Reducing Maternal Mortality

More than half a million women die each year due to complications during pregnancy and childbirth, most of which could be prevented with appropriate maternal health services and care.

Reducing maternal mortality is a worthy goal in itself, but it is also the best indicator that women are receiving the reproductive health services they need.

MacArthur’s grantmaking to reduce maternal mortality focuses on developing innovative community based models, enhancing the skills of health professionals, promoting informed advocacy on issues related to maternal mortality, and research.

MacArthur is investing $11 million to expand the use of an innovative new tool—the anti-shock garment—along with other simple technologies, to help reduce maternal deaths and morbidity due to postpartum hemorrhage in India and Nigeria. Results from pilot testing indicate that the garment has the potential to reduce mortality of women experiencing postpartum hemorrhage by up to 60 percent. One-third of the world’s maternal deaths take place in India and Nigeria.

Background

Little progress has been made in reducing maternal mortality in the last two decades. Although most maternal deaths are preventable with sufficient resources and commitment, more than half a million women die each year due to complications during pregnancy and childbirth. The vast majority of these deaths occur in the developing world.

Reducing maternal mortality is a worthy goal in itself, but it is also the best indicator that women are receiving the reproductive health services they need. The international community identified the reduction of maternal mortality as a key component of alleviating world poverty at the United Nations Millennium Summit in 2000 and agreed to work toward reducing the maternal mortality ratio by 75 percent by 2015.

While a solution to high rates of maternal death lies partly in the hands of the health system, it is also dependent upon the educational status of women and on countries’ legal systems. Women need access to good care, but they also need an enabling legal environment to protect their rights, and their health needs must be recognized and respected by their partners, families and communities.
WHAT WE FUND

MacArthur’s grantmaking to reduce maternal mortality strives to increase resources for women’s health and to improve the quality and reach of publicly provided reproductive health services.

Most of MacArthur’s grantmaking to reduce maternal mortality and morbidity is carried out in India, Nigeria, and Mexico, where the Foundation maintains offices.

MacArthur’s support for efforts to reduce maternal mortality focuses on:

- Developing innovative community-based models to demonstrate what really works to increase demand for services;
- Enhancing the skills of health professionals to improve the quality and availability of services;
- Promoting informed advocacy on critical issues related to maternal mortality to ensure that policymakers have the evidence and motivation to successfully address the problem; and
- Research that crosses disciplinary boundaries, covering topics such as political commitment, budget analysis and computer modeling of real-life scenarios.

The Foundation also funds selected international organizations in the population and reproductive health field whose work promotes innovation in policy, programs and services.

POSTPARTUM HEMORRHAGE AND THE ANTI SHOCK GARMENT

In 2003, the Foundation made its first grant to explore the use of an innovative new tool—the anti-shock garment—to help reduce postpartum hemorrhage, which accounts for approximately 30 percent of all maternal deaths. It is a low-cost neoprene suit that resembles the bottom half of a diver’s wet suit and is designed to help stabilize women who experience severe bleeding after childbirth. It requires little training and can buy time for women who often must be transported long distances in order to reach a health facility. After pilot testing in Nigeria, Mexico and Egypt that proved promising, the Foundation is investing $11 million to expand the use of the garment in India and Nigeria. The hope is that it, along with other simple technologies, will be incorporated into the standard package of care for postpartum hemorrhage in developing countries.

The grantee, Pathfinder International, is collaborating with multiple local and international partners to carry out the work in Nigeria and India.

REPRESENTATIVE GRANTS

India

ACADEMY FOR NURSING STUDIES
Andhra Pradesh, India
$200,000 and
NEHRU FOUNDATION FOR DEVELOPMENT
Gujarat, India
$250,000 in support of a project to reduce maternal mortality and morbidity through skill building and gender sensitization of auxiliary nurse midwives in rural Gujarat.

ACTION RESEARCH & TRAINING FOR HEALTH
Rajasthan, India
$230,000 in support of a project to enhance the skills of nurse-midwives to provide a continuum of maternal-newborn health services in a primary care setting in southern Rajasthan.

CENTER FOR BUDGET AND POLICY STUDIES
Bangalore, India
$160,000 in support of a project to use budget analysis as a tool for reducing maternal mortality and morbidity in Karnataka.

CENTRE FOR DEVELOPMENT AND POPULATION ACTIVITIES
Washington, DC
$200,000 in support of an alliance for advocacy to reduce maternal mortality and morbidity in Rajasthan and Maharashtra.

FEDERATION OF OBSTETRIC AND GYNECOLOGICAL SOCIETIES OF INDIA
Mumbai, India
$185,000 and
JHIEGO
Baltimore, MD $185,000 in support of a project to prepare general practitioners to provide quality emergency obstetric care in rural areas of India.

ANNUAL NUMBER OF MATERNAL DEATHS, 2000

Source: World Health Organization 2004
GUJARAT INSTITUTE FOR DEVELOPMENT RESEARCH
Gujarat, India
$160,000 in support of documenting best practices for maternal mortality and morbidity, with a focus on promoting wider use of innovations.

IPAS
Chapel Hill, NC
$200,000 in support of the scaling up of comprehensive abortion care services in the public sector in Maharashtra.

MAHILA SEWA TRUST
Gujarat, India
$200,000 in support of a project to scale up health insurance to reduce maternal mortality and morbidity in Gujarat and nationally.

SEVA MANDIR
Rajasthan, India
$280,000 in support of a project to develop and evaluate community-based interventions to reduce maternal mortality and morbidity in the Udaipar district of rural Rajasthan.

