

PPH Voices from the Field:
Engaging Country
Stakeholders to Advance
Postpartum Hemorrhage Care

November 19–20, 2019

Dakar, Senegal

Pullman Dakar Teranga

Signara Room



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Meeting Objectives

- Discuss PPH landscape findings and gather your feedback to refine our understanding of key gaps and issues in-country
- Hear from you on the key challenges you see in current PPH/MH global stakeholder coordination, application of new evidence and best practices, and knowledge sharing
- Initiate discussion on how local and global stakeholders can work together to address these challenges
- Invite country stakeholders to guide the vision for future PPH leadership and coordination and ensure future and ongoing engagement in decision-making on these topics

This meeting is NOT intended to ...



... finalize any strategic decisions for USAID or others



... commit to specific investments or implementation activities



... And while the landscape analysis findings that will be shared today go beyond PPH, this meeting will maintain a focus on PPH

Ground rules



Engage fully! Please ask questions and participate in discussions. Limit use of technology!



Remember the spirit of this meeting is to listen to voices from all countries and be respectful of all opinions



Don't worry about taking notes, we will plan to send meeting minutes and materials to participants



Use the microphone when asking questions or making comments



We will have a "parking lot" for topics that can be put aside for now and address later, if needed



Please plan to attend all lunches, we will use the time for small group discussions



Please be on time!



Anything else?

Getting to know you

Please introduce yourself & role related to PPH ...

... and share a fun fact about yourself!

A close-up photograph of a woman in traditional African attire, including a yellow and blue patterned headwrap and a red and white beaded necklace, holding a newborn baby. The baby is wrapped in a yellow patterned blanket and is crying. The woman is looking down at the baby with a concerned expression.

Advancing Postpartum Hemorrhage Care (APPHC)



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Photography by Neil Brandvold for USAID

USAID's Advancing Postpartum Hemorrhage Care Activity

GOAL: To advance global uptake of successes and learning on PPH care to contribute to the reduction maternal deaths related to postpartum hemorrhage globally.

OBJECTIVES:

1. Galvanize key stakeholder support and investment for advancing PPH prevention and treatment in low and middle-income countries (LMIC)
2. Improve global dialogue and resource sharing of evidence, tools and implementation strategies to decrease deaths from PPH
3. Generate and test solutions to address key implementation barriers for PPH prevention and treatment
4. Advance effective implementation of interventions, strategies and innovations which can strengthen existing care for PPH prevention and treatment

PPH Landscape Analysis Findings



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Plan for our discussion



We will review the key findings for the next 30 minutes and then have 45 minutes to discuss them and get your feedback



During the presentation, please use the **green stickies** at your table to write down **items you agree with**, the **red stickies** to write **items you disagree with**, and **purple stickies** to write any **questions** you may have

Objectives of the PPH Landscape Analysis

As part of APPHC, BCG was asked to conduct a comprehensive landscape analysis to:


- 1. Identify** major activities, interests and priorities of key stakeholders and donors on PPH prevention and treatment as well as maternal health more broadly
- 2. Examine** the scope, organization, and impact of various global health entities (movements, networks, etc.)

It is important
to note....

- The landscape analysis was initiated in an effort to contribute to emerging conversations on “what’s next” for the PPH and broader maternal health community, in light of several key groups winding down (USAID-funded PPH Community of Practice, The Maternal Health Task Force, etc)
- While the landscape analysis to date has gathered perspectives from global stakeholders, this meeting is our opportunity to hear from country leaders

Objective 1:
Identify
major
activities,
interests,
and priorities
of key global
stakeholders

- Global donors (BMGF, SIDA)
- International NGOs (incl. Jhpiego, MGH, CHAI, Concept Foundation, PATH)
- Associations (FIGO, ACOG)
- Academia (Mass Gen Hospital/Harvard, UCSF, University of Liverpool)
- Multi-lateral organizations (GFF, WHO, UNFPA)



Key findings from interviews (1 of 2)

