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# **Towards Ending Preventable Maternal Deaths: The role of research in supporting improved health outcomes for women**

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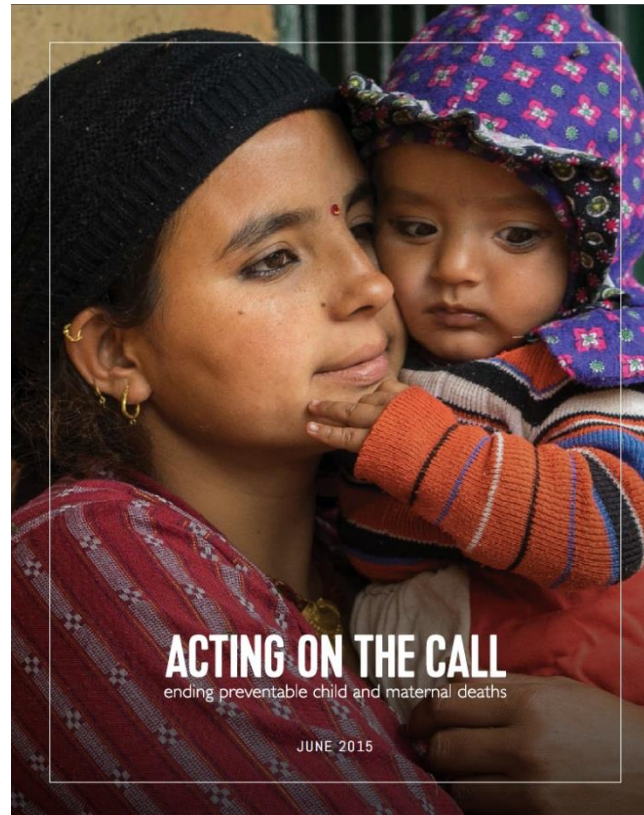
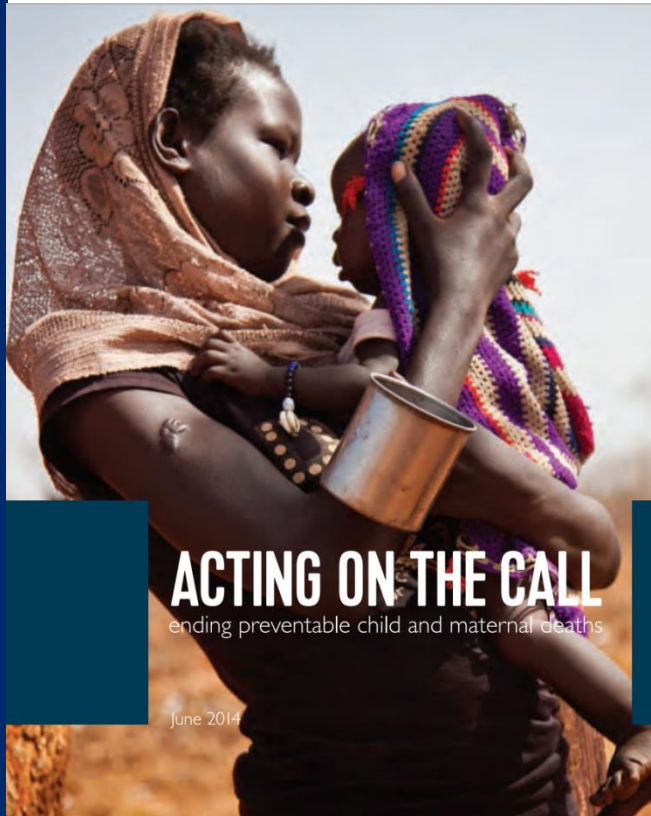
**RHCS Annual Meeting**

