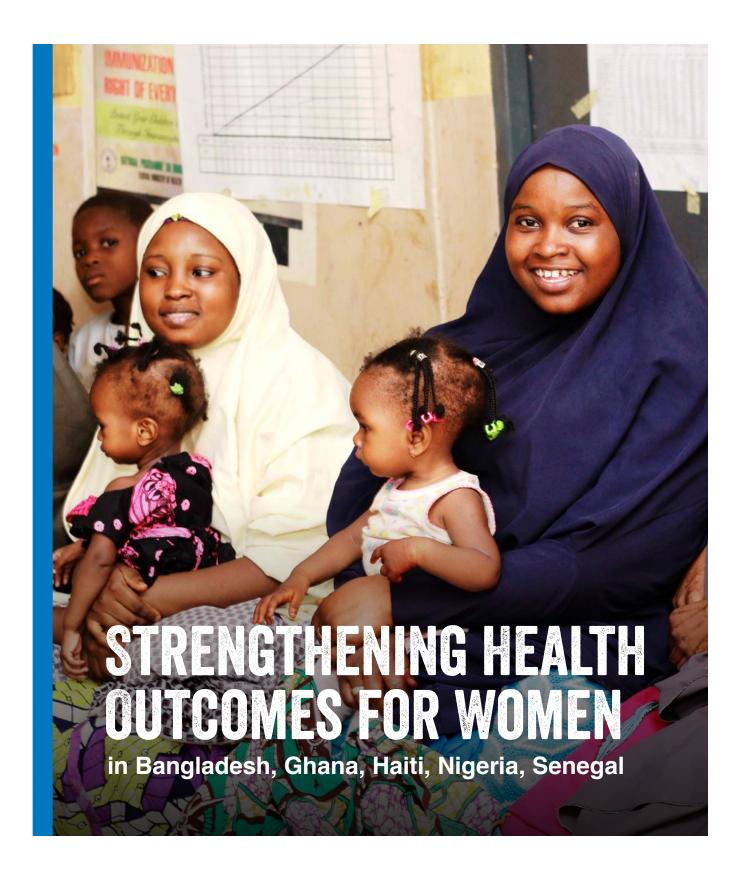
Fall/Winter 2022









Contents

The First Word The Scene	6
Spotlight	10
Money Sense	10
Giving Back by Moving Forward	12
Marvellous Mavis	14
Report Card	16
The Last Word	18

SHOWing Support for Moms & Babies

Welcome to the finish line of the Strengthening Health Outcomes for Women project.

PREGNANCY, CHILDBIRTH AND MOTHERHOOD

can be joyful and enriching experiences in a woman's life. But they can also be scary, full of uncertainty and, in some instances, even life-threatening. Illness and complications during pregnancy and/or childbirth are the number one cause of death among adolescent girls globally. However, many of these complications are preventable with proper treatment.

But when communities, leaders and governments rally in support of women's and children's health, life-saving change is possible.

Over the past 6.5 years, the Strengthening Health Outcomes for Women (SHOW) project has brought transformative health care to millions of mothers and their children living in Bangladesh, Ghana, Haiti, Nigeria and Senegal.

Hundreds of health workers are now equipped with the skills they need to treat pregnancy and childbirth complications as well as the tools they need to share their life-saving knowledge with their peers. Thousands of men who participated in Fathers Clubs are now better able to support women during and after their pregnancies. And thousands of women can pay for critical health care costs for themselves and their children with financial support from savings groups.

These are just a few examples of the pivotal progress you've made possible with your support for the SHOW project. Thank you for your generous commitment to transforming health care services for mothers and children.

Strengthening Health Outcomes for Women was a 6.5-year \$73 million project that began in January 2016 and ended in September 2022.

THE PROJECT HAD THREE GOALS:

Increase knowledge about and the use of essential health services among women of reproductive age and adolescent girls

Improve the quality and delivery of essential health services for adolescent girls, expectant and new mothers and children

Share insightful data and learnings from the project with communities, health care providers, health committees and decision makers



The State of Maternal Health

Millions of moms and babies die each year. It doesn't have to be this way.



EVERY MOTHER hopes their children will lead healthy, happy lives and that they will be able to care for them. Sadly, for many mothers, this isn't the reality. In 2020, an estimated 810 women died every day from causes related to pregnancy and childbirth. That same year, 2.4 million newborns died in their first month, often due to conditions and diseases associated with a lack of quality care in their first days of life.

See how the SHOW project changed women's lives in Bangladesh and Nigeria!