1

Critical to **have country leaders at the center of all discussions**, as current fora often neglect to include in-country voices. Country stakeholders must communicate their issues & needs to the global community and mobilize support in their own countries

2


Many organizations are working on addressing PPH but **lack of coordination and leadership are critical gaps that exist today**, which leads to fragmented funding & prevents scale up of interventions

3

Community **needs a unified/shared agenda that will provide a common vision** across funders, researchers, implementers, and country stakeholders

4

There is **limited global leadership and global champions to drive PPH efforts** - both on the technical-side (e.g., providing thought leadership) as well as the organization-side (e.g., galvanizing support, setting goals, etc.)



Key findings
from interviews
(2 of 2)

5

Health systems strengthening must be embedded within all PPH efforts - no longer possible to look solely at clinical interventions; crucial to address broader health systems issues for sustainability

6

Based on the greater arsenal of evidence-based interventions to address PPH, consensus is to **shift focus to implementation science & scale up (vs. new tool development)** in order to drive more value

7

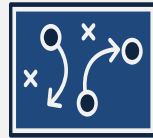
Tackling **market access and commodity issues** remains a challenge and impediment for implementation at scale

Objective 2: Examine the scope, organization, and impact of various global health entities



The Objective/Role

What are the specific problems this entity seeks to address?
How does this entity do so? What unique role does it play?



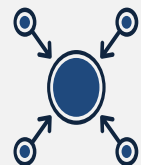
Operating model and type of activities

What are the core functions/activities that this entity performs? Evidence sharing vs. coordination vs. implementation?



Funding / financing

How is this entity funded, if at all? Via single donor or multiple donors?



Structure / governance / institutionalization

How is this entity organized? Is there a designated team vs. reps from other orgs? Is there a secretariat? Where is this hosted?



Analyses of existing global health organizations suggests several key principles for entities

Body should have clear and credible champion as leader, along with strong financial commitment
Important for well-respected leader & funding to drive collaboration across community

Entity should have defined mandate from global community and buy-in from key stakeholders
Specific goal and value proposition should solve identified global gap

Organizational structure & processes should facilitate rapid decision-making
Critical to have clear processes and defined roles for decision-making for efficiency & effectiveness

Objectives, structure, and operating model can evolve over time while maintaining key mission
Entity should change as landscape matures & challenges (funding, epidemiological) change

Entity should have participants of different perspectives -
Need to include perspectives of country stakeholders to drive country-led approaches and buy-in

Examples of Entities Reviewed

Entity	Objectives
The Partnership for Maternal, Newborn and Child Health	Provides a platform for organizations to align objectives, strategies and resources, and agree on interventions to improve maternal, newborn, child and adolescent health
Maternal Health Task Force	Learning network that strives to create a well-informed and collaborative community of individuals focused on ending preventable maternal mortality
Healthy Newborn Network	Online community of maternal health and newborn health professionals dedicated to addressing critical knowledge gaps in newborn health
MCSP PPH Community of Practice	Convenes maternal health stakeholders to share PPH evidence, new initiative, and research
Quality of Care Network (formerly Quality, Equity, Dignity Network)	Provides platform for countries to make quality of care an integral part of health care delivery; it facilitates intercountry learning, knowledge sharing, and generation of local evidence and best practices.
Every Women Every Child	Aims to intensify national and international action (financing, TA, implementation) by governments, UN, multilaterals, private sector and civil society. Provides resources for knowledge and advocacy.
International Federation of Gynecology and Obstetrics (FIGO)	Convenes global obstetrical and gynecological associations to provide guidance and evidence on key maternal health issues.
Maternal Health Supplies Caucus	Provides forum for MH & FP communities to convene, forge common language for MH supply-related challenges, and address commodity bottlenecks

Tension exists between inclusivity & focus: Desire to be broad in scope balanced with need to be very specific on goals & value proposition

Suggestion to broaden scope: maternal health / maternal & newborn health communities - lack of unified community is potential root cause of many issues: fragmented research agenda, misaligned priorities, backlog of innovation, etc.