**Maternal Health Caucus**

**October 7, 2015**

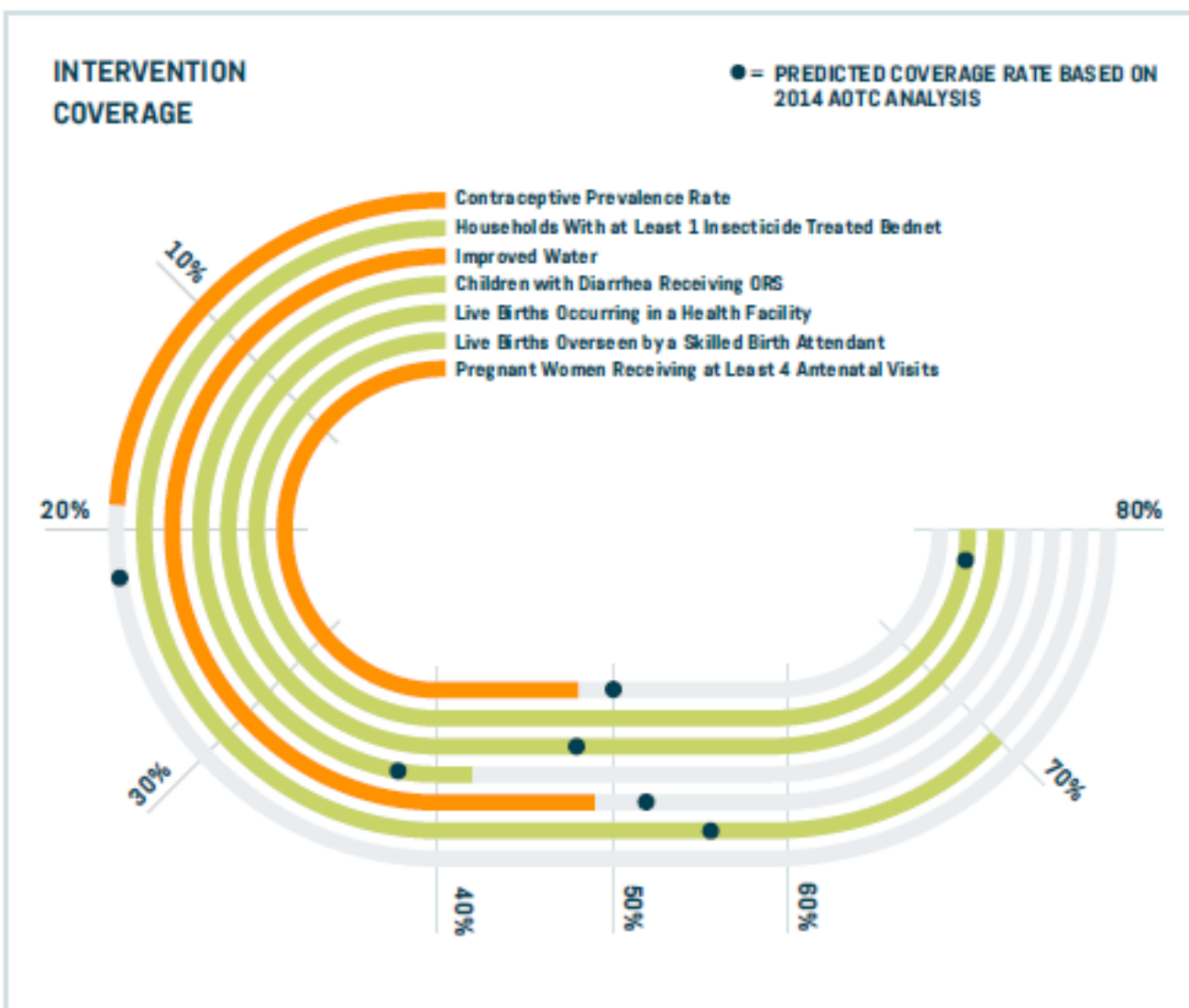
# Ending Preventable Child & Maternal Deaths (EPCMD)

2014 report sets ambitious targets for 2020 and identifies priority interventions



2015 report reviews progress against targets and identifies areas where additional effort is needed

