
Commitment:
“To this end, the G8 undertake to mobilize as of today $5.0 billion of additional funding for disbursement over the next five years.”

- G8 Muskoka Declaration: Recovery and New Beginnings

Assessment:

<table>
<thead>
<tr>
<th>Country</th>
<th>No Compliance</th>
<th>Partial Compliance</th>
<th>Full Compliance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canada</td>
<td></td>
<td></td>
<td>+1</td>
</tr>
<tr>
<td>France</td>
<td>-1</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Germany</td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Italy</td>
<td>-1</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Japan</td>
<td>-1</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Russia</td>
<td>-1</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>United Kingdom</td>
<td>-1</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>United States</td>
<td>-1</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>European Union</td>
<td>-1</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Average Score</td>
<td></td>
<td></td>
<td>-0.67</td>
</tr>
</tbody>
</table>

Background:
According to the World Health Organization (WHO), “[t]he risk of a woman in a developing country dying from a pregnancy-related cause during her lifetime is about 36 times higher compared to a woman living in a developed country.” These deaths are, however, preventable through investment in “health systems and the quality of care.”

Two of the eight Millennium Development Goals focus on maternal, newborn, and child health (MNCH). Despite this, progress towards improving maternal health and reducing child mortality “has been unacceptably slow.” At the 2010 Muskoka Summit, Prime Minister Stephen Harper championed a “major initiative to improve the health of women and children in the world’s poorest regions.” While the G8 has previously undertaken many development and health related commitments, this specific funding initiative is new. Agreed to as part of the Muskoka Initiative on Maternal, Newborn and Child Health, and signed at the 2010 G8 Summit, the above commitment refers to funding for maternal, newborn, and child health in the

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Developing the world. Since the 2010 Muskoka Summit, the Millennium Development Goal Summit in September 2011 secured over US$40 billion in member pledges and announced the Global Strategy for Women’s and Children’s Health.

Commitment Features:
This commitment focuses on the mobilization and disbursement of funding additional to previously committed official development assistance (ODA). As such, full compliance will require the pledge of new monies, and funds that have been already pledged or delegated will not be counted. Additionally, funding must be tied to a timeline for disbursement not exceeding five years.

The US$5 billion commitment is a total for the G8 as a whole and does not represent individual country contributions. As part of the initiative, members made specific announcements outlining their respective monetary commitments, which are divided as indicated in Table 2-1.

Specific programs and initiatives for the allocation of funding have not been outlined in the commitment or communiqué. The Muskoka Initiative includes, but is not limited to: “prenatal care; attending childbirth; postpartum care; sexual and reproductive care and services; health education; treatment and prevention of diseases, including infectious diseases; prevention of mother-to-child transmission of HIV; immunization; basic nutrition; safe drinking water and sanitation.” G8 members are able to distribute funding in various ways as long as the funding is specifically attributed to addressing MDG 4, to reduce Child Mortality and MDG 5, to the improvement of Maternal Health.

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Table 2-1: G8 Commitments to the Muskoka Initiative on Maternal, Newborn and Child Health (Total Contributions)

<table>
<thead>
<tr>
<th>Country</th>
<th>New Funding</th>
<th>Commitment Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canada</td>
<td>$1.1 billion</td>
<td>2010-2015</td>
</tr>
<tr>
<td>France</td>
<td>€500 million</td>
<td>2011-2015</td>
</tr>
<tr>
<td>Germany</td>
<td>$500 million</td>
<td>2010-2015</td>
</tr>
<tr>
<td>Italy</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Japan</td>
<td>$500 million</td>
<td>2010-2015</td>
</tr>
<tr>
<td>Russia</td>
<td>$75 million</td>
<td>2011-2013</td>
</tr>
<tr>
<td>United Kingdom</td>
<td>$600 million</td>
<td>2010-2011</td>
</tr>
<tr>
<td>United States</td>
<td>$1.3 billion</td>
<td>2010-2011</td>
</tr>
<tr>
<td>European Union</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

2010-11 Pledges

<table>
<thead>
<tr>
<th>Country</th>
<th>Pledge</th>
<th>Contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canada</td>
<td>$220 million</td>
<td>$284.6 million</td>
</tr>
<tr>
<td>France</td>
<td>€125 million</td>
<td>$0</td>
</tr>
<tr>
<td>Germany</td>
<td>$100 million</td>
<td>$80 million</td>
</tr>
<tr>
<td>Italy</td>
<td>N/A</td>
<td>$1.2 million</td>
</tr>
<tr>
<td>Japan</td>
<td>$100 million</td>
<td>$10 million</td>
</tr>
<tr>
<td>Russia</td>
<td>$25 million</td>
<td>$0</td>
</tr>
<tr>
<td>United Kingdom</td>
<td>$600 million</td>
<td>$0</td>
</tr>
<tr>
<td>United States</td>
<td>$1.3 billion</td>
<td>$14.331 million</td>
</tr>
<tr>
<td>European Union</td>
<td>N/A</td>
<td>$4.5 million</td>
</tr>
</tbody>
</table>

