

# The Maternal Health Thematic Fund

Improving maternal health: Surging towards the 2015 deadline

Annual Report 2014





Delivering a world where every pregnancy is wanted, every childbirth is safe, and every young person's potential is fulfilled.

#### Cover photo:

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Uganda 2014: Twenty-seven-year-old Rose Yangu shows off her bundle of joy that she delivered 24 hours earlier. She has named her baby Eve, meaning "giver of life." Rose Yangu fled the conflict in South Sudan in June 2014 when she was five months pregnant. She travelled on foot all the way from Kajo Keji in the Central Equatoria Region of South Sudan into Uganda. She says she was well received at the Dzaipi reception centre in Uganda and given special attention because of her condition before she was transferred to a health centre. At the advice of a health worker, she attended two more antenatal visits before delivering at Panyandoli Health Centre in the UNFPA-supported Kiryandongo Refugee settlement where she now lives. Today, she advises all pregnant women to deliver their babies at a health centre to ensure a safe birth.

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We look forward to continuing these productive collaborations and valued partnerships.

# Acronyms & Abbreviations

AFD .........Agence Française de Développement (French Development Agency) AMDD . . . . . . Averting Maternal Death and Disability Program (Columbia University) CARMMA .... Campaign on Accelerated Reduction of Maternal Mortality in Africa CCBRT ......Comprehensive Community Based Rehabilitation in Tanzania CDC US . . . . . Centers for Disease Control and Prevention CEFOREP .... Centre Régional de Formation et Recherche (Senegal) DFID ......Department for International Development (United Kingdom) EmONC . . . . . Emergency Obstetric and Newborn Care (B=Basic; C=Comprehensive) FIGO ..... International Federation of Gynecology and Obstetrics GIZ . . . . . . . Deutsche Gesellschaft für Internationale Zusammenarbeit (German Society for International Cooperation) GPRHCS .....Global Programme to Enhance Reproductive Health Commodity Security H4+ ......UNAIDS, UNFPA, UNICEF, UN Women, World Bank Group and WHO ICCRD,B . . . . . International Centre for Diarrhoeal Disease Research, Bangladesh ICM ..... International Confederation of Midwives ICPD ......International Conference on Population and Development INGO . . . . . . International Non-Governmental Organization Jhpiego ...... Johns Hopkins Program for International Education in Gynecology and Obstetrics MDG ...... Millennium Development Goal MDSR ..... Maternal Death Surveillance and Response MHTF ..... Maternal Health Thematic Fund MMR ..... Maternal Mortality Ratio MNH ..... Maternal and Newborn Health MRMR . . . . . . . Mano River Midwifery Response MSF ..... Médecins sans Frontières NGO ......Non-Governmental Organization RIF ..... Results Indicators Framework RMNH ......Reproductive, Maternal and Newborn Health RMNCAH . . . . Reproductive, Maternal, Newborn, Child and Adolescent Health SBA . . . . . . . . Skilled Birth Attendants SIDA . . . . . . . Swedish International Development and Cooperation Agency SRH ..... Sexual and Reproductive Health SoWMy ..... State of the World's Midwifery Report STIs ..... Sexually Transmitted Infections UNAIDS ..... Joint United Nations Programme for HIV/AIDS UNFPA . . . . . . United Nations Population Fund UNHCR . . . . . Office of the United Nations High Commissioner for Refugees UNICEF . . . . . United Nations Children's Fund UN Women ... United Nations Entity for Gender Equality and the Empowerment of Women USAID ..... United States Agency for International Development

WHO .......World Health Organization

## Foreword

### By Dr. Babatunde Osotimehin - Executive Director, UNFPA

UNFPA's Maternal Health Thematic Fund (MHTF) supports critical interventions in countries with high maternal mortality and morbidity to strengthen health systems and ensure that women and adolescent girls have quality maternal health services when they need them.

Thanks to the Fund, more women have access to a skilled birth attendant, and there are more opportunities for preventing obstetric fistula and for reconstructive surgery for fistula survivors to restore their dignity, health and hope. While working to help ensure that no woman dies giving life, the Fund also supports efforts to ensure that a woman's tragic death in childbirth does not go unregistered, un-acted-upon or quietly accepted.

The MHTF works in tandem with our Global Programme to Enhance Reproductive Health Commodity Security to help countries enable women and girls to make fundamental decisions about their own bodies, attain the highest possible standard of sexual and reproductive health and exercise their reproductive rights.

