



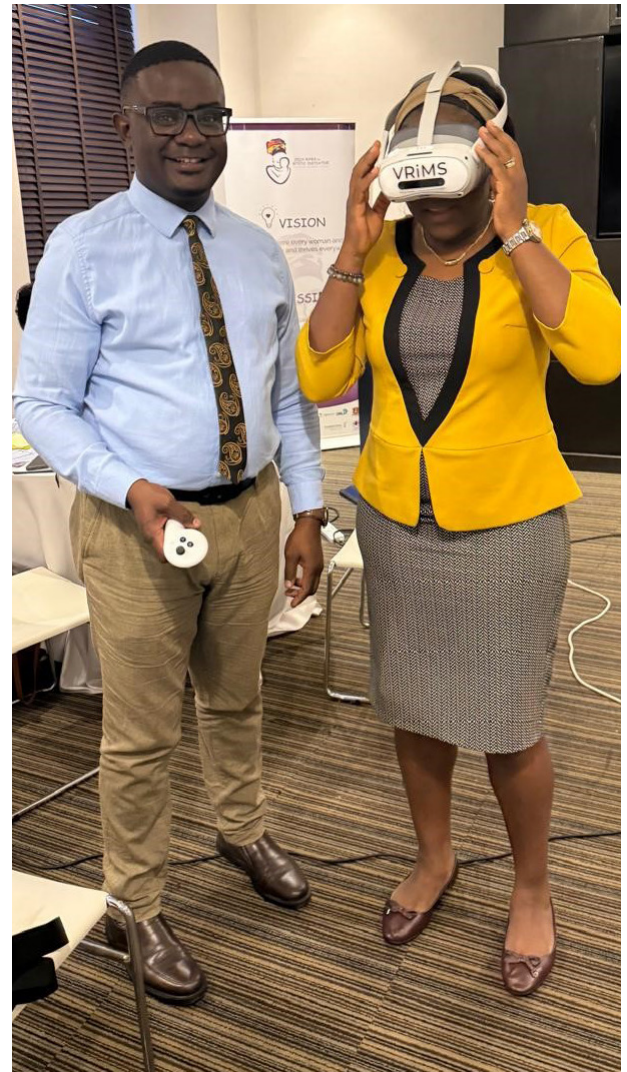
Editor's Note

Celebrating progress, innovations and partnerships

Every mother's life tells a story of courage, hope, and the promise of new beginnings. Yet, too many stories are cut short by preventable complications such as postpartum haemorrhage. In this issue, we celebrate the progress, innovation, and partnerships driving the End Postpartum Haemorrhage Initiative, while reminding ourselves of the lives at stake.

In this edition, explore the PPH School, a pioneering training environment using virtual and augmented reality to equip health workers for real-life maternal emergencies. Thoughtful reflections, including a moving piece on the Taj Mahal, bring the human cost of maternal loss into focus, while our Science Corner highlights the impact of PPH on breastfeeding and newborn survival.

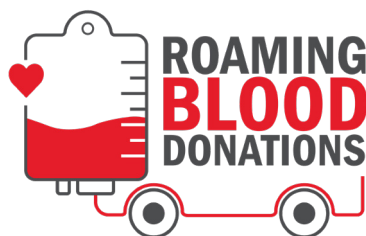
With a refreshed digital platform and growing social media presence, the Initiative continues to amplify evidence-based solutions and practical advocacy. This issue invites you to reflect, engage, and join us in ensuring every mother survives and thrives.



*Warm regards,
Rose Mukonyo
Project Administrator,
Public Relations & Media Liaison officer
PPH Foundation*

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Science Corner



**Food for
Pregnancy**

From The EPPH Project Lead

The work to end postpartum haemorrhage demands more than awareness. It requires deliberate alignment of evidence, systems, and people around a shared goal, ensuring that prevention is embedded at every point where women interact with care. Over the past period, the End Postpartum Haemorrhage Initiative has focused on building that alignment, strengthening professional ownership, amplifying community voices, and advancing practical solutions to long-standing challenges such as blood access, referral delays, and preparedness for obstetric emergencies.

These efforts have demonstrated what is possible when institutions move beyond parallel efforts and commit to coordinated action. Partnerships across academia, professional bodies, frontline providers, civil society, the private sector, and the media have allowed us to translate advocacy into implementation and ideas into action. This collective approach has been central to shaping both national dialogue and emerging regional interest in Kenya's PPH prevention model.

Looking ahead, our priority is intentional scale, deepening impact at county level, strengthening system integration, and ensuring that innovation is guided by data and lived realities. Ending postpartum haemorrhage will only be achieved through partnerships that are sustained, accountable, and purpose-driven. We invite our partners to continue walking this journey with us, not only to do more, but to do what works, together.



Prof Moses Obimbo
End PPH Initiative Project Lead

“Ending postpartum haemorrhage is not about doing more, it is about aligning evidence, systems, and people to do what works, together.”



Evidence



Systems



People

Updates

Reflections on 18 Months of the End Postpartum Haemorrhage Campaign



Eighteen months after the launch of the End Postpartum Haemorrhage Initiative, the leadership and Secretariat convened for a strategic reflection and alignment meeting to assess progress, reaffirm shared commitments, and define clear priorities for the next phase of implementation. The meeting was held on 22 January 2026 at the Sarova Pan Afric Hotel in Nairobi and brought together members of the Global Steering Committee and the Secretariat.