Scoring Guidelines:

-1 Member allocates none or less than half of the funding it pledged to specific MNCH initiatives.
0 Member allocates more than half of the funding it pledged to specific MNCH initiatives.
+1 Member allocates the full funding it pledged to specific MNCH initiatives.

Lead Analyst: Natalie Antonowicz

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166 Italy pledged a lesser commitment at approximately 25 million
169 “No announcements have been made outlining the specific contributions of Italy and the EU. However, the contributions of these two G8 members must total $600 million or 12% of the total G8 funding, in order to complete the full $5 billion commitment.” Subsequently, compliance with this commitment for these two members will be assessed within that range.
Canada: +1
Canada has fully complied with its commitment to allocate US$220 million of funding towards maternal and child health, as per the Muskoka Initiative.

In January 2011, it was announced that Prime Minister Stephen Harper will co-chair a United Nations commission that will oversee the progression of maternal and child health pledges, and the setting of goals to fulfill these pledges. This commission will oversee the distribution of US$40 billion worth of pledges, and will seek "to complete a common reporting mechanism" for maternal and child health initiatives. Prime Minister Harper has also restated his commitment to maternal and child health as one of Canada's key priorities.

On 21 September 2010, in a speech at the UN Summit on the Millennium Development Goals, Prime Minister Harper noted that as host of the Muskoka G8 Summit, Canada “pushed leaders to fund a maternal health initiative” and pledged “$1.1 million in new money to the cause.” Prime Minister Harper also told the UN that “Canada will increase its contributions to the Global Fund, which fights HIV-AIDS, malaria and tuberculosis in developing countries” giving “[CA]$540 million over three years to the fund, which already receives $150 million a year from Canada.” This amounts to CA$180 million per year.

In October 2010, Canada made a new commitment of CA$50 million to the Global Alliance for Vaccines and Immunization (GAVI Alliance) as a part of its contribution to the G8 Muskoka initiative.

On 1 November 2010, Minister of International Cooperation Beverly Oda announced that Canada will provide CA$75 million over five years for nutrition supplements for developing nations, including micronutrients such as iodine and vitamin A, as part of its G8 commitment to maternal and child health as well as CA$58.5 million for polio eradication.

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On 20 July 2010, at the International AIDS Conference in Vienna, Minister of Health Leona Aglukkaq announced that Canada pledges CA$30 million to prevent mother-to-child transmission of HIV/AIDS in developing countries.\(^\text{177}\)

Canada has committed additional funding towards maternal, newborn, and child health programs, totalling over $220 million. Thus, Canada has been assigned a score of +1.

*Analyst: Nehal Tolia*

**France: -1**

France has not complied with its commitment to allocate €125 million during the 2010-2011 commitment period. However, the French commitment to maternal, newborn, and child health (MNCH) is slated to start in 2011.

France has had a long commitment to MNCH and is committed “improving health throughout the world.”\(^\text{178}\) On 20 September 2010, French president Nicolas Sarkozy delivered a speech at the Millennium Development Goals Summit in New York about a sustained commitment towards maternal, new born, and child health.\(^\text{179}\) Although France has pledged to donate US$400 million over five years,\(^\text{180}\) for maternal and child health initiatives, no concrete action towards this goal has been taken since the Muskoka Summit.

At the 16th Ordinary Session of the Assembly of Heads of State and Government of the African Union, held in January 2011, French President Nicholas Sarkozy stated that France is striving towards achieving "innovative financing" for development and health, but did not specify any new funding or initiatives.\(^\text{181}\)

Thus, France has been assigned a score of -1 for failing to distribute any portion of its €125 million maternal, newborn, and child health pledge.

*Analyst: Natalie Antonowicz*

**Germany: 0**

Germany has partially complied with its commitment to allocate US$100 million of funding towards maternal, newborn, and child health, as per the Muskoka Initiative.

The German Parliamentary State Secretary to the Federal Minister for Economic Cooperation and Development, Gudrun Kopp, announced on 20 October 2010 that funding for family planning

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Thus, Germany has been given a score of 0, as it has allotted more than half of the US$100 million pledged for maternal, newborn, and child health.