- “ *Maternal and newborn constituency is so large and diverse (and currently dysfunctional), but we need a platform to come together - investments have been so fractured from these silos*
- “ *There is currently no venue / common rhythm for MNH community to align on priorities, get to a shared research agenda, and collaborate*
- “ *We should combine the maternal and newborn communities - most deaths in each area are occurring at the same time (birth) with the same provider (midwives)*
- “ *Current messaging is far too siloed - need integration*
- “ *We need to break down the siloes and get everyone together - align priorities, divide & conquer*

Global task force should have very specific goal / value proposition with a more narrow focus in order to move forward efficiently and effectively, and avoid confusion

- “ *Task force must be a task force - have defined goal & realize that over 3-5 years*
- “ *Without a clear goal, it will be challenging to galvanize support and make real progress*
- “ *Must have a very clear objective and mandate - trying to do too many things (like combining the MNH community) could be too broad and lead to lack of focus. Can use PPH as a starting point*

Initial Reactions

- Is anything in these findings surprising?
- Which of these findings do you agree with? Which do you disagree with?
- Based on your own experience, what is missing from these findings?

PPH in Your Country

DRC
Mali
Madagascar
Rwanda
Malawi
Uganda
India
Nepal
Mozambique
Kenya

We will use today's lunch for small group discussions

Please join tables based on the type of organization you are representing

- Associations
- Ministries of Health
- Clinicians
- Academics

Global observers are welcome to join any group, but should strive for balance across all tables



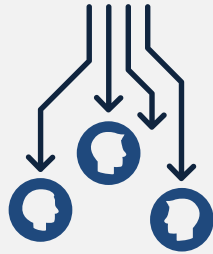
Lunch
12:30-1:30

4 presenters will rotate to 4 different groups to share information and facilitate a discussion on the following topics:

- ❑ PPH Suite of Medicines and WHO Recommendations - Mariana Widmer, WHO
- ❑ PPH Innovations - Zahida Qureshi, University of Nairobi, Kenya
- ❑ Quality Improvement, Safety Bundles, & Improved Performance - Dilys Walker, UCSF
- ❑ Cesarean Section and Safe Surgery - John Varallo, Jhpiego

Round Table Discussions

Global Stakeholders & LMIC Leaders



We will be breaking into **2 groups** to foster an intimate, open conversation:

1. Country stakeholders
2. Global stakeholders



Country stakeholder will remain here;
Global stakeholders will move to the breakout room

- Each group will have a **facilitator assigned to them** to help steer the conversation



Each group will have **45 minutes for discussion** –please assign a rapporteur

- After 45 minutes, we will reconvene and **each group will present a brief summary** of their discussion in plenary

Plenary Discussion

Are there any commonalities across the two groups?

What are you surprised to hear?

What resonates with you?

