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## NEWSLETTER | SEVENTH EDITION

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### Welcome Note

Dear <<First Name>>,

It is a pleasure to write to you again in this new edition of our program newsletter. In this seventh edition, we showcase a glimpse of the successful launch ceremony to mark the first use of the public access price heat-stable Carbetocin (HSC) in Nigeria and sub-Saharan Africa, chaired by the First Lady of Niger State. Indeed, no woman has to die while giving life, and we are confident that our program's efforts in collaboration with the government and other partners will help reduce postpartum hemorrhage in Nigeria.



Dr. Uchenna Igbokwe (MBChB, MSc)  
Program Director, Smiles for Mothers - Nigeria

We also share updates on our training activities for doctors, nurses, midwives, pharmacists, and pharmacy technicians across our three program states. We are incredibly excited about the positive impact of the training on the participants, which is reflected in their improvements during the post-training assessments. We also got feedback on new knowledge gained on themes like pharmacovigilance and quantification.

We are progressing very well with our collaborations with state stakeholders on the use of the human-centered design approach to solve some of the challenges that lead to postpartum haemorrhage in the states. We discussed updates from the recently concluded co-research workshops in Kano and Niger states focused on demand generation for ANC services and facility-based delivery in Niger state and optimization and strengthening of the supply chain for uterotonics in Kano state.

I hope you find this edition of our newsletter informative, and we look forward to your feedback on the topics discussed. We would like to hear from you; please reach us via email at [info@smilesformothers.com](mailto:info@smilesformothers.com).

Cheers!

Dr. Uchenna Igbokwe

Program Director, Smiles for Mothers - Nigeria

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## Program Updates

### **Women in Nigeria are the first in Sub-Saharan Africa to receive the new public access price heat-stable Carbetocin (HSC) Ferring for PPH Prevention**

On 7th April 2022, the Smiles for Mothers program in collaboration with the Federal Ministry of Health, World Health Organization, MSD for Mothers, IDA Foundation, the ministries of health and health agencies in Kano, Niger, and Lagos States, and Ferring Pharmaceuticals to mark the first use of heat-stable Carbetocin (HSC) in Nigeria and sub-Saharan Africa. 273 participants attended in person and online.

The event was chaired by the First Lady of Niger State, Her Excellency, Dr. Aminu Abubakar Bello. In attendance was the Founder-President of Wellbeing Foundation, Her Excellency, Mrs. Toyin Saraki, and Dr. Kayode Afolabi, the Director of Reproductive Division, FMOH, representing the Honorable Minister of Health. Other participants include representatives from the National Agency for Food and Drugs Administration Control (NAFDAC), state governments of Kano, Lagos, and Niger, professional bodies, implementing partner organizations (World Health Organization (WHO), MSD for Mothers, USAID-IHP, JHPIEGO, Ferring Pharmaceuticals, IDA Foundation), nurses, and midwives.



Susan Bello, Interim MSD Country Director in Nigeria, gave the introductory remarks at

the event and reiterated the commitment of MSD for Mothers to stopping maternal deaths, by strengthening the country’s ability to respond to postpartum hemorrhage, adding that heat-stable uterotonics is a good alternative to stop women from dying while giving life.

The event’s goal was to spotlight efforts to improve maternal health outcomes in Nigeria by ensuring the availability of uterotonics and improving healthcare provider knowledge and practices. Dr. Uche Igbokwe, the Director of the Smiles for Mothers Program, in his speech during the event, said, “the human, economic, and cultural implications of a woman dying while giving birth are too significant to bear” and he solicited the support of the different groups of stakeholders present to create a Nigeria where no woman has to die while giving life.



Other speakers at the event include Dr. Bosede Ezekwe (Technical Officer, Reproductive Health, World Health Organization), Susan Bello (Country Director (Interim), MSD for Mothers), Bhavin Vaid (Head of Corporate Communications and Public Affairs, Ferring Pharmaceuticals), and Pharmacist Nwadinobi (Country Representative, IDA Foundation). The event was moderated by Mrs. Moji Makanjuola, CEO, the International Society of Media in Public Health.