This annual report highlights the Fund's critical contributions in 2014: from the training of 16,000 midwives, to supporting 10,000 surgical fistula repairs, to the finalization of national surveys on emergency obstetric and neonatal care, to South-South collaboration to improve maternal death surveillance and response, to the piloting of activities for first-time young mothers, a new focus area for the Fund.

None of this would be possible without the support of our partners, primarily our national and local partners that make this positive change happen for women and girls on the ground. But partnerships at all levels are necessary for success. Key partnerships for the Fund include the UN Secretary-General's Every Woman, Every Child initiative; the H4+ partnership (UNAIDS, UNICEF, UN Women, World Bank Group, WHO and UNFPA), Family Planning 2020 and others.

Let me also take this opportunity to thank all our donors — Germany, Iceland, Luxembourg, Spain, Friends of UNFPA and Sweden, the main donor of the trust fund.

Millennium Development Goal 5 to improve maternal health remains an unfinished agenda, but we have made significant progress. By enabling UNFPA to target financial, material and human resources to countries with the highest needs, the MHTF has contributed to halving maternal mortality levels since 1990. Maternal death has become unacceptable; necessary and effective interventions have been documented; programme implementation is happening on the ground; and the lives of women and newborns are being saved.

As we enter the post-2015 era, the Fund will continue to accelerate positive change through the emerging Sustainable Development Goals, which confirm universal sexual and reproductive health, including maternal health, as a key global target for the health and well-being of individuals and for the sustainable development of nations.

We can end preventable maternal deaths in our lifetime. We know what we need to do. We at UNFPA will continue to intensify action in support of women's and adolescent girls' health and well-being to ensure that no woman is left behind. Working together with our partners, I am confident that we will deliver a world where every pregnancy is wanted, every childbirth is safe, and every young person's potential is fulfilled.

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## Introduction

Following six years of implementation (2008-2013), the Maternal Health Thematic Fund (MHTF) entered its second phase in 2014. A new Business Plan for 2014-17 was developed with a strengthened Results Indicators Framework (Annex 2) linking the outcomes of the MHTF directly to the achievement of UNFPA's Strategic Plan 2014-17.

The year 2014 was characterized by a reinforced focus on critical intervention areas with a strong emphasis on results that included the establishment of baseline data for the MHTF Results Indicators Framework.

Hence, the areas of Midwifery; Emergency Obstetric and Newborn Care (EmONC); Obstetric Fistula; and Maternal Death Surveillance and Response (MDSR) remain essential features of the MHTF focus, ensuring a holistic approach to improved maternal and newborn health.

In addition, as a result of the alignment of the MHTF to UNFPA's Strategic Plan, the MHTF added a new focus area: addressing the needs of first-time young mothers, a particularly vulnerable group in the context of maternal health. First-time young mothers — often still children themselves — face increased vulnerabilities during pregnancy, childbirth and caring for their newborn.

#### Essential Features of the MHTF

- Midwiferv:
- Emergency Obstetric and Newborn Care (EmONC);
- Obstetric Fistula:
- Maternal Death Surveillance and Response (MDSR);
- First-Time Young Mothers.

In lieu of a traditional executive summary, the MHTF Annual Report 2014 will begin with an overview, highlighting the results and achievements of the Fund, progress realized as it has moved into its second phase and the application of strengthened management tools.

Individual chapters in this report highlight activities and results on the ground within each of the four focus areas of Midwifery, EmONC, Obstetric Fistula and MDSR. Each of these chapters starts with an overview of key highlights and results. The financial overview provides details on income and expenditure of the Thematic Fund. Based on the current status of the MHTF, as documented in the report, the concluding chapter looks at challenges and the way forward, including in the context of the post-2015 development agenda; it also discusses the importance of continued MHTF support in assisting countries most in need with specific and critical reproductive health, including maternal and neonatal health interventions, in the changing global environment.

Overall, the MHTF 2014 report shows how MHTF activities and results have not only contributed to accelerating efforts to realize MDG5 but have also demonstrated that targeting high-burden countries with strategic and complementary evidence-based, high-impact interventions backed with sufficient and sustainable financing can make substantive inroads in reducing maternal mortality and morbidity; in building capacity; and in strengthening health systems to meet prioritized health needs. Thus the MHTF is very well positioned to contribute to the global movement for the post-2015 Sustainable Development Goals.



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