Reflections of Day 1

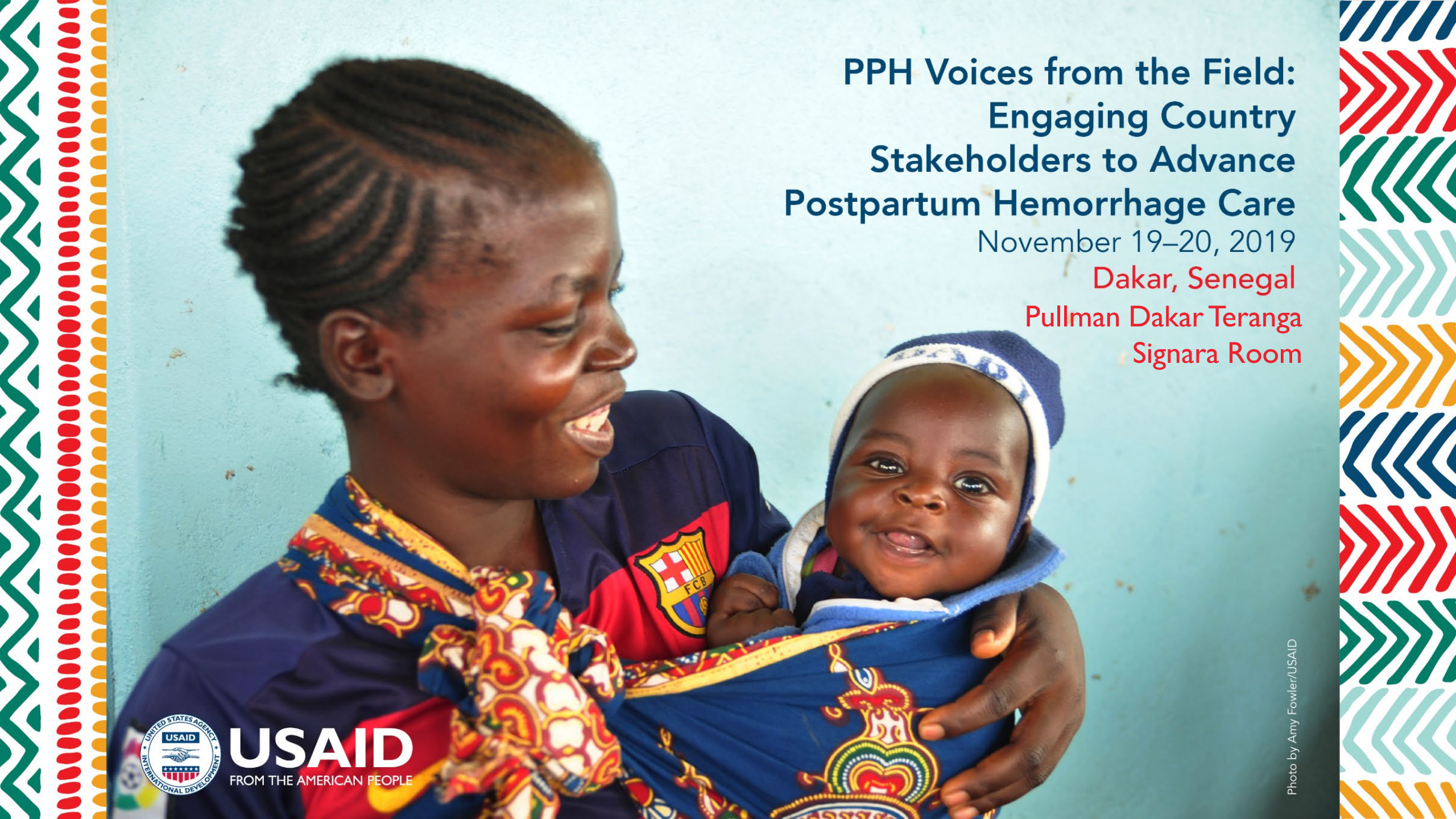
On sticky-notes please write to the
following:

“I liked.....”

“I wish.....”

“I learned...”

Day 2



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Recall: We covered a lot of ground on Day 1

Agenda item

Opening Remarks and Introductions

Presentation

Overview of PPH Landscape Analysis & Key Findings

Discussion

Participant Reactions to Landscape Analysis Findings

Break

Discussion

PPH In Your Country

Lunch

Roundtable discussions

PPH Technical Global Topics

Break

Breakout discussions

Global Stakeholders + LMIC Leaders

Plenary discussion

Global Stakeholders + LMIC Leaders

Reflections on Key Learnings from Day 1



What you said you liked

Listening to country voices

- Participation of country voices
- Point of view from LMIC representatives
- Experience shared by number of countries
- Honesty from country participants
- Hearing from country practitioners
- Dialogue with in-country participants
- Hearing from countries about PPH in their settings
- Country input

Roundtable discussions

- Small group roundtables
- Roundtable sessions
- World café on PPH topics
- Round table discussions in small groups
- Small group activities with facilitator rotating

