

A Report on the FIGO Saving Mothers and Newborns Project

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Abstract

In collaboration with member national professional associations, the International Federation of Gynecology and Obstetrics (FIGO) has been conducting a Saving Mothers and Newborns Project in 10 low- and middle-resource countries. The project aims to achieve the objectives set out in Millennium Development Goals 4 and 5 related to child survival and maternal mortality and to develop organizational capacity among member associations. Projects are developed in response to the needs of the local country, through a twinning of professional associations between high- and low-resource countries.

Résumé

En collaboration avec les associations professionnelles nationales membres, la Fédération internationale de gynécologie et d'obstétrique (FIGO) mène un projet visant à assurer la santé et la survie des mères et des nouveau-nés au sein de dix pays ne disposant que de faibles ressources ou de ressources modérées. Ce projet vise l'atteinte des composantes énoncées dans les objectifs du Millénaire pour le développement 4 et 5, en ce qui concerne la survie infantile et la mortalité maternelle, et cherche à développer les capacités organisationnelles chez les associations membres. Des projets sont élaborés en fonction des besoins locaux des pays concernés, par l'intermédiaire d'un jumelage d'associations professionnelles entre des pays disposant de fortes ressources et des pays ne disposant que de faibles ressources.

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INTRODUCTION

Strong professional associations provide a model for leadership, educational standards, and professional competence and as such have a unique and essential role to play in overcoming the challenges of reducing maternal mortality. Their strength stems from their members, who are respected health professionals contending with the serious circumstances of women's lives and providing health

care on a daily basis. Their in-depth knowledge and experience can be used as an advocacy tool and as a resource in the development of national and international policies. Policies and effective strategies have the greatest impact when they are implemented in collaboration with those who contribute to their development.

The capacity of professional associations to improve the health of mothers and newborns is directly related to their ability to run an effective organization. Consequently, a lack of organizational capacity may limit the ability of these associations to effectively and efficiently tackle issues regarding sexual and reproductive health and services in their own countries. This may be due to a diversity of circumstances including difficult political climates, precarious or non-existent funding, overburdened health care systems, and insufficient human resources. Improving organizational capacity is an even greater challenge in low-resource settings.

Although it does not constitute a quick fix solution in the improvement of reproductive and sexual rights and health, improving the administrative and technical capacity of professional associations is an essential step in creating sustainable change in the health of the world's women.

In this article, we present a project working to build the capacity of professional associations through the implementation of projects essential to the improvement of maternal and newborn health. The investment in professional associations is worthwhile, sustainable, and cost-effective.

THE CAPACITY OF PROFESSIONAL ASSOCIATIONS TO SAVE MOTHERS AND NEWBORNS

In 2004, the International Federation of Gynecology and Obstetrics formed the Safe Motherhood and Newborn Health (SMNH) Committee to serve as the focal point for all FIGO initiatives related to improving maternal and newborn health in developing countries. Within this committee, the Saving Mothers and Newborn Project was realized with

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funding provided by the Swedish International Development Cooperation Agency (Sida)^a and FIGO for the four-year project time frame. The overarching goal of the Saving Mothers and Newborn Project was to contribute to the reduction of maternal and neonatal mortality and morbidity through capacity strengthening of national obstetric and gynaecological associations and increased collaboration of these associations with nursing and midwifery associations. As with all FIGO initiatives, the use of evidence-based and international best practices and policies and advocacy of safe motherhood and newborn health at the national level are promoted.

FIGO's Saving Mothers and Newborns Project was designed specifically to address the national health needs of women and newborns, as well as the health systems responding to these health concerns. In each of the participating 10 country projects, the professional association assessed areas for improvement in their respective countries, designed activities to address the identified problems, developed a project, prepared a funding proposal, and once funding was secured, implemented and managed the project. The project themes include facilitating the provision of basic emergency obstetric care in underserved communities, the implementation of clinical audits for improving quality of care, the development of new maternal and newborn health protocols, and addressing unsafe abortion. The Table provides a summary of the countries involved and the maternal and newborn health activities being conducted.