# Acting on the Call 2015: Updates on Progress

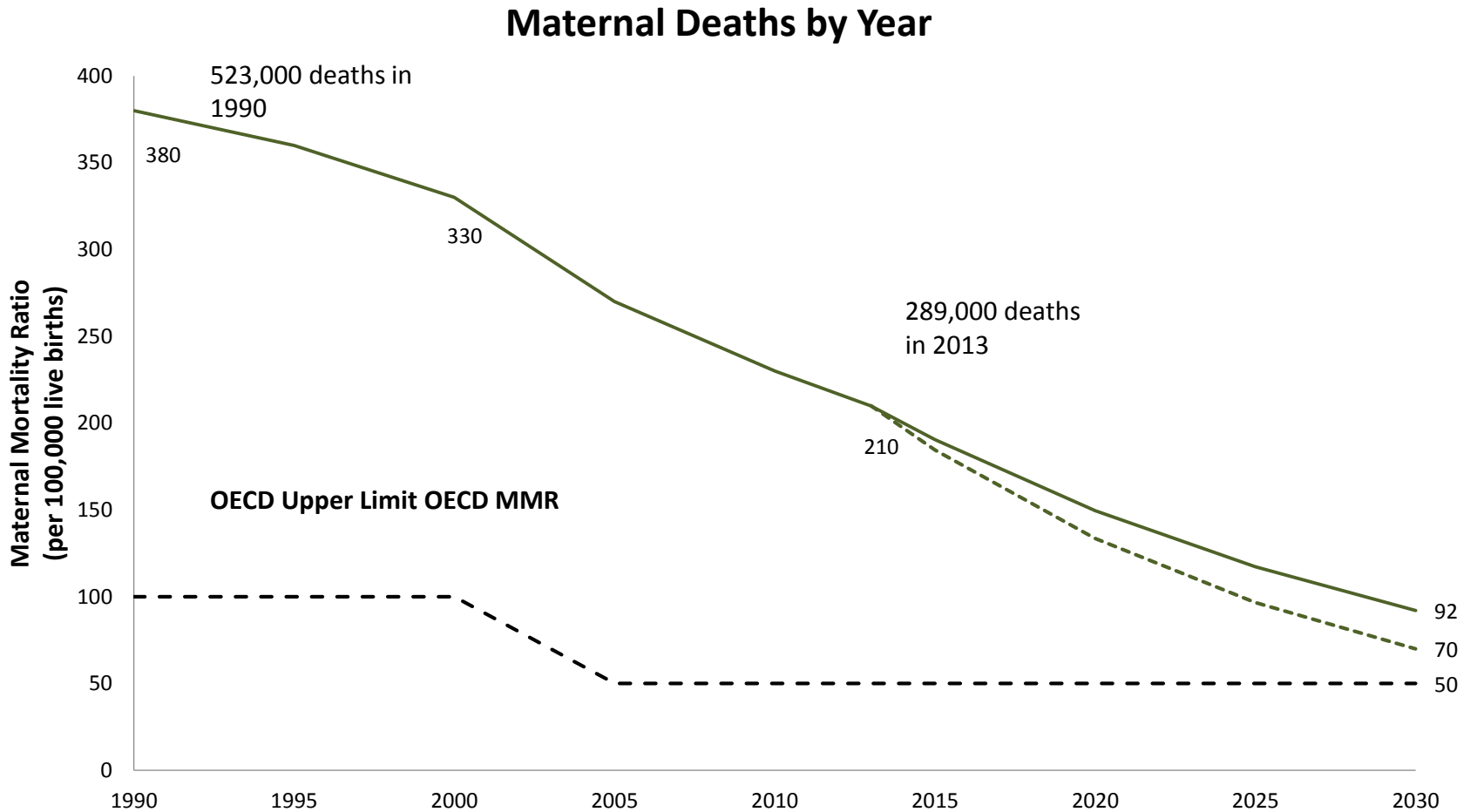


**Description:** Examines current intervention