\textit{Analyst: Tina Xu}

\textbf{Italy: -1}

Italy has not complied with its commitment to allocate additional funding towards maternal, newborn, and child health, as per the Muskoka Initiative.


In December 2010 the Italian government committed US$1.2 million in collaboration with the United Nations Children Fund (UNICEF) for women and children in South Sudan “under the immunization and maternal health project.”\footnote{South Sudan: Italy donates $1.2m to support women and children, Sudan Tribune (Juba) 13 December 2010. Date of Access: 17 January 2011. http://www.sudantribune.com/South-Sudan-Italy-donates-1-2m-to,37260.} The Ministry of Foreign Affairs expects to allocate
€326 million for 2010 and €210 million for 2011-2012 for Italian overseas development assistance through the General Directorate for Development and Cooperation for 2010-2012.189 However, the country has not pledged any additional assistance for maternal, newborn, and child health since the 2010 Muskoka Summit.

Thus, Italy has been given a score of -1, as it has pledged less than half of the allocated funding to maternal, newborn, and child health.

Analyst: Nehal Tolia

Japan: -1

Japan has complied not with its commitment distribute US$100 million for maternal and child health initiatives during the 2010-2011 compliance cycle.

On 24 September 2010 it was reported that Prime Minister Naoto Kan reaffirmed the Government of Japan’s commitment to US$500 million made at the Muskoka Summit when he pledged US$5 billion over five years to the Millennium Development Goals of maternal and child health and HIV, tuberculosis and malaria treatment at the United Nations.190 At the United Nations Millennium Development Goals Summit, Japan committed “$8.5 billion over five years starting in 2011 to help improve the health of mothers and babies.”191 This initiative intends to “ensure the continuum of care from pregnancy to post natal stage.”192 However, these funds have not been formally disbursed.

In January 2011 Japan donated US$10 million to maternal and child health, among other causes, though the United Nations Relief and Works Agency for Palestine Refugees in the Near East.193

Thus, Japan has been assigned a score of -1 for failing to assign it’s pledged amount for maternal and child health initiatives.

Analyst: Michael Hanrahan

Russia: -1

Russia has not complied with its commitment to the allocation of new funds to Maternal, Newborn and Child Health Initiative.

On 26 June 2010, at the G8 Muskoka Summit Russia announced a US$75 million contribution over three years to the Muskoka Initiative, aimed at addressing maternal, newborn and under-five child health (MNCH).194

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According to Russian Ministry of Foreign Affairs Spokesman, Andrei Nesterenko, the Muskoka Initiative will be implemented by Russia through a program for the professional improvement of maternal & child health specialists from the Commonwealth of Independent States (CIS), Africa, Asia and Latin America. Russia has announced an intention to hold “series of scientific and educational conferences devoted to maternal and child health from 2011 to 2015.” But no funds have been allocated so far.

On 14 October 2010, the Russian Government committed to polio vaccine purchase and transfer to the CIS countries and these countries’ personnel training. However, maternal, newborn, and child health was not specified under this contribution, thus, this does not constitute compliance.

Russia has reaffirmed its commitment made at the 2010 G8 Muskoka Summit; however, it has not yet allocated funds towards Maternal, Newborn, and Child Health initiatives. Thus, Russia has been awarded a score of -1.

Analyst: Yuriy Zaytsev

United Kingdom: -1
The United Kingdom has not complied with its commitment to the allocation of new funds to Maternal, Newborn and Child Health.

The United Kingdom pledged that it “will push hard in 2010 to make greater progress in tackling maternal and infant mortality.” On 25 June 2010, Prime Minister David Cameron echoed this following the Muskoka Summit. Further commitment to this goal was reaffirmed by Deputy Prime Minister Nick Clegg, when he voiced support for the UN’s Millennium Development goals by “reorienting Britain’s aid programme to put [the needs of women and children] at its core.” However, the UK has not distributed any additional funding.

At the 2010 MDG Summit in New York, the UK announced it is “currently re-orienting its aid programme to put women at the heart of its development efforts and is focusing rigorously on results, including a review of all bilateral and multilateral aid programmes to maximise impact on mothers and babies.” The UK announced additional annual funds to support Maternal, Newborn and Child Health by 2012, the “UK will provide an annual average of 1.1 billion for Maternal, Newborn and Child Health from 2010 to 2015. This means that over this period the UK

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will spend an additional £2.1 billion on MNCH. This commitment adds an additional £1.6 billion to the commitment of £490 the UK made for the 2010 and 2011 at the Muskoka Summit.\(^{201}\)

The UK has emphasized the importance of Maternal, Newborn and Child health. 27 July 2010 the UK government announced its pledge to “family planning at the heart of its approach to women’s health in the developing world in an attempt to reduce the persistently high number of women who die in pregnancy and childbirth.”\(^{202}\) On 21 September 2010 Andrew Mitchell announced a new research programme “designed to identify specific and cost effective solutions to chronic malnutrition”\(^{203}\) in women and children.

