

Merck for Mothers : Committed to Saving Lives

About every two minutes, a woman dies from complications related to pregnancy and childbirth. That's more than 800 women a day, the vast majority of them in developing countries.¹ The preventable death of a woman from complications of pregnancy and childbirth is a tragedy with devastating effects on families, communities, and nations.

Merck for Mothers is our 10-year, \$500 million initiative that applies our scientific and business expertise – as well as our financial resources and experience in taking on tough global healthcare challenges – to reduce maternal mortality worldwide.

To date, we have contributed to improved access to quality maternal healthcare and family planning services for an estimated 5.2 million women in 30 countries around the world.

Our Approach

We are providing transformational and sustainable solutions focused on improving the quality of maternal healthcare women receive at a health facility and increasing women's access to family planning. Our goal is to find cutting-edge solutions that will have a lasting impact on reducing maternal mortality, today and for years to come.

Improving Access to Affordable, Quality Care

Strengthening Local Private Healthcare

Local private providers such as independent doctors, midwives, and drug shop owners deliver a significant proportion of maternal health services to women in low- and middle-income countries. That is why in select countries we are exploring how to leverage the local private health sector to strengthen the overall health system's ability to offer affordable, quality maternal health services.

In **Uganda**, we are strengthening and expanding a network of private social franchise clinics and helping women overcome common barriers to care, such as cost, transportation, and limited supplies.

In **India**, we are working with leading health organizations to improve pregnant women's access to affordable, quality care through social franchising, accreditation, and stronger linkages between the public and private sectors.

We are supporting our work in both countries with targeted advocacy efforts focused on the often overlooked role of local private health providers in reducing maternal mortality.

Solving the Distance Problem

In **Zambia**, many women live in remote communities, making it difficult for them to reach a health facility to give birth. Working with partners on the ground, we are designing new models of maternity homes, residences where pregnant women can stay until they go into labor, bringing them closer to quality maternal health services. In addition, we are conducting a robust evaluation to 1) understand whether maternity homes can effectively help women overcome barriers to facility-based care, and 2)

¹ WHO, UNICEF, UNFPA, World Bank. "Trends in Maternal Mortality 1990-2013." (Geneva, 2014).

http://apps.who.int/iris/bitstream/10665/194254/1/9789241565141_eng.pdf?ua=1

test community-based, entrepreneurial models to help ensure that maternity homes and the services they provide are available for the long term.

Expanding Access to Family Planning

Family planning is recognized as one of the most cost-effective ways to lower maternal mortality rates – potentially averting a third of maternal deaths by reducing the overall number of pregnancies and helping women adequately space their pregnancies.

In **Senegal**, as part of our partnership with the Bill & Melinda Gates Foundation, we are supporting the scale-up of an innovative supply chain model to eliminate stock-outs of contraceptives at health facilities – a serious barrier to family planning. The results so far are impressive: in nearly two-thirds of the country, the proportion of health facilities experiencing family planning stock-outs decreased from more than 80% to less than 1%, and more than 3.2 million women have improved access to modern contraception nationwide.

Catalyzing Improvement in Maternal Health in the U.S.

While most countries have seen a sharp decline in maternal mortality, surprisingly, it is on the rise in the United States. In fact, the rate of women dying during pregnancy and childbirth in the U.S. has more than doubled in the past 25 years. That is why we are working in 16 states across the country covering a quarter of all deliveries to respond to five major challenges that contribute to maternal mortality in this country: 1) inconsistent management of obstetric emergencies; 2) lack of good data on why women are dying during pregnancy and childbirth; 3) rise in chronic conditions among pregnant women (e.g., obesity, diabetes, and hypertension); 4) inadequate attention to the postpartum period when many deaths occur; and 5) lack of awareness of maternal mortality and morbidity.

Joining the U.S. Government to Reduce Maternal Deaths

Merck for Mothers is a founding partner of *Saving Mothers, Giving Life*, a five-year public-private partnership led by the U.S. government to reduce maternal mortality in sub-Saharan Africa, beginning in Uganda and Zambia. Our programs in both countries contribute to partnership work to put in place lifesaving maternal and newborn health interventions. In its first year, *Saving Mothers, Giving Life* produced impressive results: maternal mortality ratios fell by 30% in target districts of Uganda and by 35% in target facilities in Zambia.

Enhancing Health Technologies

As a research-based healthcare company, we know that one of the most important and distinct contributions we can make to improve maternal health is innovation in lifesaving products. Merck scientists are deeply involved in identifying, developing, and advancing new or improved products to address unmet maternal health needs in the developing world.

Advancing Life-Saving Products

In 2014, *Merck for Mothers*, **Ferring Pharmaceuticals** and the **World Health Organization (WHO)** established a collaboration to develop a new, proprietary formulation of carbetocin, used to prevent excessive bleeding in women after childbirth (postpartum hemorrhage) that is designed to be heatstable, even in hot and tropical climates. The development of a medicine that can be stored at elevated temperatures has the potential to significantly improve management of bleeding following childbirth in

the many areas of the world where cold storage is difficult to achieve and maintain. The availability of a heat-stable carbetocin product could help reduce maternal deaths in these countries.

Merck for Mothers is also interested in developing an easier-to-administer dosing regimen for magnesium sulfate, the current gold standard for managing seizures in pregnant women suffering from preeclampsia/eclampsia.

Digital Innovations

We are exploring the potential of digital innovations to improve the quality of care for pregnant and postpartum women. **In India**, we are working with partners to test a mobile platform that enables women to learn about the care they deserve and rate the quality of care they receive.

Ultimately, this project aims to hold health providers accountable for the quality of services they provide and ensure that women become active participants in their care. **In the U.S. and U.K.**, we are creating an interactive mobile app to educate women about health-related matters and encourage them to obtain care if they suspect a problem following childbirth, rather than waiting for the usual six-week postpartum visit.

For more information on our efforts, visit www.merckformothers.com.

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