



Results, Lessons Learned and the Way Forward

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Audacious?

Reduce maternal deaths by up to
50% **Aspirational?** e year

Achievable?

- **USAID/WHO Vision of Ending Preventable Maternal Deaths Worldwide by 2035**
 - **Global target: MMR 50**
- **Partnership for Saving Mothers, Giving Life to reduce maternal and newborn death during the critical window of labor, delivery, and 24 hours postpartum**
 - **Goal: Reduce maternal deaths by up to 50% in targeted districts**
- **Global Plan towards the Elimination of New HIV Infections among Children by 2015 and Keeping their Mothers Alive**
 - **Global target #2: Reduce the number of AIDS-related maternal deaths by 50%**

A Public-Private Partnership

U.S. Government



Merck for Mothers



American College of OB/GYNs



Government of Norway



Project C.U.R.E.



Every Mother Counts



Uganda Ministry of Health



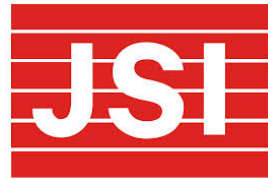
Zambia Ministry of Community Development, Mother and Child Health





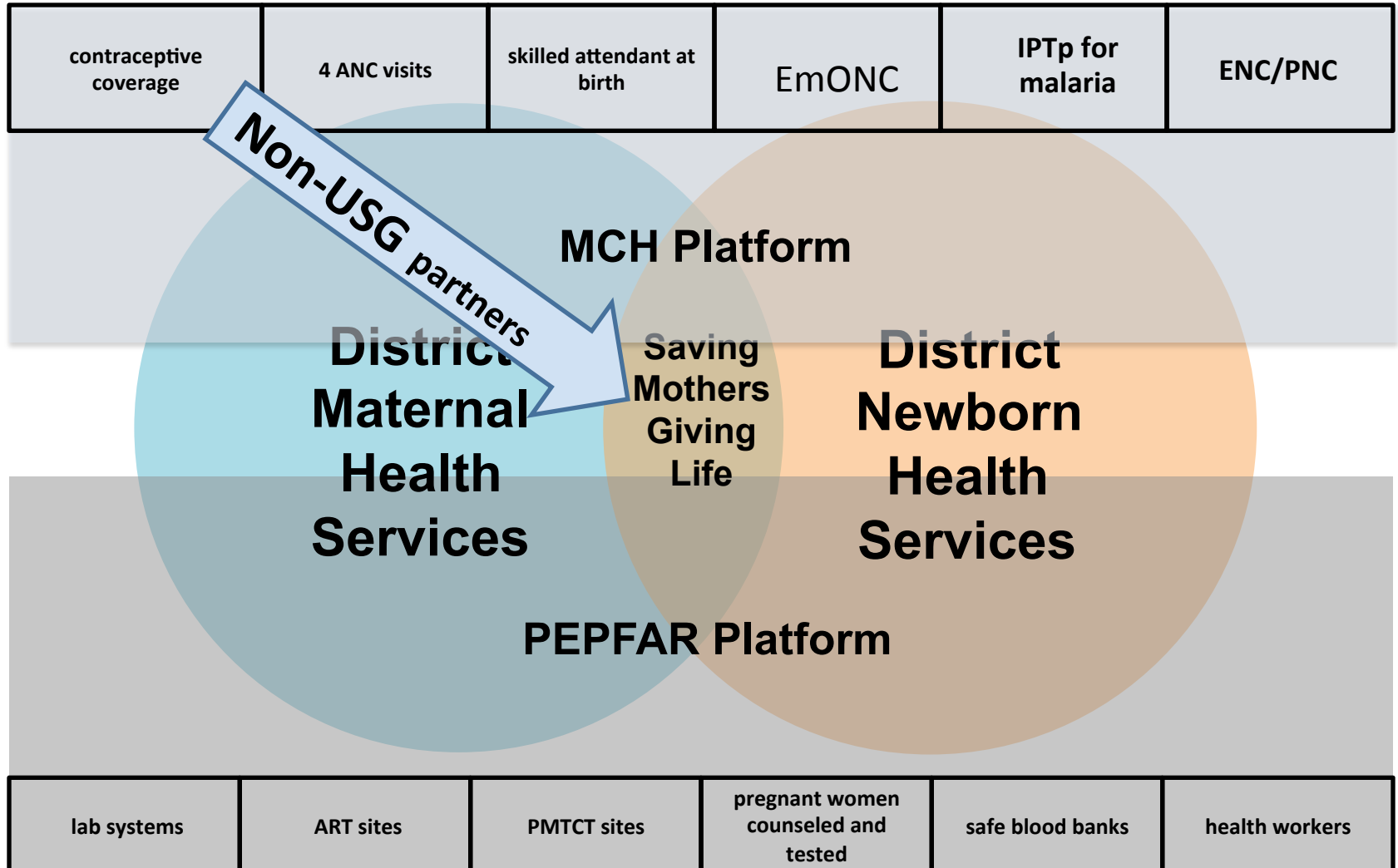
Uganda Society of
Anesthesiologists





ELIZABETH GLASER PEDIATRIC AIDS FOUNDATION





Targeting the Three Delays

Using evidence based interventions, *Saving Mothers, Giving Life* aims to strengthen district health networks in Zambia and Uganda by addressing the three delays that lead to maternal mortality



Delay in
Seeking
Care

Increasing awareness – and demand – for maternal/newborn/HIV health services

Delay in
Reaching
Care

Enhancing access to quality maternal/newborn/HIV health services

Delay in
Receiving
Quality
Care

Improving the quality of maternal and newborn health care including HIV services and PFP

Implementing What Works

Equipping Facilities



Enabling women with complications to receive care within two hours

Improving Supply System



Ensuring availability of equipment, supplies, commodities and drugs

Training and Mentoring



Providing quality, respectful delivery and emergency response services

Mobilizing the Community



Generating demand for facility based deliveries and services; encouraging HIV testing/ART/PMTCT & uptake of family planning services

