

# EngenderHealth Capabilities in Maternal Health



## ORGANIZATIONAL OVERVIEW

EngenderHealth offers **expertise in sexual and reproductive health and family planning, maternal health, and gender equity**. EngenderHealth is committed to creating transformative, sustainable change by advancing sexual and reproductive rights as human rights, expanding access to critical health information and training, and delivering quality services. With funding from various donor agencies, private foundations, and other funding institutions, EngenderHealth collaborates with governments, private sector partners, local organizations, and communities to achieve such change. In program year 2019–2020, EngenderHealth implemented an **annual revenue of \$35 million**. During this period, EngenderHealth supported activities in **16 countries across Asia, Africa, and the Americas** through which we achieved the following results:

**Our vision: A world where sexual and reproductive rights are respected as human rights and women and girls have the freedom to reach their full potentials**

- **2,535,760** individuals received **contraceptive care**
- **4,184,900** unintended **pregnancies were averted**
- **1,150,000** unsafe **abortions were averted**
- **59,100 child deaths** and **4,700 maternal deaths were prevented**
- **\$276,385,500** in direct **healthcare costs were saved**<sup>1</sup>

## TECHNICAL EXPERTISE

EngenderHealth's maternal health programs aim to ensure the availability and affordability of quality, client-centered services across the continuum of care. This includes antenatal care, essential and emergency obstetric care (e.g., prevention and management of eclampsia/preeclampsia, obstetric hemorrhage, obstructed labor, and obstetric fistula), postnatal care, and comprehensive abortion care (i.e., safe induced abortion, emergency treatment of abortion-related complications, and postabortion contraception). Examples of our approaches and experiences include:

### Global Challenge

Approximately 830 women die every day from complications related to pregnancy and childbirth. 99% of these deaths occur in developing countries, and most could have been prevented. *World Health Organization*

- Our **health systems strengthening** interventions promote quality and self-reliance at national, subnational, facility, and community levels. In **Ethiopia**, we worked with the government to update national guidelines and training curricula focused on comprehensive abortion care.
- We support **quality improvement** by equipping health facilities and training providers to be able to offer critical services. In **Bangladesh**, we piloted and supported the national scale-up of a misoprostol intervention to reduce postpartum hemorrhage and updated and implemented postpartum family planning curricula to align with the national policy.
- We **engage youth and adolescents** and promote youth-friendly services. For example, in the **Philippines**, our Program for Young Parents supplemented antenatal care with health education and linkages to education and livelihood institutions in order to reduce rapid repeat teen pregnancies.
- Our **community engagement** approaches include generating awareness and facilitating partnerships to support local health systems. In **Tanzania**, we have mobilized community and religious leaders to promote health-seeking behaviors and renovated dispensaries to be able to provide basic emergency obstetric and neonatal care and comprehensive postabortion care.

<sup>1</sup> EngenderHealth trains healthcare providers and supports health facilities in partnership with governments and local organizations to offer quality reproductive health services. These data represent the results of those services. Data on reduced deaths and cost savings estimated using the Marie Stopes International Impact 2 Model.



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## SELECT PROGRAM HIGHLIGHTS

In addition to the bilateral country projects previously mentioned, EngenderHealth has served as the lead implementer of **two global maternal health programs**, demonstrating our status as an international leader specifically in fistula care and postabortion care.

### Fistula Care and Fistula Care Plus

After several years of experience working in fistula, EngenderHealth received \$70 million from the United States Agency for International Development (USAID) to implement the Fistula Care project in 2007. Building upon the success of this project, USAID awarded EngenderHealth an additional \$75 million (award ceiling) for the five-year follow-on *Fistula Care Plus* project in 2013. Working in 14 countries (**Bangladesh, Benin, Democratic Republic of Congo, Ethiopia, Ghana, Guinea, Liberia, Mali, Niger, Nigeria, Rwanda, Sierra Leone, Togo, and Uganda**) through *Fistula Care*, EngenderHealth supported more than 24,000 fistula repair surgeries and trained more than 24,400 people in fistula prevention, fistula repair, and advocacy for fistula care. Working in seven countries (continuing in Bangladesh, Democratic Republic of Congo, Niger, Nigeria, Togo, and Uganda and adding **Mozambique**) through *Fistula Care Plus*, EngenderHealth has supported approximately 14,800 fistula repair surgeries as well as more than



1,100 non-surgical fistula repairs and trained more than 6,800 additional people. Building upon the success of these programs, USAID recently awarded EngenderHealth the \$40 million, five-year (2020–2025) MOMENTUM Safe Surgery in Family Planning and Obstetrics project, which aims to increase the capacity of national health systems and local organizations to strengthen surgical safety within maternal health and family planning programs by promoting evidence-based approaches and testing new innovations.

### Postabortion Care-Family Planning (PAC-FP)

EngenderHealth received \$8 million from USAID for a six-year (2014–2020) project that encompasses implementation research, policy support, and technical assistance related to the development of a model for increasing informed and voluntary uptake of postabortion family planning. PAC-FP has conducted assessments of PAC in 22 countries (**Afghanistan, Bangladesh, Burkina Faso, Burma/Myanmar, Ethiopia, Ghana, India, Indonesia, Ivory Coast, Kenya, Madagascar, Malawi, Mozambique, Nepal, Niger, Pakistan, Philippines, Rwanda, Senegal, Tanzania, Togo, and Uganda**) to inform the global evidence base and to inform future policy and program priorities. Additionally, PAC-FP has provided implementation support in Senegal and Tanzania. Over the life of project, PAC-FP supported 73 health facilities—65 in Tanzania and 8 in Senegal—through which we reached 26,653 clients (24,452 in Tanzania and 2,201 in Senegal) with postabortion care.



**When you get pregnant, you become worried. Will I be safe? I was so happy knowing that my child and I were both alive.**

*Mrs. Jackson, Tanzania*