## CALLS TO ACTION

<div style="background-color: white; border-radius: 50%; width: 30px; height: 30px; margin: 0 auto; display: flex; align-items: center; justify-content: center;">01</div> <p style="margin: 0; color: white;">Federal Ministry of Health and State Governments</p>	<ul style="list-style-type: none"> <li>Continue advocacy to government and partners to prioritize resources for maternal health interventions, including funding to ensure availability of quality uterotonics, including HSC</li> </ul>
<div style="background-color: white; border-radius: 50%; width: 30px; height: 30px; margin: 0 auto; display: flex; align-items: center; justify-content: center;">02</div> <p style="margin: 0; color: white;">Wives of governors and other safe birth champions</p>	<ul style="list-style-type: none"> <li>Continue your efforts to lead the PPH reduction initiatives and ensure access to quality uterotonics including HSC</li> <li>Share lessons learnt with other states to drive scale-up of PPH reduction initiatives</li> </ul>
<div style="background-color: white; border-radius: 50%; width: 30px; height: 30px; margin: 0 auto; display: flex; align-items: center; justify-content: center;">03</div> <p style="margin: 0; color: white;">Donors and Development Partners</p>	<ul style="list-style-type: none"> <li>Support adoption of WHO's guidelines on uterotonics for PPH prevention and HSC introduction in the geographies where you work</li> <li>As we continue on this journey, support SfM with thought partnership and synergies</li> </ul>

### Refresher EmONC training increased the confidence levels of doctors and nurses to use heat-stable Carbetocin for active management of the third stage of labor (AMTSL) in program states

The Smiles for Mothers program trained 6 master trainers, 38 state trainers, and 707 doctors and nurses/midwives in emergency obstetrics from primary, secondary, and tertiary facilities across the three program states, Niger, Kano, and Lagos, from March to May 2022. The training was conducted using a pioneer 8-module Emergency Obstetric & Newborn Care (EmONC) training curriculum developed by the Smiles for Mothers program and endorsed by the Federal Ministry of Health (FMOH). This followed the FMOH-led review and update of the Life Savings Skills (LSS) manuals, essential training materials for healthcare workers on the leading causes of maternal mortality, and the delivery of basic and comprehensive emergency obstetric care. The training curriculum, in line with updated national guiding documents on Life-Saving Skills (LSS), Maternal and Perinatal Death Surveillance and Response (MPDSR), Pharmacovigilance and Quality of Care (QoC), was approved by the FMOH and was used to train health care workers across the three program states, Niger, Kano and Lagos states from. This training is part of Smiles for Mothers' efforts to enhance the clinical competencies of frontline health care workers for the management of postpartum hemorrhage (PPH) with appropriate use of uterotonics, including heat-stable Carbetocin (HSC), to institutionalize the use of data to drive improvements in the prevention and management of PPH, and strengthen facility-level quality improvement mechanisms.



Demonstration session on the use of the Non-pneumatic antishock garment



Demonstration session on blood loss estimation at the Master Trainer's workshop



Participants working on a case study in the training workbook in Niger

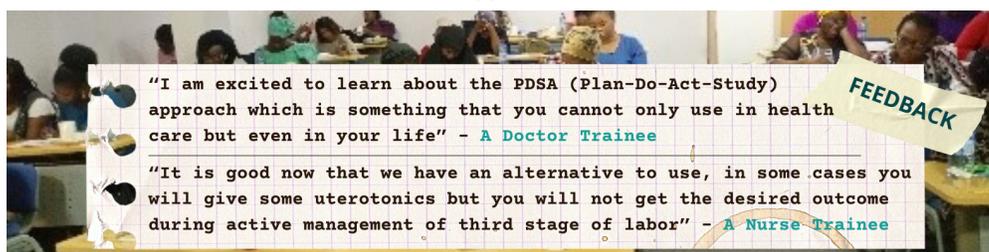
The sessions started with a 2-day training of eight master trainers across the three program states and representatives of the FMOH which included the Director and Head, Reproductive Health Division. The two master trainers from each state reviewed the clinical training curriculum and facilitated a 2-day training of trainers, where they reviewed the training documents and passed along insights and key learnings to the trainers at the state level. Afterward, the state trainers cascaded the training to 707 doctors and nurses/midwives across the three states through a mix of didactic sessions, video and live demonstrations, and group activities. The training provided an avenue for the program to directly engage the healthcare workers who are at the forefront of patient care and encounter PPH cases in the course of their work. The health workers training was a 3-day training with 2 and half days of in-class sessions and a half-day visit to health facilities to observe deliveries and carry out active management of the third stage of labor (AMTSL) using heat-stable Carbetocin.

