



# 2016 ANNUAL REPORT

Makerere University Centre of Excellence for Maternal and  
Newborn Health Research  
(CMNHR)



**Save the Children**

## MESSAGE FROM THE CENTRE LEADER

### Greetings!

2016 has been a great year at the Makerere University Centre of Excellence for Maternal and Newborn Health Research. We have grown our portfolio and have brought new partners on board, finalized a newborn research agenda for Uganda, built capacity, have collated and disseminated maternal and newborn information through academic publications, circulated a weekly e-newsletter (MNHR Centre e-Post), offered research grants to masters students and attended conferences, among other successes. However we cannot fully bask in the glow of this success. We still have a long way to go to fulfill our core vision of seeing a country where no mother or newborn dies due to preventable causes. Uganda achieved Millennium Development Goal 4 but maternal and newborn deaths, as well as stillbirths remain a challenge. Now the country has committed to achieve the even more ambitious Sustainable Development Goals (SDGs) by 2030.

Currently, an unacceptable 85,000 largely preventable deaths during pregnancy and around the time of birth (6000 maternal deaths, 39,000 newborn deaths and 40,000 stillbirths) still occur in our country despite the existence of evidence based interventions to address these fatalities. The lack of understanding of how to bridge the gap in knowledge-policy-implementation still impedes the operationalization of the knowledge, evidence and policies to save mothers and newborns. We are however optimistic that this too will change.

We would like to acknowledge all our partners who have tirelessly worked with us. We applaud the Ministry of Health, Save the Children, the Uganda Paediatric Association, the Association of Obstetricians and Gynaecologists of Uganda among others for the wonderful partnerships we have had. Special thanks also go the Bill and Melinda Gates Foundation, the Children Investment Fund Foundation, the Social Initiative and the Einhorn Family Foundation.

We take this opportunity to wish you a prosperous 2017.  
Sincerely,

**Dr. Peter Waiswa**  
Associate Professor and Team leader, CMNHR.



*"We still have a long way to go to fulfill our core vision of seeing a country where no mother or newborn dies due to preventable causes"*

### Cover photo:

Safebirth Checklist orientation under PTBi study at Jinja Regional Referral Hospital





**Dr Harriet Nambuya takes midwives through a gestational age measurement skills update session**

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2016 MNH Symposium

## ABOUT US & OUR 2016 ACHIEVEMENTS

Makerere University School of Public Health (MaKSPH) together with Save the Children's Saving Newborn Lives Programme initiated the Makerere University Centre of Excellence for Maternal and Newborn Health Research (CMNHR) in 2014.

The major goal of the Centre is to mobilise existing internal and external efforts and resources for maternal and newborn research, information and

### Abbreviations

**MDGs** Millennium Development Goals

**SDGs** Sustainable Development Goals

**MaKSPH** Makerere University School of Public Health

**LiST** Lives Saved Tool

**MNH** Maternal and Newborn Health

**NGO** Non-Government Organisation

**HIV** Human Immunodeficiency Virus

**ENAP** Every Newborn Action Plan

knowledge sharing to inform efforts for evidence based policy making, as well as designing and implementing interventions at scale in Uganda and beyond.

In 2016, we had many achievements in the areas of capacity building, developing a newborn research agenda for Uganda, knowledge management and dissemination, media engagement, partnerships and collaborations.



# BUILDING NATIONAL AND GLOBAL CAPACITY FOR EVIDENCE INFORMED PLANNING

## Lives Saved Tool (LiST) Training

Fifty five participants including programme as well as project implementers, policy makers, students, project managers, statisticians among others have taken part in the two trainings held in Uganda this year. The Lives Saved Tool (LiST) is a freely available computer-based tool that allows users to set up and run multiple scenarios to look at the estimated impact of different intervention packages and coverage levels. "This was an extremely important training and worth my time," remarked a trainee. For another: "This tool will come in handy to be used by the Ministry for evidence based planning."



*Participants at the Dubai training*



*The two LiST cohorts trained in 2016*

Also with support from Johns Hopkins Bloomberg School of Public Health, the Makerere team was called upon to facilitate at an international training in Dubai (5<sup>th</sup>-7<sup>th</sup> October 2016). The training drew participants from Nepal, Bangladesh, India, Philippines, Kyrgyz Republic, United Kingdom and Switzerland. This was the third international training for our team in a space of two years, the first two having taken place in Washington DC, USA.

## Training the Future Experts

- **Phd Studies**

Two of our colleagues embarked on their PhD studies. Dr Gertrude Namazzi registered with Makerere University and is researching on Brain impairment among infants. Mr Joseph Akuze registered with the London School of Hygiene and Tropical Medicine and he is comparing three methodologies to determine better capture and outcome of pregnancies.

