

THE MATERNAL AND NEWBORN HEALTH THEMATIC FUND

Focused action, increasing impact – transitioning to Phase III (2018-2022)

ANNUAL REPORT 2018





DELIVERING A WORLD WHERE
EVERY PREGNANCY IS WANTED,
EVERY CHILDBIRTH IS SAFE,
AND EVERY YOUNG PERSON'S
POTENTIAL IS FULFILLED

Cover photo:

© Evelyn Matsamura Kiapi, UNFPA Uganda, June 2018.
Winner of the 2019 MHTF photo contest.

Faith Baribumpe 30, a midwife serving in Panyandoli Health Centre IV in the Kiryandongo Refugee Settlement in western Uganda admires a baby she delivered the night before. The mother, 22-year-old year Eunice Abalo, a refugee from South Sudan, says she delivered safely with the help of the midwife. In 2018, with UNFPA support, 17 midwives deployed in refugee settlements in Uganda assisted 22,254 pregnant women in giving birth.



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ACRONYMS

EmONC	Emergency obstetric and newborn care
FGM	Female genital mutilation
FIGO	International Federation of Gynecology and Obstetrics
GIS	Geographic information system
H6 (formerly H4+)	UNAIDS, UNFPA, UNICEF, UN Women, World Bank Group, WHO
ICM	International Confederation of Midwives
ICPD	International conference on population and development
ISOFS	International Society of Obstetric Fistula Surgeons
MPDSR	Maternal and perinatal death surveillance and response
MHTF	Maternal and newborn health thematic fund
MNH	Maternal and newborn health
NGO	Non-governmental organization
RMC	Respectful maternity care
SDG	Sustainable Development Goal
SRH	Sexual and reproductive health
SRHR	Sexual and reproductive health and rights
SRMNAH	Sexual, reproductive, maternal, newborn and adolescent health
UN Women	United Nations Entity for Gender Equality & the Empowerment of Women
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNFCU	United Nations Federal Credit Union
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
WHO	World Health Organization

ACKNOWLEDGEMENTS

This report on the work of the United Nations Population Fund (UNFPA) Maternal and Newborn Health Thematic Fund (MHTF) benefitted from various contributions at all levels – country, regional and global – to ensure continuous improvement in the health and well-being of women and girls around the globe.

UNFPA acknowledges with gratitude the support of its staff at headquarters, in 39 countries and in 6 regional offices in prioritizing maternal and newborn health as part of a broader focus on sexual and reproductive health and rights (SRHR).

The key international supporters of the MHTF in 2018 remained Sweden, Luxembourg, Germany, and Poland.

Our sincere thanks go to our United Nations colleagues around the globe, including from the Joint United Nations Programme on HIV/AIDS (UNAIDS), the United Nations Children's Fund (UNICEF), United Nations Entity for Gender Equality & the Empowerment of Women (UN Women), the World Bank Group and the World Health Organization (WHO). We are grateful for their collaboration and coordination on sexual, reproductive, maternal, newborn and adolescent health (SRMNAH). Together, we continue to demonstrate our leadership, commitment and strong partnership through platforms such as the H6 partnership.

A special note of thanks goes to other individual donors and UN trust funds. The contributions of our civil society partners at global, regional and country levels is critical in supporting the broader achievement of universal access to SRHR. These partners include the International Confederation of Midwives (ICM), the International Federation of Gynecology and Obstetrics (FIGO), the International Society of Obstetric Fistula Surgeons (ISOFS), Operation Fistula, Columbia University's Averting Maternal Death and Disability Program, Johns Hopkins University and its Program for International Education in Gynecology and Obstetrics (Jhpiego), the Woodrow Wilson Center and additional champions and technical experts listed in Annex 1 as part of the Campaign to End Fistula.

Special mention needs to be made of our nurturing partnerships with the private sector. We thank GE Health, Johnson & Johnson, Laerdal Global Health, the UN Federal Credit Union (UNFCU) Foundation, Zonta International and particularly Friends of UNFPA.

Together we are working to ensure that women and girls not only survive, but thrive and transform their lives and societies as a whole.

FOREWORD

Since 2008, the UNFPA Maternal and Newborn Health Thematic Fund (MHTF) has been supporting countries with the highest rates of maternal and newborn mortality and morbidity. This support helps strengthen health systems and improve access to quality care. The MHTF's gender-sensitive, human rights-based approach aims to contribute to the 2030 Agenda for Sustainable Development by ending preventable maternal and newborn deaths.