coverage estimates along side 2014 AOTC “Targets”

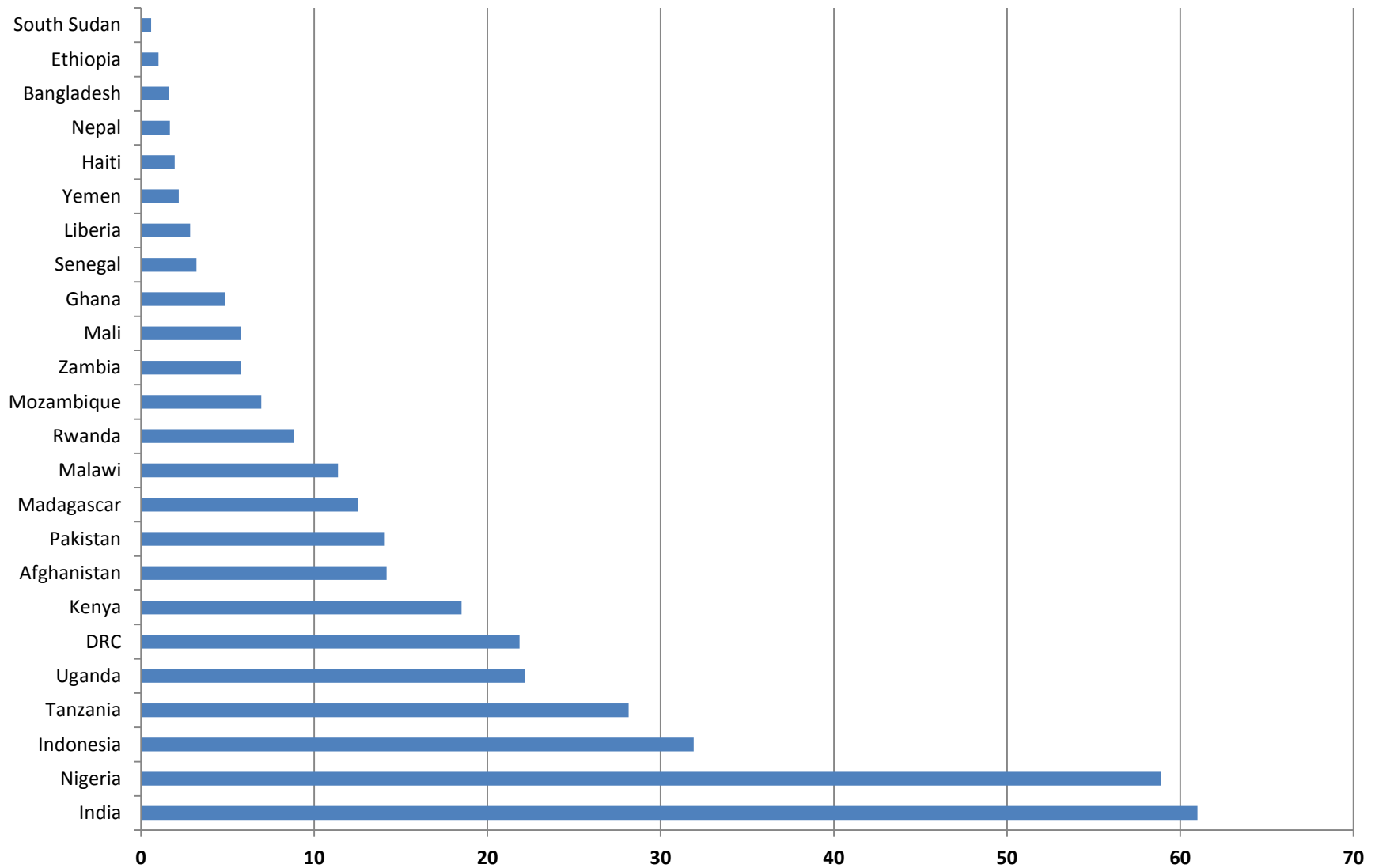
**Data Source:** DHS, MICS, 2014 AOTC (LiST)

