

## REPORT OUT

# MOVING ON MATERNAL AND NEWBORN EMERGENCY CARE: INNOVATIONS AND PARTNERSHIPS FOR LOW RESOURCE SETTINGS

### OVERVIEW

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On May 18<sup>th</sup>, 2017 Touch Foundation and Vodafone Foundation hosted a symposium in New York City with expert panelists to discuss the challenges and successes in improving access to maternal and newborn health care in sub-Saharan Africa and other low-resource settings. Framed by the Sustainable Development Goals, representatives from civil society organizations, private sector, donor groups, government, and academia engaged in meaningful discourse on how to improve the health and lives of mothers and babies globally.

The first panel summarized the measurable impact of an emergency referral and transport system in Tanzania and stressed the importance of high-quality data collection, effective private public partnerships, and critical analysis to achieve buy-in and scale.

The second panel discussed a range of innovative approaches to remove barriers to quality health care for women and newborns that are made successful in part due to mutually beneficial partnerships, a systems approach to integrating devices and interventions, and cultivation of locally-led innovations.

### KEY TAKEAWAYS: EMERGENCY REFERRAL & TRANSPORT IN TANZANIA (PANEL 1)

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#### Panelists

- **Lord Michael Hastings** of Scarisbrick CBE, Global Head of Citizenship for KPMG, *Moderator*
- **James BonTempo**, Chief Strategy Officer, D-tree International
- **Dr. Siobhan Crowley**, Director of Health, ELMA Philanthropies
- **Dr. Ntuli Kapologwe**, Director of Health, Social Welfare & Nutrition Services, Tanzania's President's Office of Regional Administration and Local Government
- **Massimiliano Pezzoli**, Country Director, Touch Foundation
- **Lee Wells**, Director, Vodafone Foundation Ventures & Head of Programmes, Vodafone Foundation

#### *The Mobilizing Maternal Health (MMH) program is impactful and cost-effective*

In July 2015, Touch Foundation, Vodafone Foundation, ELMA Foundation, USAID/PEPFAR, and Pathfinder International launched an Emergency Transportation System (EmTS) in two rural districts of Tanzania to provide timely access to safe transportation and appropriate care for women and newborns facing obstetric and neonatal emergencies. In the context of rural Tanzania, the emergency transportation system was cost-effective and highly impactful, reducing maternal mortality rates by 27%. Phase 2 of the program, beginning in late 2017, will scale up the EmTS to an entire region of Tanzania and serve 90,000 women and newborns. For more information, read the [full report](#) or watch the [video summary](#).

#### **High-quality data enables quick fixes and better resource allocation**

In the MMH system, data is continuously collected in real time across the continuum of the patient's journey from their home to the appropriate health facility. The high quality specific data was utilized to iterate improvements throughout Phase 1 and will be leveraged during Phase 2 to design additional system components and maximize the impact.



### **Effective partnerships ensure flexibility and accountability**

The public private partnership framework of the MMH system enabled the structured and vetted private taxi network to complement the government-sponsored ambulances and provide safer referrals and transport in a maternal and newborn emergency. Vodafone Foundation's four "Ms" – money, mobile, management, and market presence – guide the Foundation's strategic investment in health and development work, including their contribution to the MMH program, and allow them to leverage their resources and core business to shared value among partners and beneficiaries. D-tree International led the technological solution that connects women to transport and care. ELMA Foundation spoke to their role as a funding partner that provided input and required periodical reviews. The Tanzanian government provided valuable technical input across the design, implementation, and evaluation of the MMH program. Collaboratively, all partners consistently felt accountable and sought out mechanisms to improve upon the integrated transport system and maximize impact.

### **Scaling impactful initiatives requires critical analysis of results**

The strategy of stage-gating allows resources to be allocated towards the most effective parts of the program so that ultimately successful components are scaled and weaker measures are revised. Dr. Siobhan Crowley defined MMH's swift reorganize and regroup strategy as "fail fast, fix fast." In the long run, the dissemination of successful results could influence the creation of similar programs beyond Tanzania.

