



# MSD for Mothers in Latin America & The Caribbean

Responding to Local Maternal Health Needs in Communities Around the World

**It all starts with a mother—she’s the beginning of a much bigger story.** A healthy pregnancy and safe childbirth lead to a lifetime of benefits, both for her own health and prosperity as well as that of her children, family, community and nation—for generations to come. **We call this the “Mom Effect.”** Working with grantees and collaborators across sectors, we’re making the Mom Effect a reality for communities across the globe.



#### Regional Sites:

Argentina; Brazil; Colombia; Costa Rica; Dominican Republic; Ecuador; Haiti; Honduras; Jamaica; Mexico; Peru; Puerto Rico; Venezuela

## About MSD for Mothers

MSD for Mothers is MSD’s global initiative to help create a world where no woman has to die while giving life. Applying our Company’s business and scientific expertise, we are working to improve the health and well-being of women during pregnancy, childbirth and the months after. Our grantees and collaborators have reached over 30 million women in more than 70 countries around the world to support healthier pregnancies and safer childbirth, contributing to the global effort to help end maternal mortality and morbidity.

## Estimated Maternal Mortality in the Latin America & the Caribbean Region

- **88 maternal deaths** per 100,000 live births<sup>i</sup>
- In 2020, around **8,400 women died** due to complications related to pregnancy or childbirth<sup>ii</sup>
- **15% increase** in maternal mortality since 2000<sup>iii</sup>
- **Challenges<sup>iv</sup>**: Lack of access to care due to poverty, disparities among Indigenous and Afro-descent populations, variations in quality of care



## Programs and Collaborators in Latin America & The Caribbean

In 2012, we launched MSD for Mothers Global Grants — a corporate grant program that enables MSD offices to support organizations that are improving maternal health around the world beyond our MSD for Mothers focus countries India, Kenya, Nigeria and the United States. The MSD for Mothers Global Grants program is designed to be responsive to local women's maternal health needs and extends our reach and impact to many more countries across the globe. Since we launched, the program has contributed over \$46 million, supporting over 85 projects across more than 45 global locations.

A selection of grants we have made in Latin America and the Caribbean includes:

**Argentina, Colombia, Mexico** | The Pan American Development Foundation (PADF) conducted a multi-country analysis to examine challenges related to collecting data on maternal mortality and developed a policy handbook to share best practices and lessons learned in overcoming these challenges.

**Argentina** | UNICEF Argentina is aiming to improve the quality of maternal health care that women and adolescents from Indigenous communities receive using an intercultural approach to support health systems strengthening efforts designed to meet the needs of Indigenous communities. In three provinces (Misiones, Chaco and Salta), UNICEF is promoting health care practices that consider Indigenous traditions. Guided by community input, the organization is building the competencies of health care providers who serve the Indigenous community by providing both virtual and in-person training sessions on culturally sensitive care.



**Brazil** | Sociedade Beneficente Israelita Brasileira Albert Einstein is working to improve the quality of maternity care across Brazil, with the goal of reducing the maternal mortality ratio (MMR) by 30% in participating facilities. A pilot project in a region with an MMR three times the national average is testing a new training curriculum to address the challenge of health care provider training in the context of high turnover among health care providers.

**Brazil** | UNICEF worked with health and policy authorities at national, state and local levels to mobilize and train primary health care workers to disseminate information on the rights of pregnant women to access quality prenatal, childbirth and postpartum services.

**Colombia** | Sinergias Alianzas Estrategicas para la Salud y el Desarrollo Social strengthened local capacity - based on a routine analysis of hospital data - to provide high-quality antenatal, labor, postpartum and newborn care in 40 of the most vulnerable municipalities of Bolívar, Cauca and Córdoba.

**Colombia** | The International Organization for Migration improved access to maternal, perinatal, and sexual and reproductive health care for women who are migrants and living in poor conditions in Valledupar, a city with one of the highest proportions of Venezuelan migrants.