The participants at the training reported a significant increase in their confidence in their capacity for service delivery, particularly for AMTSL, use of the Partograph, and administration of HSC for PPH prevention. For instance, 95% of doctors and 88% of the nurses and midwives in Kano expressed that they are “very confident” to use HSC in the post-training assessment, which is 43% and 41% higher than the pre-training assessment results.



Hajia Zainab, a matron who heads the maternity unit at Murtala Muhammad Specialist Hospital, Kano participated in the training and got a chance to administer heat-stable Carbetocin to a patient within one minute after delivery. Zainab and other clinicians in her training cohort who observed the administration process were impressed by how fast and effectively heat-stable carbetocin stimulated uterine contractions and prevented blood loss and further complications for the mother. Referring to heat-stable carbetocin during the practical session in the labour ward, she exclaimed, *“this is a magic drug, and I hope it is available for use to all patients in our facility.”*

The participants indicated a lot of new knowledge they obtained at the training and were excited to go and implement some changes with this new information in their facilities. Some of the participants also requested follow-on training sessions and dissemination of training materials to support their work.



## Training of pharmacists and logisticians addressed supply chain gaps across health facilities and state medical stores across the program states

The Smiles for Mothers program trained 27 state supply chain officers and 136 health facility pharmacists across 87 health facilities across all three program states between March 7 and April 5, 2022 This was in collaboration with the National Product Supply Chain Management Program (NPSCMP), National Agency for Food and Drugs Administration and Control (NAFDAC) and state Logistics Management and Coordination Units (LMCU).

The training focused on addressing gaps that were identified through the program’s baseline assessments, on themes like quantification, warehousing, commodity storage, distribution, data management, and pharmacovigilance, across health facilities and state medical stores. The challenges included non-standardized quantification of health facilities’ essential medicines needs, poor maintenance of storage facilities and equipment especially for cold chain, inability to use data tools for data and financial

management of commodities in the DRF schemes, and lack of knowledge of pharmacovigilance processes and reporting structures by health workers.

The training offered a rare forum for participants to interact in a collegiate environment, which is a rarity for pharmacists, especially in Kano and Niger and this contributed to the positive reaction by the participants to the training. There was also significant knowledge gained across the states in each of the training modules. For instance, the average knowledge score of participants in Kano on the quantification tests before the training was 45% but this improved significantly in the test after the training with an average score increase of 58%. The improvement in the knowledge of quantification, which is the process of estimating the quantities and costs of the products required for a specific health program or service, shows that participants will be able to better estimate their commodity needs and reduce stockouts in the facilities.



Group of participants after a training session in Niger state



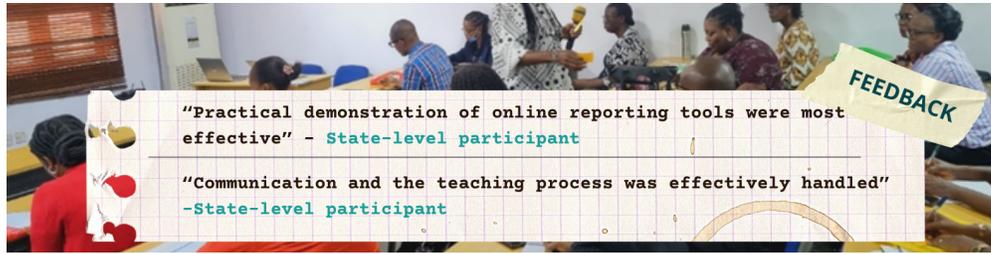
Supply chain officers doing a group work on quantification during the training in Lagos



