



December 2019 Newsletter

To HDI's friends and supporters

Niger continues preventing women from bleeding to death when giving birth, nationwide in its population of more than 23 million. Rapidly preventing obstetric fistula is being tried using a new approach, designed for very large populations. We have a new grant for “NTDs” in Togo.

The *African Journal of Reproductive Health* published our manuscript describing the method and the scientific background for our initiative to prevent bleeding deaths: June 2019; 23 (2):18, **An Integrating Model for Rapid Reduction of Maternal Mortality Due to Primary Postpartum Haemorrhage - Novel Use of the Catalyst Approach to Public Health**. Let me know if you'd like the article. I will be happy to send it.

Things take longer than I expect! We are still developing an article describing Niger's results in detail.

HDI's/Niger's approach works, judged by information on over 879,000 births (Jan 2015 – Oct 2019). We continue sustaining the enormously ambitious goal of halving the proportion of women who die of postpartum hemorrhage (PPH). An independent evaluation by a group in New York called Gynuity, financed by the Bill and Melinda Gates Foundation, found that this already worked the 1st two years.

Niger's health facilities now send monthly reports directly to the Ministry of Health's computers by internet (!!!!). That increased the number of facilities sending reports, dramatically.

It should be no surprise that bleeding-deaths are halved when a hand-full of interventions are combined, when science tells us that even the simplest, cheapest of them reduces even the occurrence of excessive bleeding by more than 70%, even when used alone.

We greatly appreciate all of our partners and welcome Devon Creek Foundation as a recent, important new HDI contributor in support of protecting women's lives and dignity at childbirth!

At the same time, in 2020 Izumi Foundation's fistula-prevention-funding ends. After 10 years of very generous help, Izumi will now transition to other worthy causes. Thank you Izumi Foundation!

Do you know anyone whose philanthropic interest matches HDI's aim to protect women giving birth?

HDI's funding goes overwhelmingly toward projects. Little goes for administration (6.81% in the year ending June 30, 2018 audit), and nothing for fundraising. Now that our largest funder for preventing obstetric fistula and keeping women alive at childbirth is ending that superb help after ten years, we really need help finding new supporters! All contributions large and small are very greatly appreciated, as are introductions to foundations whose aims match ours!

Obstetric fistula still gone. New approach tested in a region the size of South Korea

Obstetric fistula no longer occurs in project villages where we started this work in Niger. Before, it was a big problem! One “insane” goal was to reduce obstructed labor deaths by 75% within two years. In the end, 135,000 women gave birth, and nobody died of blocked childbirth from June 2008 until the project in its initial form stopped in February 2018. Obstructed labor deaths had completely disappeared in four months, in spite of being one of two main causes of death in the year before the project started. This area had also been the main source of obstetric fistula patients that surgical

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teams from the US came four times a year to treat. It took a bit longer to get rid of fistula, but only one (1) fistula occurred from August 2009 through February 2018 among 128,175 births, compared to the roughly 130-250 new obstetric fistula one could expect according to WHO.

HDI has shown that obstetric fistula can be eliminated on a public health scale, even in one of the most resource-constrained countries using modest funds. Now, Izumi Foundation has provided a generous grant to try a very different approach requiring fewer resources, to see if we can still achieve similar results in a **really** large population (4 million) over **really** large areas.

Earlier this month we received initial, very preliminary hints about how things are going with the new approach. While we should have a clearer indication next summer, it looks like this new approach might also work. It is too early to tell, but the first signs look promising.

Togo - New USAID grant

HDI helped Togo become the first country in Africa to eliminate “elephantiasis” (lymphatic filariasis). Then HDI helped Togo distribute about 129 million tablets, 57 million treatments to Togo’s entire population outside of the capital (where these diseases are not a problem), using three donated medications in five combinations under a USAID grant from 2009 to August 31, 2018. When it became clear USAID would release a new call for proposals, we applied as part of a collaboration led by FHI360 (Family Health International) which has enormous contracts with the US government, and through which we have had our USAID contract in recent years. Our consortium won the grant for West Africa. So, we have a final 5-years of support for Togo!

We are happy we can continue helping Togo’s Ministry of Health to eliminate river blindness, and prevent “Neglected Tropical Diseases” that severely impact children’s schooling and intellectual development, thanks to funding from the American People.

Hearty thanks for your much needed support and encouragement !!!

Anders Seim, MD, MPH
Founder and Executive Director