Strengthening Linkages



Integrating communications and transportation systems to promote facility access

Improving Data Collection

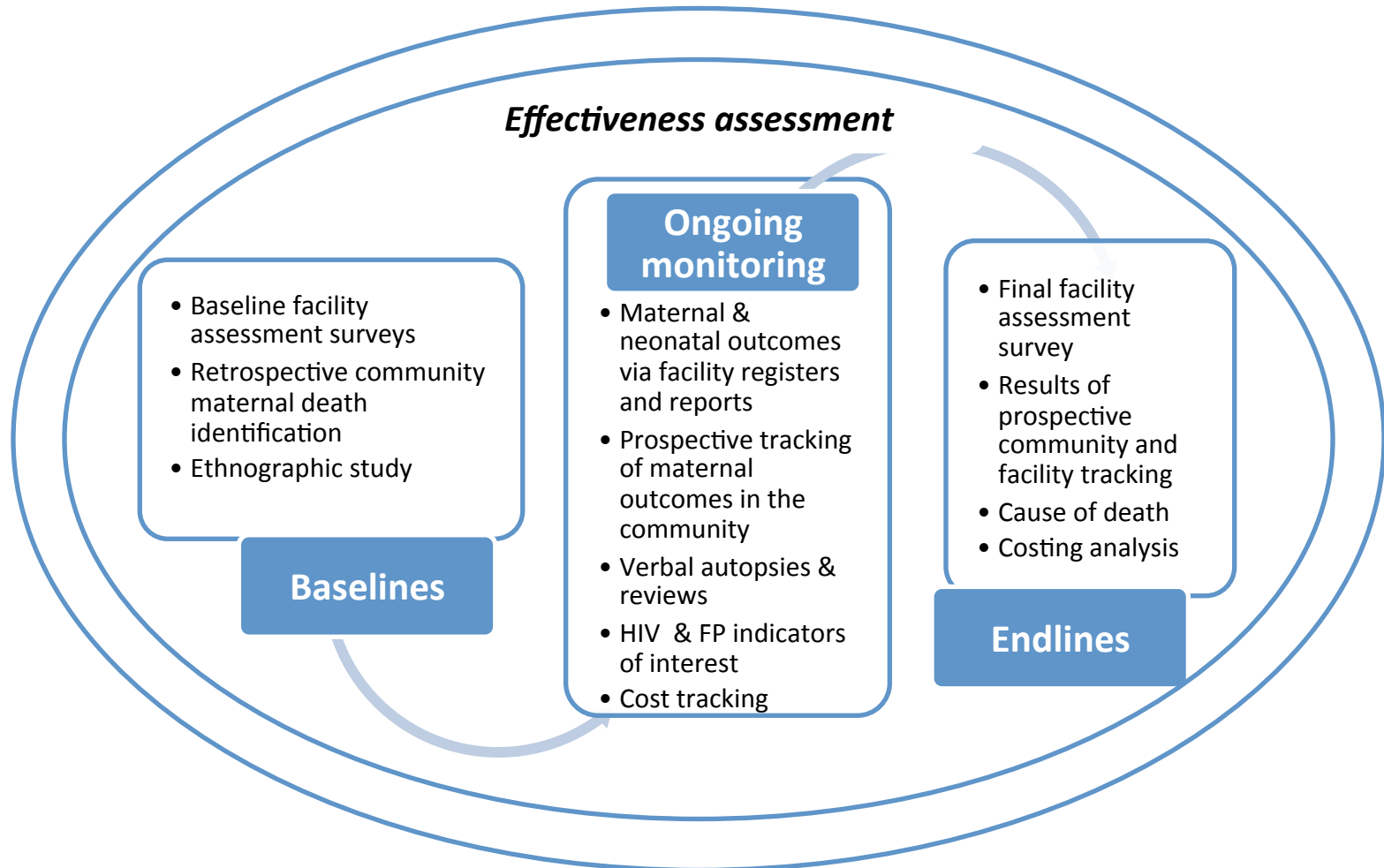


Implementing systems to record pregnancy outcomes and strengthen information management

Columbia University:
Implementation assessment

Methods: cross-national analysis of facility surveys and implementation documents, interviews, focus groups, provider surveys

Focus on: reach, fidelity, stakeholder engagement, bottlenecks, promising innovations, lessons learned

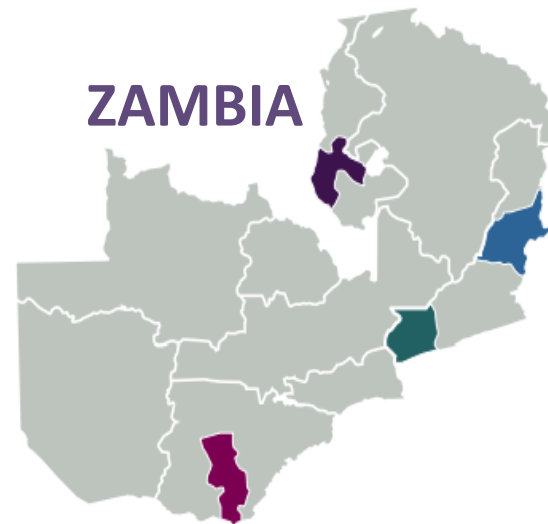


Taking a District Level Approach

- *Saving Mothers, Giving Life* worked in four districts each in Zambia and Uganda, with the goal to rapidly reduce maternal mortality



● KABAROLE ● KAMWENGE
● KIBAALE ● KYENJOJO



● KALOMO ● NYIMBA
● MANSA ● LUNDAZI

RESULTS - SUMMARY

SMGL PHASE 1 KEY RESULTS

Indicator	Uganda	Zambia
Institutional maternal mortality ratio	-35%	-35%
Institutional perinatal mortality ratio	-17%	-14%
Institutional stillbirth ratio	-20%	-19%
Obstetric case fatality rate in facilities providing emergency obstetric and newborn care (EmONC)	-18%	-35%
Availability of 24/7 services provided at health centers	+24%	+44%
Deliveries taking place in a health facility	+62%	+35%
Facilities able to manage basic maternal and newborn complications	+200%	+100%
Cesarean section rate	+23%	+15%
HIV-positive pregnant women receiving antiretroviral treatment	+28%	+18%
Infants receiving HIV prophylaxis	+27%	+29%
Hospitals providing at least one long-acting family planning method	+10%	+50%
Hospitals conducting maternal death audits	+223%	+100%

What Did We Learn?

Zero tolerance for preventable maternal and newborn deaths is the foundation upon which all political, public health, and community commitments and actions must build

What's Next for Phase 2?