THE TWINNING MECHANISM

The Saving Mothers and Newborns project employs a twinning mechanism. Low- and middle-resource professional associations are paired with professional associations from higher resource settings. This symbiotic learning experience strengthens both associations in different ways.

The lower resource countries are able to learn about the organizational elements of the higher resource associations and use their resources in training to develop greater organizational strength. The higher resource professional associations learn about the challenges faced by professionals working in lower and middle-resource settings and about the innovation and sociocultural sensitivities often required for working in lower resource settings with differing political and social realities. Methods and strategies for managing with fewer resources in medical settings are shared, and training may be provided in the use of new and lower cost medical technologies. Initially, the professional associations

from high-resource settings were termed "mentors"; however, the terminology was changed to better reflect what actually occurred across projects, which is an exchange in professional expertise between skilled professionals in high-, middle- and low-resource settings.

CHALLENGES ARE MET WITH REWARDS

One of the biggest challenges is the fact that the majority of individuals managing these projects are volunteers. Handling full-time jobs as health professionals and simultaneously coordinating a demanding project requires a great deal of commitment and dedication. These individuals are clinicians with minimal experience in the administrative and managerial aspects of a development project. For many of the associations, the FIGO SMNH project is their first time implementing and managing a development project. Support provided from the twinned professional association as well as from FIGO has been necessary to deal with issues such as creating logframes and reporting on project indicators. Problem-solving and managerial skills have improved in the professional associations, and, as a result, some associations have revised their budgets to accommodate hiring of dedicated administrative and managerial support.

Generally, the projects cover large geographical areas, with some specifically initiating project activities outside the urban centres and in the rural communities where the need is greatest. Extra travel time and human and financial resources are needed to accomplish activities. These factors, added to those described above, cause progress to be slow at times.

An awareness of how time constraints, contextual circumstances, and communication can affect project progress and outcomes has been a part of the learning curve for FIGO in relation to its project management capacity.

One particularly commendable outcome of this project is the use of evidence. Research is used to provide baseline data to understand current needs, to gauge overall success, and to help with future decision-making. In the Ukraine, several indicators from the ALARM International Program have been identified to monitor the impact of the course within health facilities. In Moldova, a multidisciplinary audit approach is used to assess causes of perinatal mortality; while intrauterine growth restriction was initially seen to be the major cause, new findings suggest there are additional factors that need to be pinpointed with further investigation.

Each country project was designed in steps that build upon one another in a dynamic way and that increasingly include community stakeholders and civil society organizations. Reports from the country project managers indicate they have been building stronger relationships with midwives,

^aSida provides funding for nine of the 10 projects. Ukraine is partly funded by the Society of Obstetricians and Gynaecologists of Canada (SOGC) and the FIGO President's Fund.