**Countries:** Mali, Liberia, Nigeria, DRC, Yemen, Malawi, Nepal, Bangladesh, Kenya, Senegal, Zambia and Ghana

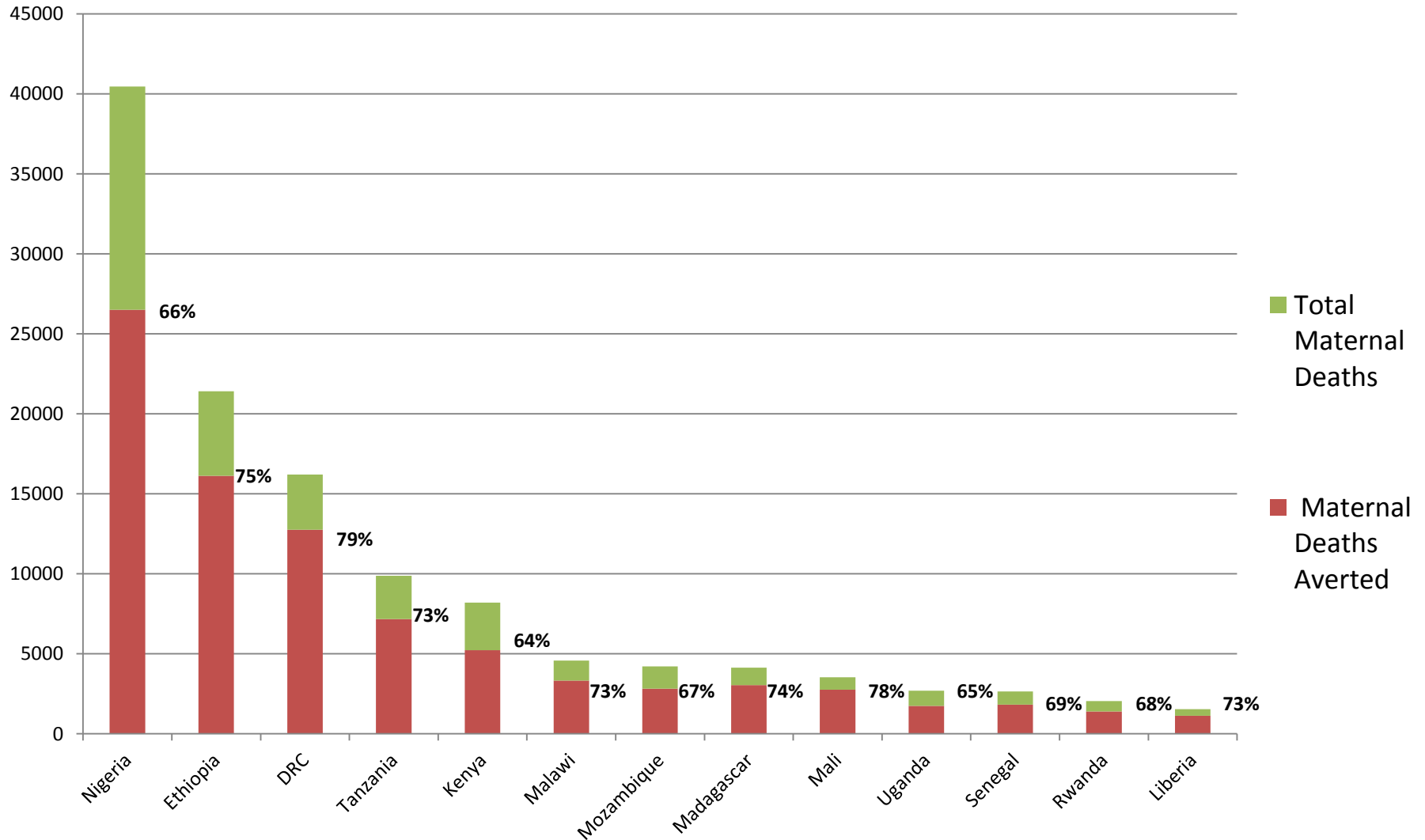
# ...setting the stage for a “grand convergence”



