Strengthening surgical safety in maternal health care and voluntary family planning programs

**MOMENTUM SAFE SURGERY IN FAMILY PLANNING AND OBSTETRICS** is part of a suite of innovative awards funded by the U.S. Agency for International Development (USAID) to holistically improve maternal, newborn, and child health services, voluntary family planning, and reproductive health (MNCH/FP/RH) care in partner countries around the world.

The project assists country governments, institutions, organizations, and networks to build awareness of and provide equitable access to high-quality surgical care. This includes utilizing evidence-based approaches and testing new innovations to ensure voluntary and informed decision-making leading to consented safe surgical procedures within four technical areas: Caesarean delivery (CD), including prevention of non-medically indicated CD; hysterectomy performed during or shortly after delivery; fistula prevention and repair, including prevention of fistula resulting from unsafe CD and hysterectomy; and long-acting reversible contraception and permanent FP methods. In certain countries, the project also works on prevention of and referrals/care for female genital mutilation/cutting and gender-based violence, and health facility management of COVID emergencies.

MOMENTUM Safe Surgery in Family Planning and Obstetrics works with local partners and country governments and institutions to ensure that health strategies are country-owned and country-led. These strategies include identifying and reducing barriers to maternal health and FP care-seeking; encouraging community engagement; promoting gender equity and respectful maternity care principles; and generating research and learning to support scaling up of new approaches for improving maternal and newborn health outcomes and better meet FP needs.

The project applies cross-cutting strategies that prioritize local stakeholders and partners as co-creators, innovators, implementers, owners, and sustainers; use effective clinical team capacity-building approaches and technologies; emphasize gender, youth, and social inclusion competency and program integration; leverage public-private partnerships; and measure impact. Recognizing the highly dynamic environments in which health services are delivered, these strategies emphasize supporting health system resilience and a commitment to agile implementation guided by adaptive management and learning.
The project’s vision and strategy build on global safe surgery and health system building block frameworks, which demonstrate the interdependent resources, skills, and interventions needed to deliver surgical maternal health and FP care and promote a functional, safe surgery ecosystem.

**KEY APPROACHES**

MOMENTUM Safe Surgery in Family Planning and Obstetrics activities focus on overcoming entrenched barriers within communities, health facilities, health systems/institutions, and evidence generation and sharing. The project’s technical and programmatic approaches include:

- Low- and middle-income country-led human-centered design to create context-specific, social behavior change strategies addressing factors that affect service demand and use.
- Updating pre- and in-service curricula for priority surgical maternal health/FP competencies.
- Supporting collaborative processes among national FP, fistula, and maternal health technical working groups, academic medical institutions, professional associations, faith-based and community-based organizations, and credentialing bodies.
- Supporting country governments and institutions to have and use improved data, including revising Health Management Information System indicators, harmonizing registers, and implementing a robust learning agenda.

**EXPECTED RESULTS**

The project’s activities and approaches contribute to the following long-term goals:

- Universal access to surgical maternal health and FP information and services.
- A skilled, equipped, and supported health workforce who provide quality surgical maternal health and FP services through well-functioning teams at appropriate levels of care.
- Informed health system resource allocations that enable high-quality service delivery, as well as costed strategies and plans to increase country self-reliance.
- Availability and use of high-quality, timely data for decision-making at all levels of the health system.

**KEY FACTS**

- **DURATION**
  September 2020–June 2026
- **TOTAL 5-YEAR BUDGET**
  $80 million
- **IMPLEMENTING PARTNERS**
  - EngenderHealth (lead)
  - IntraHealth
  - Johns Hopkins Center for Communication Programs
  - London School of Hygiene and Tropical Medicine
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