Saving Mothers and Newborns Project Summary

Country	Project Title	Key Activity
Haiti	Strengthening the Health Centre of Croix Des Bouquets	Expansion of the district health centre to provide 24-hour emergency obstetric care and provision of midwifery services and equipment.
Kenya	Improving the quality of antenatal, delivery and postnatal care through clinical audits	Train a multidisciplinary team in four health facilities to use tools to collect baseline data and to perform maternal death audits to evaluate and improve quality of care.
Kosovo	Reducing maternal and newborn mortality in Gjakova, Gjilan, and Pristina, Kosovo	Train obstetric staff and develop national protocols regarding maternal and newborn care using the ALARM International Program.*
Moldova	Implementing new approaches for reviewing maternal and perinatal deaths in the Republic of Moldova	Provision of training seminars for multidisciplinary health staff to perform perinatal death audits to identify problems and causes of perinatal deaths.
Nigeria	Improving emergency obstetric care in Edo, Amambra, and Kaduna States, Nigeria	Collection and analysis of hospital data to identify case fatality rates and causes of maternal deaths in three states. This data is used for advocacy purposes. Training of health care providers in three hospitals.
Pakistan	Reducing maternal and perinatal mortality and morbidity in Thatta District	Provision of 24 hour emergency obstetric and neonatal care by upgrading facilities and ensuring staff presence in two sub-districts of rural Sindh.
Peru	Improving access to maternal and newborn care in Peru	Evaluation of maternal and perinatal health care using community surveys to identify barriers in accessing care. Development and implementation of standards of care.
Uganda	Capacity building by providing emergency obstetric and essential newborn care in Kiboga and Kibaale districts	Investigate deficiencies in maternal and newborn health in two underserved districts. Collect information regarding community perception of maternal health care. Upgrade emergency obstetric skills with the ALARM International Program.*
Ukraine	Improving emergency obstetric care in Ukraine: applying the ALARM international program	Expand coverage of the ALARM International Program,* evaluate behavioural change of health care staff, monitor specific maternal health indicators at health facilities and improve skills of national instructors in delivering the course.
Uruguay	Protecting women's health and lives by reducing unsafe abortion	Provision of counselling and consulting services for women with unwanted pregnancies in six health centres within four districts. Sensitization and education of communities and health professionals in providing appropriate services for women seeking abortion.

*The ALARM International Program is a five-day training course in emergency obstetric care that also aims to address the reproductive and sexual rights of women. It is produced by the Society of Obstetricians and Gynaecologists of Canada.

ministries of health, and other stakeholders, reinforcing the leadership qualities of these professional organizations and improving relations between obstetrician-gynaecologists and midwives. Recognizing the importance of a multidisciplinary approach in tackling maternal mortality, the professional association in Kenya has created a variety of partnerships with organizations, including the National Coordinating Agency for Population and Development, Men for Gender Equality Now, the National Nurses Association of Kenya, and the Kenya Clinical Officers Association.

Sustainable and effective change is a work in progress. The Saving Mothers and Newborns Project demonstrates how the experience of managing a development project provides a key opportunity for professional associations to strengthen their organizational, management, and administrative capacities. Some project managers report that it has been an eye-opening experience, as it has validated what

they had read or learned about women's realities in seeking maternal health care. These organizations are becoming strong and viable professional associations and are proving to be leaders in maternal and neonatal health care in their respective countries. As such, these organizations are becoming advocates, drawing attention to the problems of maternal and neonatal mortality and urging governments to increase funding and implement policies.

The involvement of the professional associations at each phase of the project from its conception to the design and implementation contributes to its success. Large investments of time and energy have been made by highly motivated and dedicated individuals within the professional associations, and they want to see that their efforts have made a difference. Although progress may be slow at times, progress is achievable. Change is most sustainable when it is driven by the professional associations themselves and

when its members are able to assume ownership and responsibility for their development.

PROJECT REVIEW

The project has now arrived at its midpoint, and FIGO is looking forward to a review of the 10 country projects at its upcoming Congress in Cape Town. At the Congress, each country will have the opportunity to review and report on their experiences of the SMNH project to date. Only by coming together and sharing these experiences—achievements, lessons learned, and challenges—can improvements be made.

CONCLUSION

Strengthening the capacities of professional associations is the key to sustainable leadership. Having the opportunity to improve maternal and newborn health with support from the twinning mechanism and FIGO, these professional associations are improving their technical, organizational, and infrastructural capacities to better articulate their advocacy roles, to collaborate with their national and regional governments, to form partnerships with non-governmental organizations and other agencies, and to contribute more effectively to their country's maternal and neonatal health challenges.

With modest additional funding from Sida, FIGO has been able to support 10 projects in lower and middle-resource countries. After two years, all projects are highly active and, with the guidance of the Safe Motherhood and Newborn

Health Committee and support of FIGO's staff, success has been assured.

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