- **Student Research Scholarships**

The Centre awarded six students research grants for thesis research in maternal and newborn health. The students were pursuing courses including Master of Public Health Research, Public Health, Public Health Nutrition and Nursing. This brings our total grant recipients to 15 in three years.

## Clinical Skills and Data Quality

- **Advanced Newborn Skills Course**

To improve quality of care, we collaborated with the Uganda Paediatric Association in developing and piloting an Advanced Newborn Skills Course that complements the Helping Babies Breathe (HBB) plus course. While it is primarily designed for an in-service setting, we plan to engage the ministries of Health and Education to have it incorporated in pre-service training for doctors, midwives and nurses.



*One of the recipients of the students grants at the award ceremony*



*Practical session during the Advanced Newborn Skills Course training*



## • Pronto Training

The Centre under the Preterm Birth Initiative (PTBi) study has trained about 180 health workers from six hospitals in the Busoga sub-region in Pronto. Pronto is a simulation training used to practice the initial steps in managing a mother so as to deal with the risk factors that can lead to preterm labour and delivery; and also management of a preterm at birth. The overall aim of this is to optimise child birth within the six hospitals including Jinja Regional Referral, Kamuli General, Kamuli Mission, Bugiri, Buluba and Iganga hospitals. The cadres of trained personnel include Nurses, Midwives, Obstetricians and Gynaecologists, Paediatricians and Neonatologists.

## • Data Strengthening

The Preterm Birth Initiative study was engaged in strengthening the capacity of records

personnel in the six hospitals in the Busoga sub-region. Data experts from the University of California San Francisco and the Makerere University School of Public Health under PTBi had regular sessions with hospital staff engaged in data collection and management.

## • Student Placements

We hosted three PhD students in 2016. These included Ms Gina Beugel from Karolinska Institutet in Sweden, as well as Ms Shebani Dandenkar from the University of California San Francisco and Ms Dodie Rimmelin from Harvard University, both found in the United States of America. Such students usually benefit from the various projects run by the centre in terms of experience and vast amounts of data which they can use for their theses.



*Simulation during the Pronto training*

# PROPOSING NEWBORN RESEARCH PRIORITIES FOR UGANDA

In order to accelerate progress in newborn indicators, research and innovation remain critical. However, most low income countries lack country specific research priorities. In 2016, MakSPH under the auspices of the centre and in partnership with Save the Children and the Uganda Paediatric Association,

## Uganda Newborn Research Agenda: Top 15 Questions Suggested by Experts

1. How can we effectively sustain partograph use for labour management?
2. Can participatory/ peer women groups improve neonatal health in the Ugandan setting?
3. How can we effectively maintain clinical competencies for newborn care in health facilities?
4. How can we improve newborn outcomes among vulnerable populations?
5. What low cost technologies improve neonatal survival in community and facility setting in Uganda?
6. What is the aetiology of still births in Uganda?
7. Does knowledge of essential newborn care practices among mothers have an impact on newborn survival?
8. How can male involvement be used to improve neonatal outcomes?
9. Can integration of essential neonatal care into lower health facilities improve neonatal outcomes?
10. How can newborn referral and follow up be improved at community and facility level?
11. Can involvement of newborn champions in the political, social and economic arena improve newborn outcomes?
12. What is the level of skills of midwives in neonatal resuscitation in Uganda?
13. Can the use of simple algorithms by CHWs to identify and refer neonates with danger signs improve neonatal outcomes?
14. Can integration of culturally relevant practices within maternal and newborn care improve uptake of institutional deliveries?
15. What is the feasibility of improving access to neonatal sepsis management using simplified antibiotics for newborns when referral to hospital is not possible?

sought to introduce a newborn research agenda for Uganda using the CHNRI methodology. This process saw both Ugandan and international newborn health stakeholders prioritise fifteen questions from an initial list of 104 questions. The fifteen top priority questions focus on: demand, supply and key health system factors research with potential to help Uganda achieve the SDG targets for newborn health. Our next step is to dialogue with the Uganda National Health Research Organisation on the way forward.

## KNOWLEDGE MANAGEMENT AND DISSEMINATION

### Website

The centre has maintained an interactive and robust website. This has been one of our major portals of knowledge dissemination. The website which was revamped as the year came to a close can be accessed via [www.mnh.musph.ac.ug](http://www.mnh.musph.ac.ug)

### E- Newsletter

On a weekly basis, we send out an electronic newsletter to over 700 MNH stakeholders. The newsletter contains topical issues including news, blogs, opinion pieces and the latest maternal and newborn research publications from around the globe.