### **Evidence from data and positive beneficiary experiences grow government and community trust**

In order to scale to an entire region during Phase 2 of MMH, Dr. Ntuli Kapologwe highlighted the need for additional evidence regarding MMH's impact to share with Government of Tanzania stakeholders and partners. Before the EmTS' launch, there was skepticism and concern related to the safety and efficiency of community taxi drivers as compared to traditional ambulances that was overcome by reliable data demonstrating the shorter transit times of taxis and increased survival of women and newborns.

Community trust grew and health seeking behavior improved as women experienced timely and safe taxi rides and efficient referrals to care, enabling them to avoid unsafe and slow methods like bicycles.

### **KEY TAKEAWAYS: INNOVATIVE APPROACHES TO BARRIERS TO CARE (PANEL 2)**

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#### **Panelists**

- **Lord Michael Hastings** of Scarisbrick CBE, Global Head of Citizenship for KPMG, *Moderator*
- **Robert Miros**, Chief Executive Officer, 3<sup>rd</sup> Stone Design
- **Lois Quam**, President and Chief Executive Officer, Pathfinder International
- **Stephen Rudy**, Chief Executive Officer, Gradian Health Systems
- **Andrew Storey**, Director, Maternal and Newborn Health, Clinton Health Access Initiative

#### **Productive partnerships depend on strong intersections of interest and mutual understanding**

Panelists agreed that ideally program partners must bring distinct and complementary areas of expertise and competence to collaborations as well as understand each group's risk factors, strengths, and weaknesses. To improve effectiveness, Lois Quam emphasized that all parties must also embrace generous mentalities to build trust and avoid miscommunication. These effective partnership criteria are especially crucial when navigating public private partnerships. While these sectors may have divergent approaches, they share the goal of expanding coverage of health services and the private sector in Tanzania provides up to 40% of health care. In Nigeria, CHAI's success in reducing neonatal mortality by 43% and maternal mortality by 37% over an 18-month period hinged on their ability to foster meaningfully collaboration among government and civil society to run an integrated program.



#### **Health systems should support effective product innovation**

Malfunctioning and inappropriate medical technology as well as lack of a skilled cadre of biotechnicians is a massive barrier to various forms of health care in low-resource settings. 3<sup>rd</sup> Stone Design and Gradian



Health Systems emphasized that the proliferation of life-saving appropriate medical equipment in low-income countries requires a well-functioning health system that fosters an ecosystem of local technical competency to maintain and repair equipment as well as potentially lead product innovation. Strong health systems and consistent product innovation can promote self-sufficiency that could overcome malfunctions of potentially life-saving equipment, a critical barrier to care.

### **Tapping into local innovations requires cultivation**

While there is no shortage of local talent in sub-Saharan Africa and other low-resource settings, a lack of innovation infrastructure inhibits potential innovators from experimentation and continuous iteration of their ideas and products. Partnerships, resource allocation, and an environment that supports risk-taking can better support local innovation.

### **ABOUT TOUCH FOUNDATION**

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Touch Foundation was founded in 2004 by Lowell Bryan, a Senior Partner Emeritus at McKinsey & Company, now President of Touch. Touch combines the best of private and public sector approaches and expertise to improve the health of Tanzanians by strengthening the health system. We focus our activities on two key elements of the health system: improving the quantity and quality of healthcare and enhancing healthcare delivery. Touch expands its impact by sharing acquired knowledge with the local and international public health community.

Read more at: [www.touchfoundation.org](http://www.touchfoundation.org)

### **ABOUT VODAFONE FOUNDATION**

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The Vodafone Foundation's Connecting for Good programme combines Vodafone's charitable giving and technology to make a difference in the world. Globally, the Vodafone Foundation supports projects that are focused on delivering public benefit through the use of mobile technology across the areas of health, education and disaster relief. The Vodafone Foundation invests in the communities in which Vodafone operates and is at the centre of a network of global and local social investment programmes. The Vodafone Foundation is a UK registered charity, registered charity number 1089625.

Read more at: [www.vodafonefoundation.org](http://www.vodafonefoundation.org)