**Costa Rica** | The Paniamor Foundation strengthened the institutional capacity of a large national women's hospital and its service network to respond to the high rate of child and adolescent pregnancy from a human rights perspective to reduce maternal and infant mortality.

**Dominican Republic** | UNICEF helped to make quality, respectful public health services available and promoted maternal health care and nutrition among women who are migrants and living in extreme poverty and/or in hard-to-reach communities.

**Ecuador** | UNICEF worked with community members to strengthen comprehensive health care for pregnant women and prevent teenage pregnancy by educating communities on healthy pregnancy, nutrition, safe childbirth, family planning, sexual and reproductive rights and prevention of gender violence.

**Haiti** | Centre de Coopération Internationale en Santé et Développement tested a performance-based funding model and lowered fees for services to improve pregnant women's access to quality antenatal and delivery care. The program increased the number of women receiving care in health facilities in the communes of Anse Rouge, St-Michel and Ennery.

**Haiti** | Health Equity International trained clinicians to expand access to high-quality maternity care, including surgery, labor and delivery, pre- and postpartum care and family planning in Southern Haiti.

**Honduras, Peru** | The Pan American Health Organization (PAHO) will improve the capacity of the health system by training nearly 500 health providers to diagnose and treat obstetric emergencies and expand access to high-quality, equitable maternal health care. At the community level, PAHO will promote awareness of safe prenatal and childbirth practices, as well as involve communities in reducing unintended pregnancies.

**Jamaica** | INMED Partnerships for Children tackled maternal mortality and morbidity among adolescents in rural Jamaica through peer-to-peer outreach and education campaigns that leverage telecommunications technologies to raise awareness of critical maternal and reproductive health issues and encourage young women to seek care.

**Mexico** | Sociedad Mexicana de Salud Pública increased knowledge about reproductive and maternal health among Indigenous adolescents and women through integrated community interventions, such as training health promoters and providing workshops in five different Indigenous languages.

**Mexico** | Pro Mujer is addressing gender-based violence that prevents women and girls from accessing family planning education and services as well as expanding access to respectful obstetric and gynecological care.

**Peru** | Pathfinder International built the capacity of service providers to manage obstetric and neonatal emergencies by educating community health workers on obstetric and neonatal care, strengthening health facilities, and helping provide appropriate financing for procuring health commodities and services.

**Puerto Rico** | Puerto Rico Obstetrics & Gynecology (PROGyn) provided physician training and patient education on the prevention and early identification of hypertension and preeclampsia.

**Venezuela** | Universidad Central de Venezuela created an e-health platform (SOS Telemedicine for Venezuela) and conducted distance learning trainings to build the capacity of health workers to provide high-quality maternal health care.



## Project Spotlight

**Brazil** | The National Supplementary Health Agency, Albert Einstein Hospital and the Institute for Healthcare Improvement's "Projeto Parto Adequado" identified innovative and viable models of high-quality care during labor and delivery, incentivizing vaginal delivery for uncomplicated births and reducing medically unnecessary Cesarean delivery (C-section) rates in maternity hospitals. The program reached more than 1 million women in over 100 different cities across Brazil. Additionally, around 1,200 health workers were trained and 113 maternity facilities strengthened their quality of care provision through this project. In over 18 months, the rate of vaginal birth increased from 21.6% to 38% in 26 hospitals.<sup>v</sup>

- i. PAHO. (2023). [PAHO and partners launch campaign to reduce maternal mortality in Latin America and the Caribbean.](#)
- ii. PAHO. (2023). [PAHO and partners launch campaign to reduce maternal mortality in Latin America and the Caribbean.](#)
- iii. WHO, UNICEF, World Bank Group, and UNDESA/Population Division. (2023). [Trends in maternal mortality 2000 to 2020.](#)
- iv. UNFPA. (2017). [Overview of the Situation of Maternal Morbidity and Mortality: Latin America and the Caribbean.](#)
- v. Internal semi-annual progress report: Sociedade Beneficente Israelita Brasileira Albert Einstein (September 2018 - September 2020)