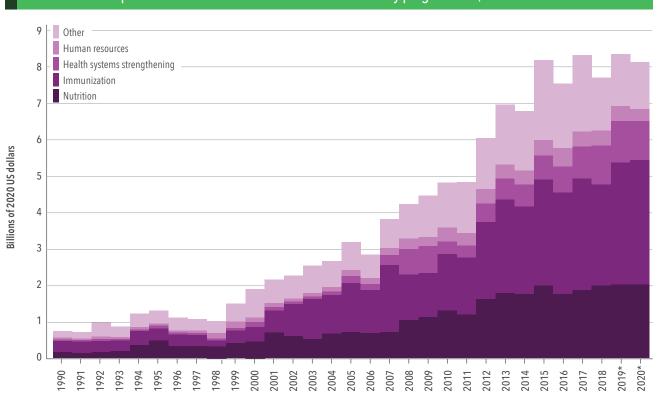




FIGURE F Development assistance for newborn and child health by source of funding, 1990–2020