SOCIETY FOR EDUCATION, ACTION & RESEARCH IN COMMUNITY HEALTH
Maharashtra, India
$390,000 in support of a program to reduce maternal mortality and morbidity in Maharashtra, and $300,000 in support of a new research center to study maternal mortality and morbidity and young people's sexual and reproductive health in India.

SOCIETY FOR EDUCATION WELFARE AND ACTION – RURAL
Gujarat, India
$200,000 in support of a project to test model interventions to reduce maternal mortality and morbidity in Gujarat, and $350,000 in support of a new training and resource center for maternal mortality reduction in India.

Mexico

ASESORIA, CAPACITACION Y ASISTENCIA EN SALUD, SAN CRISTOBAL DE LAS CASAS
Chiapas, Mexico
$180,000 in support of developing social outreach strategies for engaging rural indigenous communities in preventing maternal death.

CENTRO DE INVESTIGACIONES EN SALUD DE COMITAN
Chiapas, Mexico
$190,000 in support of activities to reduce maternal mortality and morbidity in the southern border region of Chiapas.

EQUIDAD DE GENERO CIUDADANIA, TRABAJO Y FAMILIA
Mexico City, Mexico
$190,000 to monitor and disseminate information about Mexico's fulfillment of the Millennium Development Goal to decrease maternal mortality by 75 percent by 2015 at the federal level and in three states.

FUNDAR, CENTRO DE ANALISIS E INVESTIGACION
Mexico City, Mexico
$270,000 in support of research and dissemination of information regarding public budgetary allocations for maternal health and reducing maternal death.

GRUPO DE INFORMACION EN REPRODUCCION ELEGIDA
Mexico City, Mexico
$270,00 in support of the defense and promotion of reproductive rights through recording, documenting and litigating reproductive rights violations and training government, non-governmental organizations and members of the local community.

IPAS
Chapel Hill, NC
$300,000 in support of increasing the availability and improving the quality of legal abortion services.

K'INAL ANTSETIK
Mexico City, Mexico
$180,000 to contribute to decreasing maternal mortality among indigenous women of Chiapas and Guerrero.

COMITE PROMOTOR POR UNA MATERNIDAD SIN RIESGOS EN MEXICO
Mexico City, Mexico
$180,000 in support of efforts to decrease maternal mortality.

POPULATION COUNCIL
New York, NY
$225,000 in support of research on leading causes of maternal mortality.

ROSARIO CASTELLANOS – GRUPO DE ESTUDIOS SOBRE LA MUJER
Oaxaca, Mexico
$210,000 in support of scaling up of a training model for preventing maternal mortality with government health workers from the Oaxaca Ministry of Health and IMSS Oportunidades.

Nigeria

CAMPAIGN AGAINST UNWANTED PREGNANCY
Lagos State, Nigeria
$300,000 in support of media education, research, and strengthening medical school curricula and teaching related to reproductive health and maternal mortality.

CENTRE FOR DEVELOPMENT AND POPULATION ACTIVITIES
Washington, DC
$400,000 in support of an advocacy campaign to reduce maternal mortality and morbidity.

GUTTMACHER INSTITUTE
New York, NY
$340,000 in support of an outreach and advocacy initiative, using new evidence on unsafe abortion, to reduce maternal mortality and morbidity.

IPAS
Chapel Hill, NC
$400,000 in support of increasing access to post-abortion care services.
NIGERIAN PARTNERSHIP FOR SAFE MOTHERHOOD
Benin City, Nigeria
$200,000 in support of training advocates of safe motherhood.

PATHFINDER INTERNATIONAL
Watertown, MA
$400,000 in support of an initiative to improve maternal health, and $100,000 in support of institutional strengthening of facilities promoting safe motherhood.

SOCIETY OF GYNECOLOGY AND OBSTETRICS IN NIGERIA
Benin City, Nigeria
$250,000 in support of work to improve the management of emergency obstetric complications.

International

COLUMBIA UNIVERSITY CENTER FOR POPULATION AND FAMILY HEALTH
New York, NY
$200,000 in support of work by the Law and Policy Project to reduce maternal mortality and morbidity.

ENGENDERHEALTH
New York, NY
$185,000 in support of an international effort to reduce maternal mortality by identifying barriers to the availability and use of magnesium sulfate.

GYNUYITY HEALTH PROJECTS
New York, NY
$400,000 in support of a pilot test of the SpringFusor™ pump for providing magnesium sulfate to treat pregnant women with pre-eclampsia and eclampsia.

HARVARD UNIVERSITY SCHOOL OF PUBLIC HEALTH
Boston, MA
$500,000 in support of the development and application of a maternal morbidity and mortality policy model.

PATHFINDER INTERNATIONAL
Watertown, MA
$10,950,000 to implement a package of interventions aimed at reducing postpartum hemorrhage in India and Nigeria.

POPULATION COUNCIL
New York, NY
$875,000 in support of programs on reducing maternal mortality and advancing young people’s reproductive health.

SYRACUSE UNIVERSITY MAXWELL SCHOOL OF CITIZENSHIP AND PUBLIC AFFAIRS
Syracuse, NY
$125,000 in support of historical case studies of the political dynamics of safe motherhood policy in Nigeria, India, and globally.

WOMEN’S GLOBAL HEALTH IMPERATIVE UNIVERSITY OF CALIFORNIA, SAN FRANCISCO
San Francisco, CA
$1,794,000 in support of research on the anti-shock garment to reduce postpartum hemorrhage in Mexico, Egypt, and Nigeria.

WORLD HEALTH ORGANIZATION
Geneva, Switzerland
$350,000 in support of the Partnership for Maternal, Newborn and Child Health project to increase global awareness and action aimed at reducing maternal mortality and morbidity.

For More Information about MacArthur’s Population and Reproductive Health grantmaking

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About the MacArthur Foundation
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