On 25 November 2010, the UK government announced a partner initiative with UNICEF to protect “nearly 1 million children under the age of five”\(^{204}\) by distributing “over 2 million life-saving bednets as well as teach communities the importance of sleeping under them.”\(^{205}\) However, this initiative does not distribute funds, so does not constitute compliance. Finally, on 31 December 2010, the British government unveiled a comprehensive strategy to address malaria and to prevent deaths during pregnancy and childbirth.\(^{206}\)

Although, the UK has placed an emphasis on the importance of maternal, newborn and child health, it has not made official allocations of funds towards MNCH initiatives.

Thus, the United Kingdom has been assigned a score of -1, as it has not distributed the US$600 million it pledged for maternal and child health initiatives.

**United States: -1**
The United States has not complied with its commitment to mobilize US$1.3 billion of additional funding for funding for maternal, newborn, and child health initiatives.

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On 24 November 2010, the United States Agency for International Development (USAID) donated US$4.9 million in health equipment to rural areas of Kenya, with the aim of improving service delivery to mothers and children in this region. The funding includes machines as well as technical and financial support in averting maternal mortality rates and newborn deaths in rural Kenyan health centres.207

On 22 November 2010, USAID gave a US$731,000 grant, which to be used for the strengthening of maternal and child healthcare in the East, Central and Southern African Health Community (ECSA-HS). The funds will be administered over a period of one year, and will focus on advocacy for changes in pre and post-natal care guidelines for countries in this region. The money will also go towards developing means of monitoring family planning, as well as helping reduce maternal and newborn deaths.208

On 7 October 2010, USAID, together with Nigerian partners Diamond Bank Plc and Accion Microfinance Bank Limited, announced a joint commitment of US$8.7 million to develop Nigeria’s private health sector, which accounts for two thirds of the country’s healthcare delivery. The funding will be disbursed through longer-term loans given out by the Development Credit Authority. The loans will be used to enhance maternal, child, and reproductive health services by purchasing new equipment, new medicines, and providing training to health care staff.209

On 22 September 2010, U.S. Secretary of State Hillary Clinton, along with other global leaders, announced an alliance for a global initiative aimed at increasing funding for family planning, maternal health, and post-natal care health over the next five years. The Alliance will target developing countries with the goal of delivering more aid related to the Millennium Development Goals 4 and 5. Through the collaboration of USAID and other international development government agencies, a more concentrated effort on strengthening health systems and access to maternal and child health care will be carried out. Countries in sub-Saharan Africa and South Asia will be the main targets of this initiative.210

Thus, the United States has been assigned a score of -1 for assigning less than half of its US$1.3 billion pledge.

*Analyst: Tara Stankovic*

**European Union: -1**
The European Union has not complied with its commitment to provide additional funding for maternal and child health programs in developing countries.

EU actions at a state level have been carried out since the G8 Summit in June 2010, but as a separate institution the European Union has not taken decisive action in allotting funds.

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On 23 July 2010, European Commissioner Piebalgs addressed members of the African Union Summit by stressing that progress for achieving MDG goals 4 and 5 is too slow and needs to be sped up. He said that “protecting the mothers and promoting the right to health for everybody are priority objectives for the EU.” He also emphasized that the African Union Member States and the EU both need to work together to achieve concrete progress in the areas of maternal, infant and child health.

The EU’s current financial contribution to MNCH is €310 million, for “strengthening health systems and universal access to health care.” On 26 October 2010, the EU committed to US$5.4 million in support of strengthening community’s capacities to improve MNCH in the East African region. On 24 November 2010 EU Commissioner for Development Andris Piebalgs, accompanied by a five member delegation announced “an innovative programme now being piloted in eight regions of the country.” This programme hopes to make “effective and inexpensive health services accessible to children and mothers is crucial if Uzbekistan is to achieve UN Millennium Development Goals 4 and 5.”

On 6 December 2010, leaders from the European Union and the African, Caribbean and Pacific Group (ACP) held talks in the Democratic Republic of Congo. The importance of tackling maternal mortality in childbirth was one of the main issues highlighted on the agenda. Although this topic was discussed at the talks, no programs or grants to address the problem were established.

Thus, the European Union has been awarded a score of -1 due to lack of financial support and commitment to Maternal, Newborn, and Child Health.

Analyst: Tara Stankovic

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