### Publications

In 2016, the centre staff were co-authors in 10 publications in peer reviewed journals. These publications can be found on our website ([www.mnh.musph.ac.ug](http://www.mnh.musph.ac.ug)).

### National MNH Symposium

The second Uganda maternal and newborn symposium with a theme '**Maternal and Newborn care in Uganda: High impact innovations for scale up**' was held on October 19, 2016 at Hotel Africana in Kampala. The symposium attracted over 200 MNH implementers, programmers, researchers and MNH enthusiasts. Unique to this year's conference was the presence of distinguished scholars with vast expertise in the largely successful HIV response who encouraged the MNH fraternity to go to the extremes and make an ardent case of MNH. Also hot on the discussion floor was the issue of the new



Community Health Extension Workers (CHEWs) policy and strategy in Uganda. This controversial subject elicited lots of feelings, emotions and valuable discussion.

**Key messages that emerged from the symposium discussions were:**

- Strong leadership and governance required for success of MNH interventions.
- Advocacy for more investment in maternal and newborn health needs to be strengthened.
- Partnerships and collaborations are critical; not forgetting the private sector.
- We need to harness the power of voices (families, communities, and media) to cause change.
- Bridging the gap between service delivery and the community through the CHEWs/CHWs is essential.
- Integration of Maternal and Newborn Care into HIV/AIDS programmes.
- Scale up of feasible, affordable interventions is possible.

## HSR 2016 Symposium

The Health Systems Research Symposium held in Vancouver, Canada galvanized efforts of researchers and organizers across the world for the last two years. One outstanding remark made by many delegates was “there are many Ugandans and Makerere University is everywhere”. The maternal and newborn presentations were impressive with five presentations from our very own centre. Many presentations from similar centers around the world indicated the role of community health workers and the education needed for communities to play their rightful roles to improve maternal and newborn health.

## Preterm Birth Initiative Annual Symposium

Each year, the Preterm Birth Initiative (PTBi) hosts a symposium to unite colleagues from the California and East Africa sites (including MakSPH), in order to showcase PTBi's work, present the latest prematurity research, and facilitate the exchange of ideas and discussion amongst investigators and stakeholders within the PTBi network. 2016 marked the first annual PTBi Symposium held from September 21 through September 23 in Nairobi, Kenya.



PTBi Annual Symposium Nairobi 2016 photo

# Seminars

In 2016, we conducted four seminars on topical issues in maternal and newborn health. The seminars bring together academic staff, current postgraduate students and administrative colleagues of the University and other persons in programme and policy implementation into an informal intellectual and social environment to exchange ideas across the barriers of time, space and disciplines. The seminars conducted this year include:

- Public health and social justice: health advocacy for Women and Child health by Dr Farah M Shroff, Adjunct Professor in the Department of Family Practice and School of Population and Public Health Faculty of Medicine, University of British Columbia in Canada.
- Strengthening district Health systems to improve child health programming through the use of evidence based planning. The CODES randomized Control Trial in Uganda by Assoc. Prof. Peter Waiswa and Mr. Eric Segujja.
- The role of Academia in achieving the SDGs by Prof. Stefan Peterson, Head of Health, UNICEF Global.
- Advancing Newborn health and Survival in the SDG era by Dr Janna Patterson, Senior Program Officer - Maternal, Newborn, and Child Health Program, the Bill & Melinda Gates Foundation



*Group work during a seminar*





*Collaborative talks with a representative from USAID*

## PARTNER ENGAGEMENT & COLLABORATIONS FOR SUSTAINABILITY

With funds from the different projects under the Centre, as part of our partnership strengthening activities, we co-funded the Uganda Medical Association Roundtable meeting in August, the Association of Obstetricians and Gynecologists of Uganda Clinical Symposium 2016, two National Newborn Steering Committee meetings and a stakeholders meeting for District Health officers

and other healthcare leaders from the Busoga Sub-region.

The centre is getting more recognition not only nationally but also globally. Our international partners include Karolinska Institutet, Johns Hopkins University, London School of Hygiene and Tropical Medicine, University of California San Francisco, and Child

Investment Fund Foundation. Locally, we are in the process of engaging USAID, UNFPA, and UNICEF to collaborate with us. Internationally, there are ongoing discussions with ELMA philanthropists and the Maternal Health Task Force.

# INDEPTH NETWORK: MATERNAL NEWBORN AND CHILD HEALTH WORKING GROUP

Through the Maternal, Newborn and Child Health Working Group (MNCH-WG) housed at CMNHR, the INDEPTH Network seeks to contribute to the collection of longitudinal data on all health aspects including maternal, newborn and child health, migrations, socioeconomic status and births and deaths, among others. By October 2016 there were 33 sites that were members of the group.

