About Merck for Mothers

Merck for Mothers is Merck’s $500 million global initiative to help create a world where no woman has to die giving life. We have reached more than nine million women in 48 countries around the world, contributing to the global effort to save women’s lives, strengthen health systems and meet the United Nations’ Sustainable Development Goals.

In collaboration with governments, foundations, and non-governmental organizations, we are designing, deploying, and scaling solutions that:

- **Empower women** to make informed choices and get the quality care they need
- **Equip health providers** with the skills, tools and technologies to deliver high-quality care
- **Strengthen health systems** to sustain the delivery of high-quality services that benefit women and their communities

Our approach in Nigeria

Nigeria has the largest number of maternal deaths globally, accounting for nearly 20% of all maternal deaths. In 2015 alone, 58,000 Nigerian women died from complications related to pregnancy and childbirth, devastating families and communities and resulting in an estimated $1.5 billion in lost productivity.1, 2

Since 2015, Merck for Mothers has taken a comprehensive approach to tackle the large burden of maternal deaths in Nigeria by ensuring women have access to two of the most powerful ways to prevent these tragedies: quality maternity care and access to modern contraception. We work across both public and private sectors so that every woman in the country can receive quality maternity care wherever and whenever she seeks care. Yet, we cannot do this important work alone. Merck for Mothers believes that strong, multisector partnerships can help achieve the Government of Nigeria’s maternal health goals.

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July 2019
**Our Investments**

**Activating Community Advocacy for Maternal Death Reporting |** Too many maternal deaths are taking place outside of health facilities and remain unreported in Nigeria. We are supporting the “Giving Birth in Nigeria” advocacy project which empowers communities to report maternal deaths across six states using storytelling and social media. The project will enhance the public’s understanding of why women are dying, and step up accountability at the national, facility and community levels to track maternal deaths and take action to prevent them in the future.

**PARTNERS: AFRICARE, NIGERIA HEALTH WATCH, AND EPIAFRIC**

**Empowering Vulnerable Young Women |** Through our partnership in Borno State, an area of Nigeria affected by conflict, we are equipping nearly 250 vulnerable young women with the knowledge and skills to become trained health professionals in their communities, helping to overcome local health worker shortages.

**PARTNER: GIRL CHILD CONCERNS**

**Equipping Health Providers**

**Linking Public and Private Maternity Care for Seamless Quality Care |** Nigeria has a mixed health system, with approximately 60% of the population accessing private health care. Throughout Cross River State, we are expanding access to quality, comprehensive maternity care and strengthening linkages between more than 100 local public and private facilities. The goal is to ensure women receive seamless quality maternity care and family planning services whenever and wherever they seek care. Working closely with communities, providers, and state health officials, the project has contributed to a **28% reduction in maternal mortality** in two years. With public and private providers working in tandem, more than 90% of women in the state now have access to quality emergency obstetric care within two hours.

**PARTNERS: USAID, SAVING MOTHERS GIVING LIFE, PATHFINDER INTERNATIONAL**

**Integrating Post-Pregnancy Family Planning Services |** Although family planning is one of the most effective ways to reduce maternal mortality, only 10% of married women in Nigeria are using modern contraception, one of the lowest modern contraceptive prevalence rates in the world. Given low modern contraceptive use in Nigeria, we are integrating post-pregnancy family planning (PPFP) services along the continuum of maternity care – during antenatal, delivery, postnatal, and immunization visits – in private facilities in Lagos State. The project also aims to understand the distinctive barriers private providers face in delivering PPFP services and is generating and testing new ways to overcome these challenges using a woman-centered design approach.

**PARTNERS: BILL & MELINDA GATES FOUNDATION, JOHNS HOPKINS CENTER FOR COMMUNICATION PROGRAMS**

**Addressing Indirect Causes of Maternal Mortality and Morbidity |** Postpartum hemorrhage (PPH) and pre-eclampsia/eclampsia (PE/E) continue to be leading causes of maternal death, but indirect causes such as malaria, cardiovascular diseases, and obesity are on the rise. In Nigeria, risk factors for PE/E — diabetes, anemia, and hypertension — are increasing. We are partnering with a consortium that is striving to better identify and manage these risk factors throughout pregnancy, reducing the likelihood of poor maternal health outcomes.

**PARTNERS: JHPIEGO, MDOC, HEALTH STRATEGY AND DELIVERY FOUNDATION**

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STRENGTHENING HEALTH SYSTEMS

Broadening Access to Family Planning | Nigeria has one of the lowest modern contraceptive rates, in part due to limited access to a broad range of quality family planning methods. We are supporting the “IntegratE” project to expand access to a range of quality family planning services by implementing the Pharmaceutical Council of Nigeria’s tiered accreditation system for proprietary patent medicine vendors (PPMVs) and community pharmacies (CPs). Working with over 1,200 PPMVs/CPs, the project increases their capabilities to offer a broader range of contraceptive products and services and improve reporting, regulatory oversight, and referral practices.

PARTNERS: BILL & MELINDA GATES FOUNDATION, A COALITION OF PARTNERS LED BY THE SOCIETY FOR FAMILY HEALTH

Transforming Supply Chains | Given consistent stock-outs of maternal, newborn, and child health (MNCH) commodities at the last mile that result in poor health outcomes, we are exploring innovations to transform the MNCH supply chain in Kano State. The project aims to identify new solutions to overcome sustainable financing challenges and promote data-driven decision-making to ensure consistent availability of health commodities.

PARTNER: VILLAGEREACH, CLINTON HEALTH ACCESS INITIATIVE

Establishing a National Maternal and Perinatal Death Database | Systematic data collection of maternal and perinatal deaths and analysis of their root causes is limited. We are supporting the development and implementation of an electronic national maternal and perinatal death database, beginning with a network of referral hospitals, to determine the causes of maternal and perinatal mortality, a critical step in improving the quality of maternity care.

PARTNER: WORLD HEALTH ORGANIZATION

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Our Global Partnerships

Globally, we are catalyzing partnerships that mobilize private sector involvement to achieve the Sustainable Development Goals for maternal, newborn, and child health and close the USD $3 billion funding gap. Nigeria serves as a priority country for several Merck for Mothers’ global commitments to accelerate the country’s progress in meeting its maternal health goals.

In 2012, Merck for Mothers and the Bill & Melinda Gates Foundation jointly pledged $50 million in support of Family Planning 2020, a global movement to improve access to quality contraception for 120 million more women and girls by 2020, a critical milestone in reaching the Sustainable Development Goals. In Nigeria, our IntegratE and Post-Pregnancy Family Planning Integration projects support the FP2020 vision.

In 2017, we committed $10 million to the Global Financing Facility – a multi-stakeholder partnership hosted by the World Bank Group – that is leveraging private capital and expertise to support national governments’ priorities in maternal and child health, including Nigeria’s Federal Ministry of Health’s efforts to improve reproductive, maternal, newborn, child, and adolescent health outcomes.

In 2018, Merck for Mothers partnered with the World Health Organization’s Quality, Equity, Dignity Initiative to analyze current private and public health collaborations to deliver quality maternal, newborn, and child health services in Nigeria and several other Africa countries to provide recommendations for more effective cooperation between the two health sectors.


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