# Maternal Lives Saved from Family Planning Scale Up 2012-2020



# Projected Reduction in Maternal Deaths Due to Satisfying Unmet Needs for Contraception



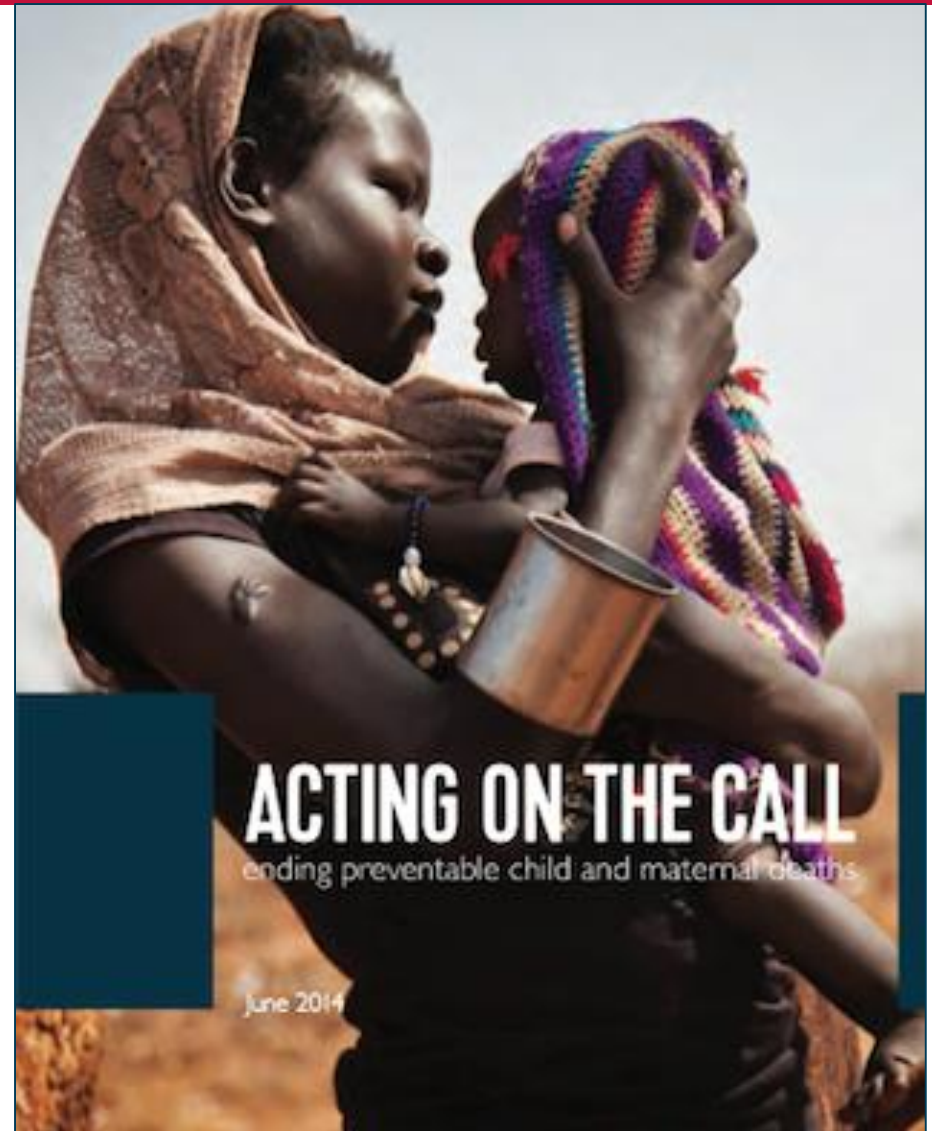
Source: DHS Analytical Studies No. 50, 2015; based on DHS data between 2006-2012

We can save

**600,000**

women

By 2020





How can *research and research utilization* help achieve this goal?



# Good Ideas, But Not Sufficient

- **Training**
- **Dissemination of information**
- **Passing laws/mandates/regulations**
- **Providing funding/incentives**
- **Organization change/reorganization**