## Achievements in 2016

1. **ENAP metrics work:** The Maternal, Newborn and Child Health Working Group (MNCH-WG), through London School of Hygiene and Tropical Medicine (LSHTM), obtained funding from the Children's Investment Fund

Foundation in which five HDSS sites will conduct global impact research on measurement of pregnancies, still births, newborn deaths, gestational age, and birth weight. The five sites are: Bandim (Guinea Bissau); Dabat (Ethiopia); Iganga-Mayuge (Uganda); Kintampo (Ghana); Matlab (Bangladesh). In June 2016, we held the ENAP metrics design and protocol development workshop in Kampala, Uganda and wrote the protocol for the study in collaboration with LSHTM and with input from the sites. This is being submitted for ethical review first at the LSHTM, after which each of the

individual sites will adapt the protocol and submit it to their local ethical review committee.

2. **Development of the strategic plan:** More work was done on the strategic plan for 2017-2021 for the working group. A draft is available and will be completed soon.
3. **Improving measurement:** The MNCH-WG is writing a concept on improving data across the Network. Furthermore, design of a tool that can be used to improve tracking of pregnancies and their outcomes is underway, after assessing some of the existing tools from different sites.
4. **Joint publications:** We intend to publish cross-site manuscripts and publications in order to provide a broader range of evidence to the world on maternal, newborn and child health issues. A draft of a paper on capturing pregnancies, stillbirths and neonatal deaths across INDEPTH sites is in its advanced stages.
5. **Global partnerships:** In 2016, the group held discussions with a team from Global Alignment for Immunization Safety Assessment (GAISA) that are interested in surveillance for maternal immunization. A protocol was written, led by James Stark from New York University (NYU), to conduct a pilot study within the Iganga-Mayuge HDSS (IMHDSS) in Uganda under this initiative. Students from NYU went to the IMHDSS to collect data alongside the regular data collectors.



*Prof Joy Lawn speaks at the INDEPTH-ENAP workshop*



## MEDIA ENGAGEMENT & VISIBILITY

### Journalists' Dialogue Meetings

The Centre and Save the Children's Saving Newborn Lives programme in a bid to have correct and sustained reporting on MNH issues organised two dialogue meetings with health journalists in July and December in Kampala. These meetings provided a platform for health journalists to critically reflect on pertinent issues affecting Maternal and Newborn healthcare that require media coverage. Overall, the dialogues brought together 30 journalists from upcountry and Kampala.

### Documentary Films

In the course of 2016, we produced seven documentary films focusing on maternal and newborn care. The films can be accessed on the YouTube channel "**Maternal & Newborn Health@MakSPH**"

(<https://www.youtube.com/channel/UC0UQM1Eniy5k3-u8wEUZtBg>)

### Media Interviews

The Centre Team lead granted several media interviews to both local and international media. One of the memorable interviews was with CCTV, America to talk about the efforts of Makerere University in improving maternal and newborn health in Uganda. The full TV broadcast can be viewed at this link:

<https://www.youtube.com/watch?v=2E2Ztd1m-kM>.

## CORPORATE SOCIAL RESPONSIBILITY

We donated one million Uganda shillings (1,000,000) to the Emran Kakaire Memorial Fund. The donation was used to buy hot water bottles for 88 families with children living with sickle cell disease and attending the Paediatric wing of Jinja Regional Referral Hospital.

The Emran Kakaire Memorial Fund (EKMF) is dedicated to the memory of Emran Kakaire Kirunda, who died of Sickle Cell Disease complications on August 11, 2014, at the age of 5 years.

Emran loved fellow children and valued education. And to keep his memory alive in a significant and lasting way, on April 12, 2016 his father established EKMF seeded by a fraction of his salary.


#### The offers:

- Partial scholarships every term to initially help 5 primary school children from disadvantaged families in the village of Wantunda

in Jinja where Emran was laid to rest.

- Donations of hot water bottles and supplies of folic acid tablets, through Sicke Cell Network Uganda.

By the end of 2016, sixty five families had received supplies of folic acid while 88 families got hot water bottles used in the managing pain during sickle cell crises.



Some of the recipients of hot water bottles at Jinja Hospital

# MAKERERE UNIVERSITY SCHOOL OF PUBLIC HEALTH



Inspired by the survival of her preterm baby in 2014, Entrepreneur Lydia Basemera ( in striped dress) made a donation of 700 US Dollars to the Centre to go towards saving lives of preemies. The donation was extended to Jinja Regional Referral Hospital to buy [Kangaroo Mother Care](#) (KMC) wraps. The hospital has for over two years been running a weekly preterm follow up clinic, which was set up through collaborations with Makerere University.



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