



In the Name of God, the Compassionate, the Merciful

Address by

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to the

**CONSULTATIVE MEETING FOR STRENGTHENING MATERNAL, PERINATAL
AND NEONATAL HEALTH SURVEILLANCE SYSTEMS IN THE EASTERN
MEDITERRANEAN REGION**

Beirut, Lebanon, 28–30 October 2010

Your Excellency, Dear Colleagues, Ladies and Gentlemen,

I have great pleasure in welcoming you to this consultative meeting for strengthening maternal, perinatal and neonatal health surveillance systems in the Eastern Mediterranean Region, starting today in this lively city of Beirut.

At the outset, I would like to express my sincere gratitude to His Excellency Dr Mohamed Jawad Khalife, Minister of Public Health, and the Government of Lebanon for kindly hosting this meeting and providing us with yet another opportunity to come together and learn from the experiences of each other. I would also like to extend my warm welcome to the participants and representatives of sister United Nations agencies and international organizations who are joining us in this endeavour. Special thanks go to our colleagues from the American University of Beirut, United States Centers for Disease Control and Prevention, and the Royal College of Obstetricians and Gynaecologists for their valuable support and contribution in bringing about this important activity.

Ladies and Gentlemen,

Surveillance is the monitoring of behaviour, activities or other changing information, usually of people in a community. It most usually refers to observation of individuals or groups by government organizations. Public health surveillance is usually focused on health data about a clinical syndrome that has a significant impact on public health, which is then used to drive decisions about health policies and programmes.

Unfortunately, information, reporting and surveillance systems of national reproductive health programmes continue to be inadequate and inefficient in identifying major determinants of reproductive health in many countries of the Region. This has resulted in lack of evidence-based programme planning and development. Hence, priority reproductive health programme areas, especially the health of mothers and newborn babies, have been left poorly addressed in these countries. Despite the international efforts and commitment to safe motherhood and child health, and the remarkable efforts made by countries, progress towards achieving the goal of reducing maternal and child mortality worldwide, including the Eastern Mediterranean Region, has been slow. The latest estimates show that in terms of levels of maternal and child death, the Eastern Mediterranean Region comes directly after the African Region. Every year in the Region, approximately 52 000 mothers die as a result of pregnancy-related complications and 868 000 children under 5 years of age die as a result of common preventable diseases of childhood. Forty per cent of under-five child mortality occurs in the neonatal period. Thus, investment in maternal and neonatal health is crucial to further reduction in maternal and child mortality and acceleration in achieving Millennium Development Goals 4 and 5.

Nonetheless, it is pleasing to note that some Member States have made extensive efforts towards improving national surveillance systems on maternal and neonatal health in a proactive manner. In order to address its prime objective of improving the health outcome of pregnant women and their newborns through a quality, technically-sound surveillance system, the National Collaborative Perinatal and Neonatal Network (NCPNN) of Lebanon, in collaboration with 27 hospitals, collected comprehensive information on almost a third of births that take place in the country. The NCPNN has also contributed to building national capacity in maternal, perinatal and neonatal surveillance through training professionals from other Member States, including: Bahrain, Jordan, Kuwait, Palestine, Saudi Arabia, Syrian Arab Republic, United Arab

Emirates and Yemen. The Regional Office has worked closely with, and has maintained, its support to NCPNN since it was established in 1998 in collaboration with the Ministry of Public Health in Lebanon. It is worth mentioning that networking and databases influence directly maternal and newborn health through identification of problems, implementation of intervention studies, and improving public awareness about life-saving practices. Expanding such successful experience to other Member States is crucial to fulfilling Regional Committee resolution EM/RC51/R.4. This resolution, of 2004, requested countries to "strengthen existing national surveillance systems to identify mortality and morbidity trends in children and mothers and adopt evidence-based interventions". It also requested the Regional Office to "support further the scaling-up of effective interventions in order to improve maternal and child health in the Eastern Mediterranean Region; assist the Member States to achieve the Millennium Development Goals; and assist Member States to conduct in-depth assessment of maternal mortality".

This meeting will determine the steps required for establishing an integrated maternal, perinatal and neonatal surveillance system under the umbrella of a collaborative network among private and public health care institutions in the Region. It will also identify appropriate mechanisms and actions for operating the network and utilizing the data generated in the participating countries and the Region in order to formulate supportive maternal and newborn health policies, implement evidence-based interventions, and conduct relevant research activities.

I wish you all the very best in the deliberations of this meeting. I am confident that this activity will achieve its objectives with admirable success and provide future direction to our activities in the crucial area of maternal and neonatal health.