WOMEN'S DECISION MAKING IN THEIR OWN HEALTH CARE

When women are empowered they can take charge of their own health, from pre-conception, through pregnancy and birth.

INADEQUATE HEALTH FACILITIES

- Only 25% hospitals have all medicines needed to manage serious complications.
- Only 33% of government health facilities can support quality sterilisation of delivery equipment.
- Less than 6% of health workers know all the signs of Post Partum Haemorrhage when questioned.
**Maternal Mortality Ratio (Maternal deaths per 100,000 live births)**

Africa has the highest maternal mortality ratio in the world, and the lowest proportion of births attended by skilled health workers. Access to good quality care during pregnancy, childbirth and the postpartum period are key to achieving MDGs 4 and 5.

The poorest women are more likely to die in pregnancy and childbirth.


**Progress Towards the Abuja Health Commitment**

The Abuja Health Commitment made by the African Union in April 2001 was to allocate a minimum of 15% of the national budget to addressing health issues.

Only 6% of Kenya’s national budget is allocated to health, and a quarter of this goes to HIV/AIDS. The figure spent on maternal health is not known but is clearly negligible.


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**Family Planning in Kenya**

Family planning is to women’s health, as immunisation is to child survival: it can prevent around a third of maternal deaths.

**Sources:** Kenya DHS 2003

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**Percentage of Deliveries in a Health Facility**

In Kenya, more than half of women are giving birth at home, almost always without the skilled care that could save their lives. In some regions less than 10% of women give birth in a health facility.

**Source:** Kenya DHS 2003