Introduction

This report was produced by the Commission on Women's Health in the African Region in response to Resolution AFR/RC58/RI of the WHO Regional Committee of Ministers of Health of Africa, which called for the establishment of a commission to generate evidence on the importance of women's health as a foundation for social and economic development. The Group was also mandated to document and analyse the key determinants of women's health in Africa and to make recommendations for its improvement; particular emphasis was put on the unacceptably high level of maternal mortality in sub-Saharan Africa, which is a matter of great concern to the World Health Organization and its Member States in the African Region.

Taking a holistic, life-course approach to the analysis of women's health, the report addresses not just public health issues but also the social, economic and cultural factors underlying the prevailing women's health status. It also identifies the interventions that are most likely to raise the social status of women, promote gender equity and enable women to contribute fully to social and economic development. This multisectoral analysis required a multidisciplinary approach to evidence gathering and evaluation in order to shed light on the often complex relationships between women's health and women's socioeconomic development in the African Region.

The data used to generate the evidence presented in the report are drawn from a wide range of sources including the World Health Organization, African Development Bank, United Nations Economic Commission for Africa, United Nations Children Fund and World Bank. Additional analysis of the burden of disease was done using Global Burden of Disease (GBD) databases. Data on women were selected from the above mentioned sources, and health status comparisons were made between the WHO African Region and other WHO regions. In our review of the relevant literature, high priority was given to articles published in peer-reviewed journals from the fields of anthropology, epidemiology, sociology, economics, demography and public health. Because it is important to have a full understanding of the methodology used in the preparation of this Report in order to view the recommendations that it makes in their proper perspective, a detailed description of the methodology is provided in the Appendix on pages 87–89.

To elucidate contextual specificity and local views, a survey on women in Africa was undertaken using e-mails, questionnaires and telephone interviews which served to gather qualitative information on local perceptions regarding pregnancy, childbirth, maternal mortality, roles of gender in health care and women's experiences in using health facilities. Important sources of this qualitative data included women themselves, particularly those who had extensive local knowledge of traditional health practices and women's health conditions. These women were required to have experience of local health facilities as patients. They were recruited from countries in various subregions in the African Region, namely, Burkina Faso, Côte d'Ivoire, Ghana and Guinea-Bissau (West Africa); Democratic Republic of Congo (Central Africa); and Kenya, Rwanda and South Africa (East and Southern Africa).

This report seeks to shed light on the interrelationships between issues that have often been neglected in the drawing up and implementation of public health policy aimed at improving women's health. Where significant gaps in knowledge regarding the relationships between women's health, and cultural and socioeconomic factors exist, the report identifies them and encourages other stakeholders to strive to fill them. Most importantly, the report draws attention to the many ways in which policy makers, with appropriately targeted and sustained investment, can have a profound impact on the health, well-being and empowerment of women in the African Region.



SS Protecting and promoting the health of women is crucial to health and development, not only for the health of today's citizens, but also for the health of future generations. 55

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