Many of these deaths could have been prevented if the mothers had had access to quality health care during and after pregnancy, but women around the world face barriers to accessing these vital services. In smaller, remote places, health workers and facilities aren't always equipped to deal with pregnancy-related complications. Even if the services are available, they can be costly. Finally, knowledge about maternal and newborn health can be limited, and cultural norms and traditions may discourage women from seeking care.

Over the past 6.5 years, the SHOW project has worked with community members, health workers and decision makers to reduce maternal and infant mortality.

Your support helped us reach over 3.1 million women, adolescent girls, men and children. Thank you for helping to provide services, treatment and information related to maternal, newborn and child health, ensuring that mothers and babies have healthy, happy beginnings



THERUNDOWN

You've helped new moms and babies access life-saving care in supportive environments. Here are some of the incredible achievements of the SHOW project, made possible by your generosity!

The SHOW project improved health outcomes for 1.4 MILLION women and adolescent girls, including:

343,928

women and adolescent girls in

Bangladesh

women and adolescent

17,727

women and adolescent girls in Haiti 178,000

women and adolescent girls in Ghana







318,000

girls in Nigeria

566,464

women and adolescent girls in Senegal











1,047,091

MEN & BOYS

were engaged through Fathers Clubs and discussion groups to support their female partners and relatives both during and after pregnancy.

5,964

ROLE MODELS & PEER EDUCATORS

were trained on how to share their knowledge about women's reproductive health. **HEALTH FACILITIES**

were refurbished and their staff received training on how to provide care that's sensitive to the needs of women and adolescent girls.

In Bangladesh,

335,420 SESSIONS

were held with community members to raise awareness about pregnancy complications and how to identify danger signs during pregnancy and labour and after childbirth.



In Ghana,

26,934 COMMUNITY MEMBERS

joined savings groups to increase their financial literacy and agency.



In Haiti,

142 COMMUNITY GROUPS

were trained on gender equality, maternal, newborn and child health, sexual and reproductive health and male engagement.

In Nigeria,

555 HEALTH CARE PROVIDERS

were trained on how to provide improved maternal and newborn health care and

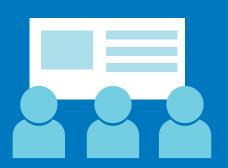
treatment.



In Senegal,

1,949 SESSIONS

were held with local and religious leaders and traditional healers to help dismantle cultural myths and norms surrounding women's and girls' health.



Money Sense

Savings groups pave the way to financial empowerment.



VILLAGE SAVINGS AND LOAN

ASSOCIATIONS (also known as VSLAs or savings groups) truly demonstrate what it means to be "stronger together." If a family is experiencing poverty, health care costs can deplete their income, leaving them unable to afford treatment in life-and-death situations. But when families pool their resources, they can lift each other out of the cycle of poverty that threatens their lives and livelihoods.

Savings groups are a community-based microfinance model developed in Africa over 30 years ago. These groups bring together 15 to 25 people who each contribute small amounts of money to create a shared pool of funds. They can then take small loans to cover things like health care expenses or even small-business start-up costs.

"I took a loan from my group's fund to pay for services for my sister after she had a miscarriage," says Nanbos, a savings group member who took part in the SHOW project in Ghana. "Even though she lost the baby, the doctors were able to save her life. I am very happy because I never thought I could get money instantly for such an emergency."

Furthermore, in households where patriarchal norms are prevalent, women often have little or no say in financial decisions – including



A bowl of coins collected from a VSLA group.

decisions that affect their health. Often, the male partners are not well informed on maternal and child health concerns. Savings groups tackle both of these issues: They provide a financial resource for women to cover health care costs, and they provide training on gender equality and maternal health to men and women.

"Due to training [I received] on danger signs in pregnancy, I observed swelling in my wife's leg and knew it was a sign of danger," says Alh Zaki Ckai, a male savings group member in Nigeria. "I rushed [her] to the hospital for treatment, and the group supported me with money from the fund."

Fatima, a member of a savings group in Nigeria, says the program also helped her create a more equitable relationship with her partner. "Our VSLA helps with savings, and it's also a space [in which] to learn," she says. "The training improved my relationship with my husband. I used to do all the household chores, but now we share roles at home."

BANK ON THIS!

Savings groups remove financial barriers and open minds to new possibilities.

Stories like Alh Zaki Ckai's and Fatima's are common in Nigeria – so common, in fact, that the successes of savings groups have caught the attention of people in high places, including commissioners in government ministries.

Seeing how effective the savings groups have been, these ministries moved to legitimize them and help them scale up their operations. The Honorable Commissioner for Health engaged a bank vendor to register all savings group members in Nigeria for Bank Verification Numbers, which grants them access to financial services with national banks. This removes a major barrier that many people face when trying to grow their savings or get loans.