- Streamlined **M&E**
- More **efficient** implementation
- **Integrated** HIV- and MNH-related provider training
- Greater **customer focus**
- Increased attention to **newborns**
- An expanded **Partnership**
- Strengthened **host government** ownership and leadership
- Work towards **Global Impact** through un-branded scale-up of the SMGL model

www.savingmothersgivinglife.org

Awareness



Access



Appropriate Care



RESULTS – back up slides

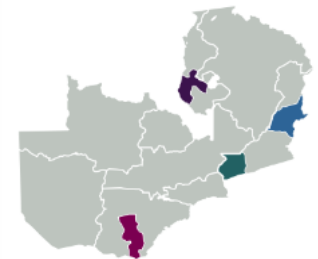
Reducing Maternal Death

Uganda



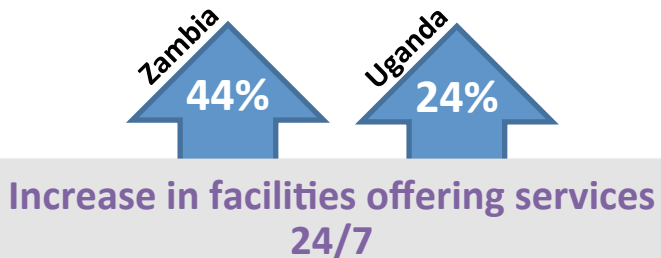
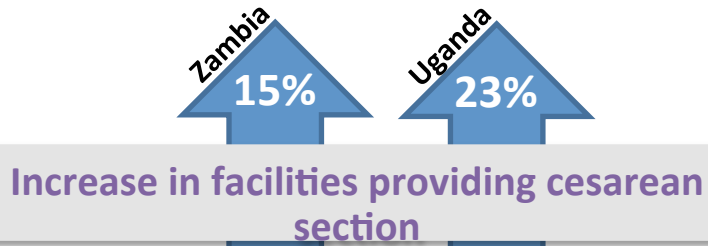
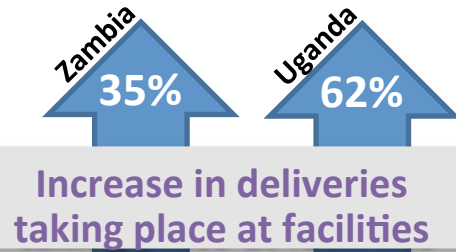
Maternal mortality ratio **30%**
17% Perinatal mortality rate*

Maternal mortality ratio* **35%**
14% Perinatal mortality rate*



Zambia

Increasing the Demand, Provision & Quality of Care



Managing Mother-to-Child Transmission of HIV

+18%
In Zambia



ART for PMTCT

+28%
In Uganda

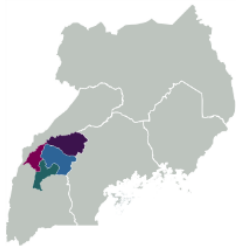
ARV prophylaxis for
infants

+29%
In Zambia



+27%
In Uganda

Key Highlights



4,076 trained as part of village health teams to educate women and their families about the risks associated with giving birth at home

Doubled

the number of facilities practicing the active management of third stage labor (AMTSL)