Experimental data show they can produce 5-15% of intended outcomes

## What else is needed?

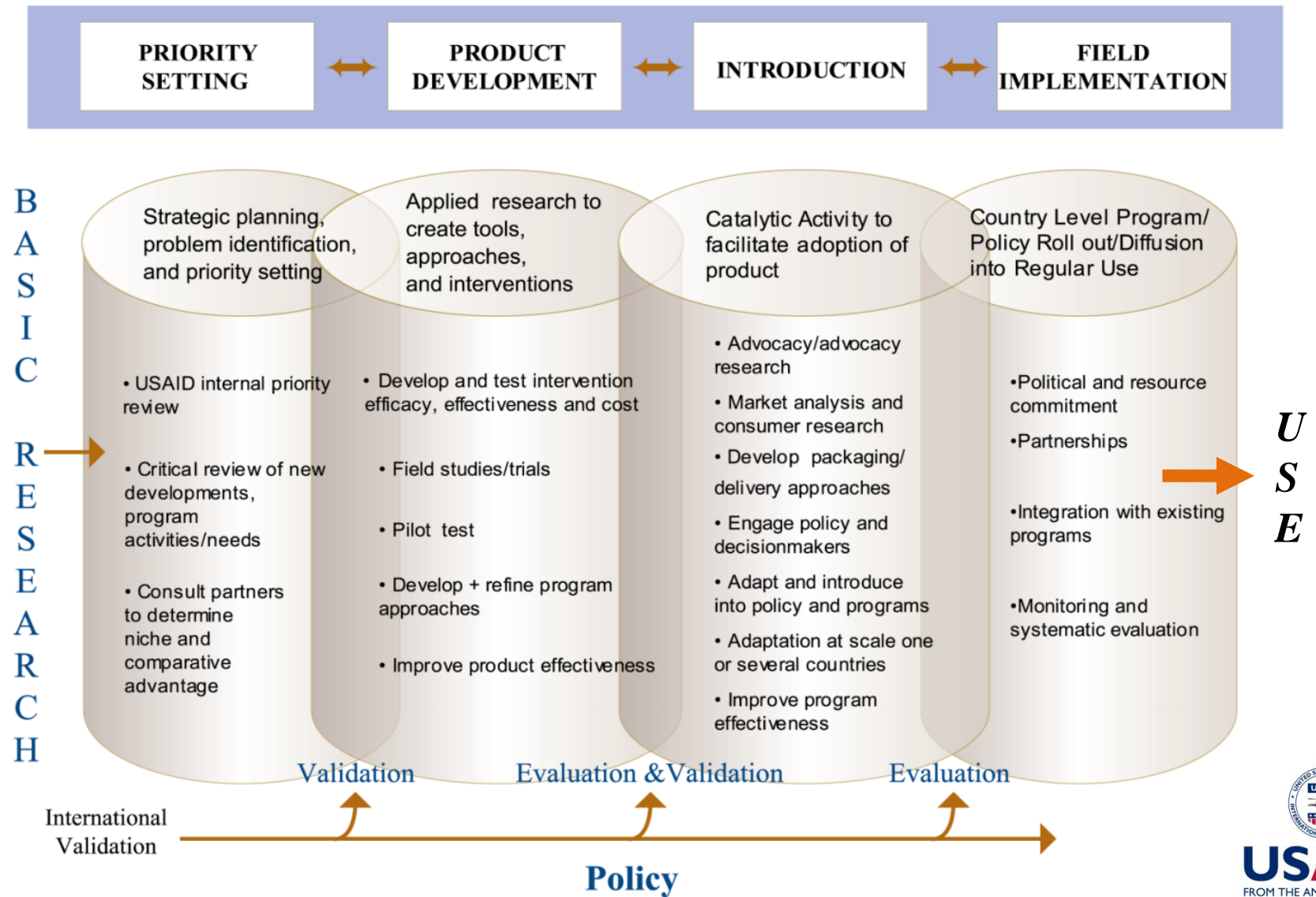
# How Strategies are **Implemented** Matters



	Randomized Controlled Trials Odds ratio	All “Adequate” Studies Odds ratio
Community coordination and organization	..	4.6**
Local adaptation of the intervention	9.3	4.3 *
Broad-based support of various stakeholders	..	3.9 *
Consultation and engagement of powerful interest groups	2.8	3.8**
Flexibility and modification through stakeholder feedback	..	3.4 *
Representation from powerful interest groups	2.4	3.0 *
Constraints reduction plans	6.7	2.7 *

\* Pvalue<0.05; \*\* Pvalue<0.01

# Health Research Program (HaRP) Research-to-Use Pathway



# HaRP supported implementation research on respectful maternity care

- Physical Abuse
- Undignified Care
- Lack of informed consent
- Lack of confidentiality
- Discrimination
- Abandonment of Care
- Detention in Facilities



# The prevention and elimination of disrespect and abuse during facility-based childbirth

## WHO statement

*Every woman has the right to the highest attainable standard of health, which includes the right to dignified, respectful health care.*



photo: UNICEF

*Many women experience disrespectful and abusive treatment during childbirth in facilities worldwide. Such treatment not only violates the rights of women to respectful care, but can also threaten their rights to life, health, bodily integrity, and freedom from discrimination. This statement calls for greater action, dialogue, research and advocacy on this important public health and human rights issue.*

## Accelovate Approach

- The Accelovate approach is designed to overcome barriers at several points along the research-to-use continuum, with a focus on Maternal and Newborn Health (MNH).

## Accelovate Results

- Enable increased availability of innovative and affordable health technologies
- Increased use of new health technologies in developing countries