H.E. António Guterres
Secretary General
United Nations

Your Excellency,

MALAYSIA'S COMMITMENT FOR SECRETARY-GENERAL'S GLOBAL STRATEGY FOR WOMEN'S, CHILDREN'S, ADOLESCENT'S HEALTH (GLOBAL STRATEGY)

I wish to refer to a letter from Ms. Rebecaa Tavares, Interim Executive Coordinator Every Woman Every Child Secretariat dated 3 July 2019 on the above matter.

I am pleased to inform that the Ministry of Health Malaysia is committed to renew and implement Malaysia’s commitment for the Secretary-General's Global Strategy for Women's, Children's, Adolescent's Health (Global Strategy) as per Annex 1.

I am confident that the momentum generated during the Partnership for Maternal, Newborn and Child Health (PMNCH) Forum in New Delhi, India in 2018 will be translated into greater success in achieving potential outcome of the Sustainable Development Goals.
1. As in many other nations, Malaysia has gone through phases of demographic transitions. In 2017, Malaysia’s population was estimated at 31.62 million with 1.53 % annual population growth. With reducing fertility, mortality and higher life expectancy, it is projected that the growth rate will reduce to 0.39 % in 2050. Total fertility rates have reduced from 6.1 children per women in 1957 to below replacement level, of 1.97 children per women in 2017 and projected to further decline to 1.73 children per women by 2050.

2. Malaysia has invested in the well-being of our women and children since before independence. Inclusion of maternal and child health is central to primary health care and has led to a significant reduction in maternal as well as the Under-5 (U5) child mortality over the last five decades. Our maternal mortality has dropped from 282/100,000 live birth in the 1960s to less than 25/100,000 live birth in 2017. Common causes of maternal deaths shifted from direct maternal causes to indirect causes such as medical and non-communicable diseases associated conditions. The under-5 mortality has reduced from 110/1,000 live birth in the 1960s to 8.4/1,000 live birth in 2017. The causes of death shifted from infective causes to certain conditions
originating in the perinatal period, congenital malformations, deformations, chromosomal abnormalities and injuries.

3. We have achieved universal health coverage for maternal healthcare where more than 95% of women have more than 4 antenatal visits, a high percentage of safe delivery (98% delivered in hospitals) and more than 95% received postnatal visits. Similarly, for child health, the immunization coverage under the mandatory National Immunisation Programme reached above 90%.

4. Efforts for the past several years are to ensure babies are born free of HIV and syphilis and have a healthy start to life. In 2018, Malaysia became the first country in the World Health Organization (WHO), Western Pacific Region to be certified as having eliminated mother-to-child transmission of HIV and syphilis.

5. As a continuation of child health services, Malaysia has a structured school service which focuses on child and adolescent health in school. More than 98% of school children received periodic health appraisal and oral health care. Our success in the implementation is contributed by a strong partnership with the Ministry of Education who believes that health is the fundamental right of every child and is closely linked with academic achievement.

6. Towards reducing preventable deaths among pregnant women and children under five, Malaysia has implemented new initiatives among others; pre-pregnancy care services for high-risk women, provision of adolescent-friendly maternal health service and strengthening care in
the first 1000 days of life. The First 1000 Days of Life Initiative which initially focuses on mother and child nutrition has been expanded to include new-born and child health surveillance, on-time childhood immunization, obesity prevention and parenting skills. We will introduce pneumococcal immunization for babies born this year starting in June 2020.

7. Malaysia is committed in reducing incidences of cancer among women. We have successfully introduced school-based Human papilloma virus (HPV) vaccination programme for girls aged 13 since 2010 as an effort to prevent cervical cancer. It has a very high uptake and completion rate (98% of year 7 girls). Cervical cancer programmes would not be successful without early cancer detection. Efforts to introduce HPV DNA test coupled with self-sampling is expected to improve cervical cancer screening programmes.

8. Malaysia is committed to invest in strengthening primary, secondary and tertiary care in the country to ensure every woman and every child will benefit from quality and equitable health services without leaving anyone behind in line with the 2030 Sustainable Development Goals.