Savings groups were used by the SHOW project to:

- Reduce financial barriers to seeking health care for women and adolescent girls, particularly if and when in need of emergency health care.
- Help women and adolescent girls improve their social capital and networking.
- Strengthen women's and adolescent girls' agency by helping them improve their bargaining power and make better financial decisions.

Across five project countries, over **40,000** individuals (**65%** of whom are women) saved more than **\$750,000** in loans by participating in savings groups!

Giving Back by Moving Forward

Fabien lost his unborn brother. Now he wants to make sure no one else feels that pain.



"THE DOCTOR TOLD US HE COULD NOT SAVE THEM BOTH," recalls Fabien. He would have a little brother if his mother had had

better access to quality health services and more agency to make decisions related to her family's health. Sadly, Fabien's mother had both typhoid and malaria and gave birth prematurely to her stillborn child.

Motivated by the loss of his brother, Fabien joined his local health committee, which is part of the SHOW project. Health committees are community-led peer groups that provide safe spaces for members to learn about and discuss a variety of issues related to maternal, newborn, sexual and reproductive health and rights. They also promote the importance of men supporting the women in their lives being able to assert their rights.

Through the committee, Fabien also received training on how to lead the groups and says he enjoys raising awareness in his community. Now, he is the secretary of his chapter.

"We prepare and carry out the activities of the month, which consist of home visits, awareness meetings, meetings with community organizations and raising awareness in schools," says Fabien.

One of the roles of health committee members is to raise awareness among men and boys in their community so they can empower women and girls to use health services.

Throughout the SHOW project, **1,315** community health committees were trained with **1,0198** members (like Fabien)!



Ms. Raphael, a nurse in charge of the local community health centre, says she has seen a considerable increase in the number of visitors to the centre in recent months.

"We used to receive only four or five visits a month," she says. She used to feel discouraged by these low numbers. But now the number of people accessing the health centre has gone up significantly and there are around 50 visitors per month.

"The health-committee members do a tremendous job," says Ms. Elizabeth, an administrator at the health centre. "They have a lot of credibility and go to the most remote areas to educate people."

Fabien is very proud of the work he's doing with the health committee. "I feel useful to my community, and with the help of the training, my knowledge is enriched. I explain to men how they can support their wives in pregnancy, I talk to them about the danger signs and I tell them about family planning so that what happened to my mother does not happen to anyone else."

Marvellous Mavis

Before, young pregnant women were ashamed to ask Mavis for help. Now, they knock on her front door.



GETTING PREGNANT AT AN EARLY

AGE can be a difficult situation to navigate. This is especially true in Mavis' hometown, where getting to the nearest fully equipped health centre requires a long journey – sometimes even a canoe trip.

Mavis is a community health worker at a local facility that, she acknowledges, used not to be a welcoming place for young pregnant women to receive prenatal and postnatal care. With little separating them from other patients in the room, they faced judgment from older pregnant women and weren't comfortable asking intimate questions.

Nurses weren't considerate of their lack of experience and didn't take the time to explain

concepts related to pregnancy and childcare. They weren't offered follow-up visits or one-on-one counselling. Often, the fear of being humiliated deterred adolescent girls from visiting the health facility, instead making the risky choice to give birth at home without professional support.

As part of the SHOW project, Mavis participated in training through which she learned how to provide emergency care during and after pregnancy and how to be sensitive to the needs of adolescents. "I learned that I shouldn't be biased or partial when treating pregnant women," she says. "I should give the same special treatment to adolescent girls that I give to adult women. I have since put this into practice." She also counsels adolescents about delaying pregnancy and preventing sexually transmitted infections with contraceptives, and she speaks with their parents about creating a supportive environment in which these issues can be discussed openly.

Since the training, Mavis has noticed a shift in her and her fellow health workers' attitudes. Both pregnant women and pregnant adolescent girls are treated with respect and dignity.

10,072 health workers across all five project countries have received training like Mavis' thanks to your generosity!



She also commends the improvements made at the health centre to increase privacy, such as installing partitions to separate patients and designating specific days for adolescents only. To ensure that young mothers have the necessary support, their male partners and family members are encouraged to accompany them on visits so they can fully understand their needs throughout pregnancy and parenthood and so family decisions can be made in line with their best interests as well as those of the family.

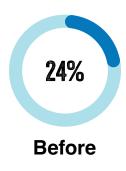
Mavis acknowledges her former oversights as a nurse, and she now goes above and beyond to be a source of support and guidance for young women in her community. She gives her patients her phone number in case they have questions, and some even visit her at home. Now they can rest easy knowing that help is never too far away.

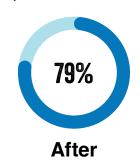
The Report Card

Here's a snapshot of the difference you've helped make in the lives of women and children through the SHOW project!