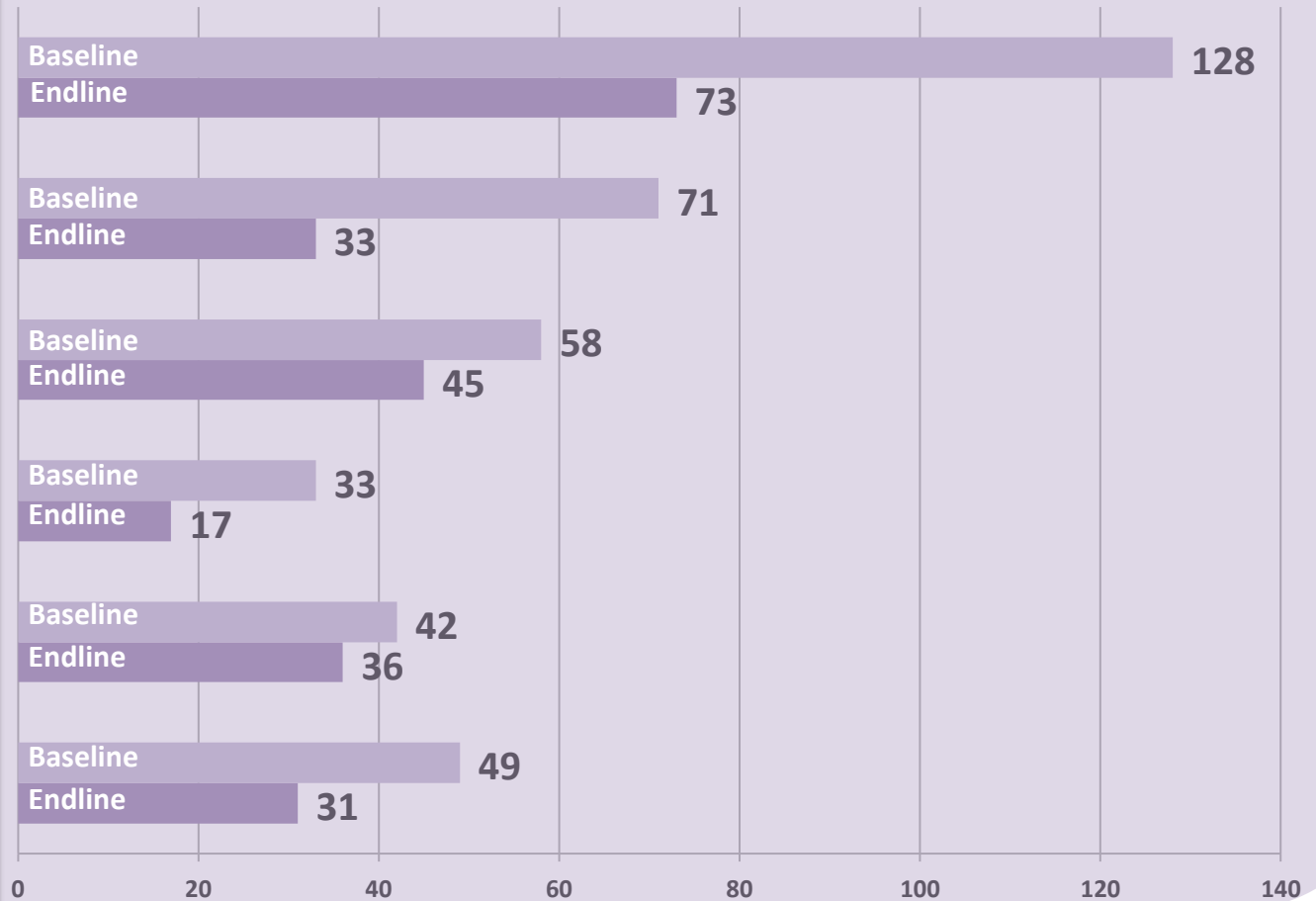
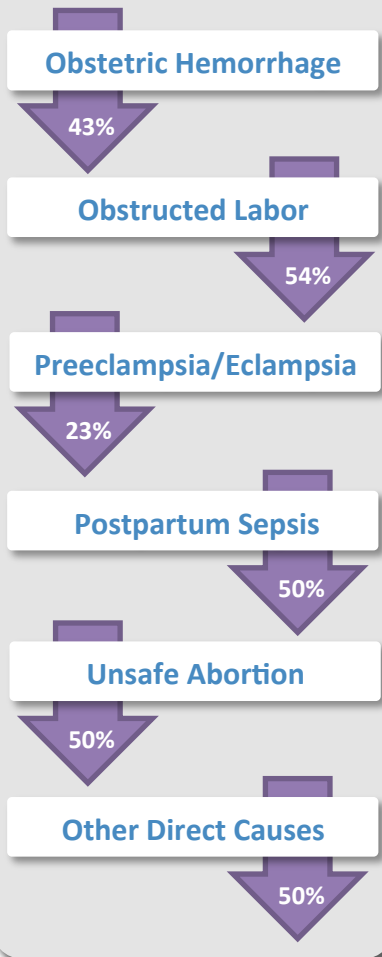


In SMGL-pilot districts, 72% of women now live within 2 hours of an EmONC facility



15,655 Mama Kits were distributed to help ensure a clean and safe childbirth

Cause-specific Reductions in Maternal Mortality



Cause-specific Reductions in Maternal Mortality

Obstetric
Hemorrhage

35%

Obstructed Labor &
Uterine Rupture

80%

Other Direct Causes

80%