With a strong focus on promoting equity in access, and improving accountability and the quality of care across the board, the MHTF continued making big strides in 2018. It provided catalytic support through national programmes on sexual, reproductive, maternal, newborn and adolescent health (SRMNAH), and through multi-stakeholder global and regional initiatives.

Over the past decade, the MHTF has helped countries strengthen their midwifery workforces. Nearly 29,000 midwives were trained in 2018 alone. More countries supported by the MHTF have enhanced their networks for providing quality maternal and newborn health care, including emergency obstetric and newborn care (EmONC) services. Access to surgical treatment for obstetric fistula has also increased, with nearly 11,000 fistula repairs supported in 2018. In addition, more maternal deaths were notified, increasing the prospect of successfully addressing the root causes of maternal mortality.

The evidence-based interventions the MHTF promotes are being applied across 150 countries supported by UNFPA around the world. As a result of long-term investments and advocacy by the MHTF, in 2018 the UN General Assembly adopted a resolution calling for an end to fistula within a decade. The most affected regions are now drawing up roadmaps to do so. Similarly, through MHTF advocacy and its vast network of partners, more governments recognize that investments in quality midwifery care are essential to improve sexual, reproductive, maternal, newborn and adolescent health.

None of the progress and results highlighted in this report would be possible without the collaboration of key partners, including civil society organizations, academic institutions, fellow UN agencies and others, as well as the critical support of our donors.

With a new 2018-2022 Business Plan for the Maternal and Newborn Health Thematic Fund, UNFPA has reaffirmed its commitment to facilitating and accelerating global efforts to improve the quality of life of women and girls, especially the most disadvantaged. Together, we can and will deliver a world where every pregnancy is wanted, every childbirth is safe, and every young person's potential is fulfilled.



Dr. Natalia Kanem
Executive Director, UNFPA

A handwritten signature in black ink, which appears to read 'N Kanem'.

EXECUTIVE SUMMARY

The Maternal and Newborn Health Thematic Fund (MHTF) was established in 2008 to further UNFPA's contribution to achieving Millennium Development Goal 5 on improving maternal health and reducing death and disability. Since its inception, the Fund has offered tailored, catalytic support to countries to reach their sexual, reproductive, maternal and newborn health goals.

In 2018, the MHTF moved into Phase III (2018-2022) of its Business Plan based on three cross-cutting principles: equity in access, quality of care and accountability, in line with the three pillars of *The Global Strategy for Women's, Children's and Adolescents' Health (2016-2030)* of the UN Secretary-General¹, to which the MHTF's work contributes. The existing focus on strengthening country leadership; improving the quantity and quality of information on maternal, newborn, sexual and reproductive health; and increasing access to services for women and girls was maintained. In Phase III, the four MHTF intervention areas – midwifery, emergency obstetric and newborn care (EmONC), maternal and perinatal death surveillance and response (MPDSR), and obstetric fistula and other morbidities – will be further integrated and linked with other sexual and reproductive health programmes, including post-partum and post-abortion family planning, comprehensive sexuality education, and prevention and treatment of HIV and sexually transmitted infections (STIs). Reproductive morbidities will also be addressed in a more focused manner, emphasizing access to cervical cancer screening and treatment, safe abortion (where legal) and post-abortion care.

This report highlights key results achieved in 2018. It is

equipment for skills labs and training for tutors, and well over 1,000 midwifery tutors upgraded their clinical and teaching skills. Furthermore, 29 countries integrated respectful maternity care (RMC) into their pre-service education, and 30 countries are addressing this through programmes supporting midwives who are working in health facilities.

Several countries have identified pre-service midwifery candidates from rural and indigenous communities to deploy to their respective districts upon graduation as midwives. Midwives have also been instrumental in various countries impacted by humanitarian crises. Education, training, mentorship and coaching midwives were provided in nearly all MHTF countries. As of 2018, 80 per cent of supported countries' midwifery curricula include adolescent sexual and reproductive health (SRH), HIV prevention and safe abortion where legal. Midwifery associations in 28 countries had strategic plan.

UNFPA developed its Global Midwifery Strategy in 2018, adding workforce and health system development, and the midwife's central role in sexual and reproductive health and rights (SRHR) to the existing three pillars of education, regulation and association. These elements together form a holistic roadmap to strengthen the capacity and quality of midwives and midwifery services worldwide.

As of 2018, 10 countries supported by the MHTF have established a national network of EmONC facilities; five regularly document their **EmONC** indicators. Using a new approach developed by the MHTF² that leverages geographic information system (GIS) and the

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