Candor

- Being open and honest
- Better understanding of challenges
- Honest discussion on what to do and what to stop

Partnership model

- Discussion on country + donor commitments
- Global partners ready to adapt to local requirements

Agenda and facilitation

- Way meeting is structured with rich discussions
- Excellent utilization of time
- Good timekeeping

Other

- New products for prevention of PPH



What you said you wished to change

Coffee breaks were longer to allow more discussion with partners

Dig more on concrete actions, but realize this is day 2

I wish the path forward was more clear

Visual documentation of different manners of PPH techniques

Wished to see cost of different PPH products

Wish round tables would have allowed PowerPoint presentations

Wish for more such dialogue at country level

I wish I was part of this great group even before today to learn more

Integrated approach, particularly to maternal and newborn health

Community approach and interventions

The tone of this meeting should be positive and effective (collaboration)

I wish we had a global celebrity champion



What you said you learned

PPH interventions

- 2018 recommendations on PPH prevention and management
- New innovations in management of PPH
- UBT device from South Africa
- Different methods of preventing and managing PPH (eg. HSC)
- Learned more about bundles and surgery

Country perspectives

- Needs of each country regarding PPH situation
- From the country perspectives, what they are doing
- Similar challenges across countries (eg. transport, blood, HR)
- Money not prioritized as key need from global stakeholders

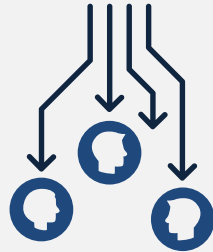
Information Dissemination

- WHO EML did not reach all country practitioners
- Countries do not have all info on new guidelines/tools

Other

- Teamwork on PPH approach
- Variety of models for consultative meetings
- There's lots we can do!

PPH Challenges: Directions for breakout exercise



We will be having 4 breakout groups of ~7 attendees each to hear from country leaders on what your biggest challenges are to improve PPH care



Each group will go to a corner of this room, the separate breakout room, or outside

- Each group will have a facilitator assigned to help steer the conversation



Each group will have 1 hour, 15 minutes to discuss

We ask that you use this time in the following way:

- Brainstorm challenges - 10 mins
- Prioritize ~5 most critical challenges - 5 mins
- Provide detail on each of those challenges - 1 hour

We will be reviewing your challenges and identifying common themes during the break



Questions for
each group
to answer

What are the biggest challenges in addressing PPH in your country?

- Which are PPH-specific issues?
- Which are broader health system issues?

Common challenges identified:

1. HRH
2. Blood
3. Commodities
4. Community awareness

Each table will be assigned a common challenge - please join the group of your choice

For brainstorm:

What opportunities exist to address this challenge?

Please brainstorm for 45 mins and assign a rapporteur - after 45 mins, each group will present a brief summary of their discussion in plenary

Recap: Breakout groups outlined many potential opportunities to address most critical challenges

Non-exhaustive

HRH

- Ob/Gyns
 - PPPs
 - Commitments
 - Incentives
 - Dual practice
- Midwives
 - Task shifting *upward*
 - Upskilling lower levels
 - Incentives for retention

Blood

- Contract blood svcs to pvt sector
- Use community health insurance
- Educate on birth preparedness and identify donors
- Use drones for blood transport
- Increase accountability
- Decentralize to regional level

Commodities

- Ensure quality procurement
- Conduct market surveillance
- Advocate use of EPI refrigerators
- Improve cold chain
- Provide training on importance of quality

Awareness

- Use PPH survivors as champions
- Gather KOLs and religious leaders
- Utilize all channels (media, digital)
- Increase female empowerment
- Address OOP cost challenges
- Incentivize attended birth
- Create more social accountability

For plenary discussion: Working together

With these opportunities in mind,

- What can you do in your own country?
- What can you do with other countries?
- What can we do together?

- ❖ Do you have any takeaways, learnings or reflections based on the last 2 days of meetings?

Reflecting on the last 2 days...