

Perspectives

World Health Day 2025: Time to Change Mindset Beyond Global Commitment to Maternal Health and Women's Well-Being

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ABSTRACT

The World Health Day 2025 calls for a global commitment to maternal health. Maternal health has long been a central focus in the global health agenda, prominently featured in both the Millennium Development Goals and Sustainable Development Goals. Substantial progress has been made in reducing maternal mortality through international collaboration. However, significant challenges persist, including reductions in global health financing and emerging threats such as climate change. Mindset changes are urgently needed for maternal health and broader global health governance. Sustainable investment and health system strengthening are imperative. Global health governance should be reformed through a paradigm shift toward an accountable, fair, efficient, and transparent ecosystem.

World Health Day 2025, to be celebrated on April 7, will launch “Healthy Beginnings, Hopeful Futures”, a year-long global campaign focused on advancing maternal and newborn health (1). This initiative emphasizes the critical need to eliminate preventable maternal and newborn deaths and calls for enhanced collaboration across governments, international organizations, and the global health community.

Each year, approximately 210 million women become pregnant, underscoring that maternal health is not a peripheral issue, but a central global health priority (2). Pregnancy, while a life-altering event, introduces elevated biological and social vulnerabilities, particularly for women in resource-limited settings. Obstetric complications, including hemorrhage, hypertensive disorders, and infections, remain the predominant causes of maternal mortality (3–4). Additionally, maternal mental health has emerged as a critical dimension requiring urgent attention (5). Maternal health also has profound intergenerational

implications. Undernutrition during pregnancy constitutes a major determinant of both childhood stunting and the subsequent development of obesity and non-communicable diseases in adulthood (6–8). Thus, maternal health is intrinsically linked not only to women's wellbeing but to the broader health trajectory of societies, particularly within the framework of sustainable development.

Progress and Milestones in Maternal Health

Maternal health has been a cornerstone of the global health agenda for decades, with significant milestones dating back to the 1976–1985 period (9). The United Nations (UN) Decade for Women, the Alma-Ata Declaration on Primary Health Care, and the Convention on the Elimination of All Forms of Discrimination Against Women collectively established the foundational framework for addressing maternal health as a global priority. Subsequently, maternal health was integrated as a central component of the UN's Millennium Development Goals (MDGs), which explicitly aimed to “reduce by three quarters, between 1990 and 2015, the maternal mortality ratio.” (10) In the transition to the Sustainable Development Goals (SDGs), maternal mortality was elevated to the first target under SDG 3, “Good Health and Well-being,” with the ambitious goal of reducing the global maternal mortality ratio to fewer than 70 deaths per 100,000 live births by 2030.

Financial investment has directly reflected the global commitment to maternal health. Development assistance for health (DAH) targeting reproductive and maternal health increased substantially from \$2 billion in 1990 to \$6.32 billion in 2013, stabilizing at \$6.46 billion by 2023. These resources have supported critical initiatives in family planning, maternal health, and health systems strengthening. Private philanthropic contributions have emerged as particularly significant, totaling 1.87 billion US dollars (USD) and constituting the largest funding source in

this domain. The United States remains the predominant governmental donor, contributing 1.85 billion USD, followed by multilateral contributions from other Organization for Economic Cooperation and Development (OECD) countries.

Substantial progress has been achieved in reducing maternal mortality through coordinated international collaboration. Between 1990 and 2015, maternal mortality decreased markedly from an estimated 390,185 deaths in 1990 to 275,288 in 2015 (11–12). This significant reduction was facilitated by comprehensive improvements in health systems, expanded access to essential care, and implementation of robust maternal health policies. From 2000 to 2020, the global maternal mortality ratio (MMR) declined by approximately 34%, from 342 deaths per 100,000 live births to 223 deaths per 100,000 live births (13). The absolute number of global annual maternal deaths also decreased substantially throughout this period, from 447,000 to 287,000, representing a reduction of more than one-third. Globally, the lifetime risk of a 15-year-old girl eventually dying from a maternal cause was nearly halved, declining from 1 in 120 in 2000 to 1 in 210 in 2020 (14).

Challenges Persist in Global Maternal Health

Despite this progress, significant challenges regarding health equity persist. In 2020, approximately 287,000 women died from pregnancy-related causes, with 95% of these deaths occurring in low- and middle-income countries (15). Sub-Saharan Africa and Southern Asia together accounted for 87% (253,000) of global maternal deaths in 2020 (14), highlighting the profound regional disparities that continue to impede progress. From 2000 to 2020, eight countries and territories experienced significant percentage increases in MMR, including the Bolivarian Republic of Venezuela, Cyprus, Greece, the United States, Mauritius, Puerto Rico, Belize, and the Dominican Republic (14). These trends underscore the urgent need for high-quality health services, particularly in crisis settings, unstable situations, and among vulnerable populations.

A reduction in funding and leadership for global maternal health programs threatens to reverse decades of progress, particularly in low- and middle-income countries. The COVID-19 pandemic prompted a substantial reallocation of health funding away from established priorities like maternal and child health

(16). Geopolitical tensions and societal divisions have further undermined the financial sustainability of maternal health programs. Many OECD countries have increasingly redirected financial resources toward geopolitical concerns, such as the ongoing crisis in Ukraine, diverting both attention and critical funding from essential maternal health interventions (17).

Emerging threats also challenge traditional vertical intervention programs. Climate change, with its far-reaching effects on environmental health, escalating heat exposure, food security, and migration, contributes to systemic instability and health system fragility, disproportionately affecting vulnerable populations — especially women and children (18–21). Pregnant women in resource-limited settings are particularly susceptible to climate-related disasters that disrupt healthcare systems and limit access to essential maternal care. Similarly, emerging infectious diseases and the potential for future pandemics pose additional strains on already fragile health systems. These global threats could potentially reverse decades of progress in maternal health without urgent coordinated action.

Mindset Changes Needed for Maternal Health and Broader Global Health Governance

To achieve the SDG target on maternal mortality and enhance women's long-term health and well-being, sustainable investment and health system strengthening are imperative. The majority of maternal deaths are preventable with access to high-quality healthcare. Health system strengthening, particularly at the primary healthcare level, must address the diverse spectrum of maternal and newborn health challenges, including obstetric complications, mental health disorders, noncommunicable diseases, and family planning needs. Integrating maternal health into broader health policies and social development frameworks is essential (22–23). Innovations in healthcare delivery — such as task-shifting to mid-level providers, digital health technologies, and community-based interventions — have demonstrated effectiveness in expanding care access, especially in underserved regions. Furthermore, addressing the intersection of maternal health with climate change and pandemic preparedness requires a holistic approach that prioritizes health system resilience and sustainability (24).

The current geopolitical landscape has exposed the

vulnerability of traditional vertical intervention programs that rely heavily on external development assistance for health. The time has come to change the mindset for global maternal health and women's well-being. Global health governance must be reformed into an accountable, fair, efficient, and transparent ecosystem. At its foundation, health should be established as a fundamental priority across all nations. A strengthened primary healthcare system should serve as the foundation for supporting healthy pregnancies, enhancing postnatal care, and advancing the broader objective of creating a healthier world.

On World Health Day 2025, global partners should reaffirm their commitment to reducing maternal mortality and improving women's long-term health and well-being by increasing both financial contributions and technical support. Simultaneously, developing countries must enhance domestic health investments to collaboratively build resilient health systems at national, regional, and global levels.

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