Participants engaging at the health facility training in Kano state

After each training, the trainees and facilitators identified key recommendations to strengthen the supply chain across all levels of implementation, at the national, state, and health facility levels. Some of the recommendations include updating existing stock inventory control parameters for minimum reorder and maximum stock levels for use across all stores/pharmacies, including MNCH commodities into the NHLMIS for Kano, Lagos, and Niger, adopting alternative power sources at the DMCSA stores to prevent fire, the major risk associated with an electrical power surge, and increasing advocacy to health facilities for pharmacovigilance reporting.

The participants indicated a lot of new knowledge they obtained at the training and were excited to go and implement some changes with this new information in their facilities. Some of the participants also requested regular follow-on training sessions and dissemination of training materials to support healthcare workers across the states. In addition to the training, the program will be deploying supply chain field officers to closely collaborate with trainees and provide on-the-job coaching to reinforce positive behavioral changes and improve performance. Training participants who did not demonstrate marked improvements in the pre and post-test will be targeted for on-the-job coaching and supervision to build capacity over the duration of the project. The in-facility support provided by the supply chain officers will be tracked through a set of indicators to determine the impact of the intervention.



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## Human-centered design co-research workshops conducted in Niger and Kano states

The program held the HCD co-research workshops in Niger and Kano states from 28th March to 2nd April 2022. The co-research phase centres on identifying the knowledge gap, defining the appropriate research methodology, translating insights, and having a clear understanding of the challenges contributing to poor management of postpartum haemorrhage (PPH) in the States. The core objective of the workshop was to reinforce the knowledge of co-research methods and tools with the champions and guide the champions on the application of learnings for the third innovation of the program. The focus for Niger state is demand generation for ANC services and facility-based delivery, while Kano and Lagos will focus on optimization and strengthening of the supply chain for uterotonics.

In attendance were 27 champions, with representation from National and State Governments including the Director of Family Health, Director of Public Health, RH/MNCH Coordinators, Quality Improvement officers, RH/MNCH focal persons, LGA managers, and frontline workers.



*Champions drafting talk-points for the HCD activity in Niger State*

At the end of the 2-day workshop, the state champions curated:

- Challenge descriptions in accordance with the thematic focus
- Participants and experts to be engaged during the field activities for co-research
- Gaps are to be discovered using a mix of co-research methods across health facilities and communities.

Lastly, Champions used persona models to identify key people affected by the demand for ANC and supply chain challenges and also used the day-in-the-life tool to craft their realities including their fears, motivations, frustrations, and influences.

After the workshops, champions are to lead in the preparation and finalization of contents, tools, and guides for conducting data collection activities within the state to enable them to identify the challenges and gaps with the different objectives of the states.

*"Thank you so much for this opportunity because I personally see HCD as the only strategy towards improving health care indices"*

**Ibrahim Abubakar Zubairu, Kano state**

## We are Curve Awards finalists! 🎉🎉🎉

Smiles for Mothers was one of four finalists at the recently concluded Curve Awards where we presented a case study focused on "An innovative approach to leverage responsive feedback mechanism in preventing postpartum haemorrhage in Nigeria". Read more about the [Curve Awards](#).



(L-R) Raihanah Ibrahim, Bukola Shaba, Emmanuella Ezike and Hadiza Salele representing the Smiles for Mothers team at the Curve networking event

*This newsletter is a collaborative effort of Emmanuella Ezike, Thelma Oriade, Damilola Oyedele, Tunde Amode, Hadiza Salele, Bukola Shaba and Adebisi Adeyoyin, representing the views of the Smiles for Mothers consortium*

Subscribe to our newsletter [here](#). For more information on the Smiles for Mothers program, please reach us at [info@smilesformothers.com](mailto:info@smilesformothers.com)

This program is supported by funding from MSD, through MSD for Mothers, the company’s global initiative to help create a world where no woman has to die while giving life. MSD for Mothers is an initiative of Merck & Co., Inc., Kenilworth, NJ, U.S.A.

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