BANGLADESH

The percentage of women and their male family members who know at least two danger signs to look out for during pregnancy.



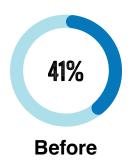


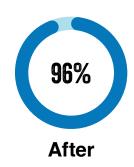
WE MADE IT HAPPEN BY:

- Raising awareness about maternal and newborn health in men's and women's discussion groups.
- Having community health workers conduct household visits to counsel pregnant women and their families.

GHANA

The percentage of health facilities that provide health services sensitive to the needs of women and adolescents.



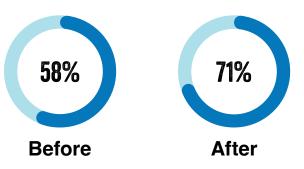


WE MADE IT HAPPEN BY:

- Training health workers on maternal, newborn, sexual and reproductive health counselling that addresses the needs of women and adolescents.
 Training also included how to show empathy and respect for younger women and older pregnant women, who often feel judged by health workers.
- Refurbishing health facilities to increase privacy during consultations.

HAITI

The percentage of women age 15-49 who access antenatal care by a skilled health provider at least four times during pregnancy.



NIGERIA

The percentage of children age 12-23 months vaccinated against measles.



SENEGAL

The percentage of mothers in Senegal who receive postnatal care within two days of childbirth



WE MADE IT HAPPEN BY:

- Providing girls and women in discussion and savings groups with information and resources on the importance of seeking care throughout pregnancy.
- Encouraging male partners attending Fathers
 Clubs to challenge gender norms and support the women in their lives during and after pregnancy.
- Increasing the number of trained health workers in rural health facilities.

WE MADE IT HAPPEN BY:

- Having community health volunteers make home visits to raise awareness about the importance of vaccination against childhood illnesses.
- Improving vaccination tracking with digital birth registration.
- Sharing messages about how to get vaccinated and why through campaigns during regular Maternal, Newborn and Child Health Week celebrations.

WE MADE IT HAPPEN BY:

- Engaging community members and religious and traditional leaders in discussions about safe maternal, newborn and child health practices and dismantling harmful myths.
- Creating village savings and loan groups to help women pay for health care.

66

Thanks to the savings groups, we can pay for our children's health costs and don't have to give birth at home.

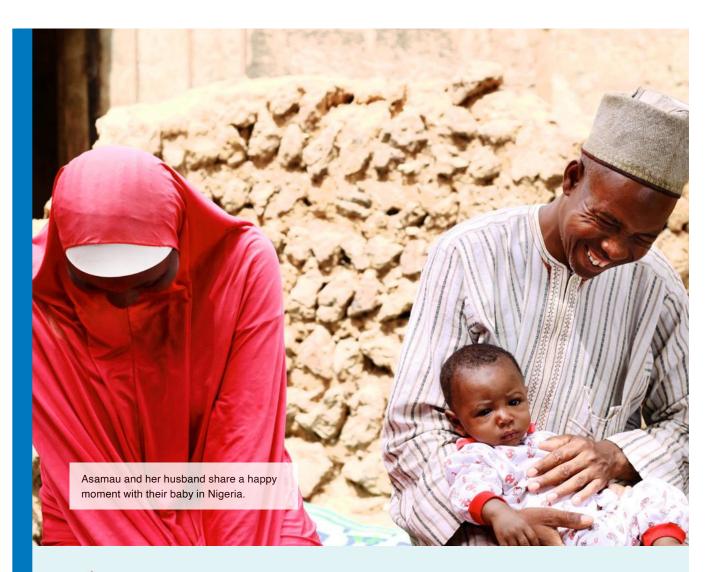
- President of a village savings and loans group in the Kédougou region



The Strengthening Health Outcomes for Women project has transformed the experience of motherhood for women in Bangladesh, Ghana, Haiti, Nigeria and Senegal. It helped prevent maternal and newborn deaths, encouraged men to be involved in their partner's care and provided access to financial support if mothers or their newborns required treatment. Thank you for your incredible commitment to keeping moms and babies healthy and happy.











Plan International Canada Inc.

245 Eglinton Avenue East, Suite 300 Toronto, ON M4P 0B3 Canada

1-800-387-1418 info@plancanada.ca plancanada.ca

Learn more and get involved at plancanada.ca















CRA Charity Registration Number 11892 8993 RR0001

© 2022 Plan International Canada Inc. The Plan International Canada, Because I am a Girl names, associated trademarks and logos are trademarks of Plan International Canada Inc.

*The Standards Program Trustmark is a mark of Imagine Canada used under licence by Plan International Canada.