The Global Steering Committee, comprising Prof Moses Obimbo, Project Lead, Prof Julius Ogeng'o, Co-Lead, Prof Ann Beatrice Kihara, Co-Lead, Dr Kireki Omanwa, Co-Lead, Dr Laura Oyiengo, Co-Lead, and Dr Eunice Atsali, undertook a comprehensive review of the Initiative's journey. The leaders revisited the early consultations that led to the formation of the Initiative, anchored in a shared urgency to address postpartum haemorrhage as a leading cause of maternal mortality. They reflected on how clinical experience, research expertise, and policy engagement converged to transform a shared concern into a structured, multi-partner movement.

Discussions highlighted key lessons from the first 18 months, including the importance of early strategic planning, clearly defined roles for each Co-Lead, deliberate partner selection, and sustained stakeholder engagement. The leadership acknowledged that clarity of purpose, collaboration, and persistence have been central to maintaining momentum and credibility.

The meeting also focused on forward planning with defined deliverables for 2026. Agreed priority actions include the commemoration of World PPH Day on 5 October, the organisation of the 3rd End PPH Run, structured preparations for the launch of the PPH School, convening of the Research and Development Week, hosting of the inaugural PPH Conference, and scaling of the ROAMING Blood Drive Initiative. Strengthening maternal health data ecosystems through the development of a data dashboard was also confirmed as a key deliverable.

“ A key deliverable for 2026 is strengthening maternal health data ecosystems through the development of a data dashboard ”

In addition, the Committee discussed expanding advocacy through social innovation approaches. This includes strategic engagement with First Ladies as maternal health champions, collaboration with embassies and diplomatic missions to elevate PPH advocacy within global health platforms, and strengthening public-private partnerships to enhance sustainability and resource mobilisation. The

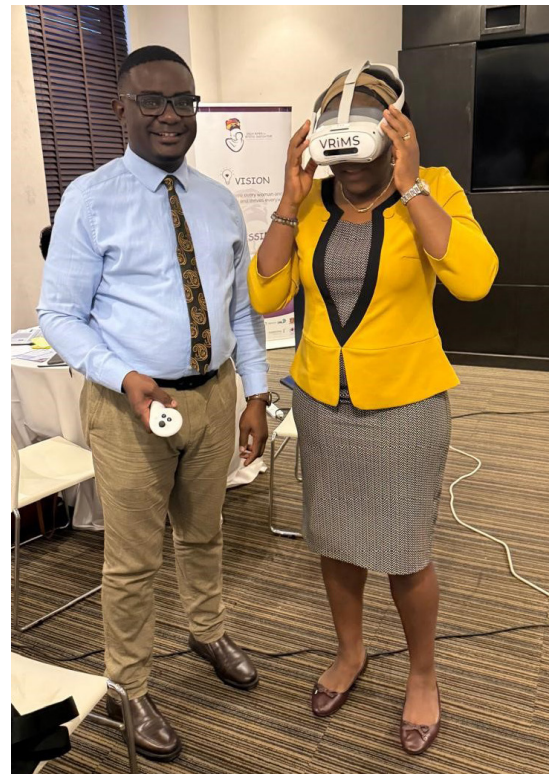
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PPH School, Reimagining Training for Safer Motherhood

The PPH Foundation has envisioned a school dedicated to preventing postpartum haemorrhage and other major threats to maternal health, including preeclampsia, obstructed labour and complications arising from unsafe abortions. This PPH School is not imagined as rows of desks or dusty lecture halls, but as a dynamic, technology-driven learning environment designed to prepare health workers for real-world maternal health emergencies.

From its inception, the PPH School will embrace innovation. Using virtual reality and extended reality technologies developed by VRISM, learners will be immersed in lifelike clinical scenarios that mirror the realities of care delivery. Trainees will manage postpartum bleeding, preeclampsia and other obstetric emergencies in simulated rural dispensaries, busy county hospitals and tertiary referral centres. Community Health Promoters will be trained to empower women, strengthen early identification of risk and reinforce referral pathways. Midwives will rehearse rapid response protocols, while medical officers and consultant obstetricians and gynaecologists will refine advanced surgical skills, all within a safe, repeatable and realistic virtual environment.

The PPH School will go beyond simulation. Recognising that skills must be supported in real clinical practice; the Foundation will partner with Proximie to provide mentored intraoperative management. Through secure augmented reality platforms, experienced specialists will guide frontline providers remotely, offering real-time support, supervision and confidence when it matters most. With the curriculum ready, the PPH School is gearing up to hit the ground running.



Preparing health workers for real maternal emergencies requires training that reflects real life, immersive, practical, and responsive.

Reflections on 18 Months of the End Postpartum Haemorrhage Campaign

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meeting underscored the need to leverage strong local collaborations, particularly with professional associations, county governments, and community networks, to deepen grassroots impact.

Enhancing media advocacy was also prioritised, with a commitment to structured media engagement, increased thought leadership placements, and targeted communication campaigns aligned with flagship activities. Clear communication deliverables will accompany each

major event to ensure visibility, accountability, and measurable impact.

The meeting concluded with a unified commitment from both the Global Steering Committee and the Secretariat to sustain momentum and sharpen implementation. There was collective resolve to strengthen partnerships, deliver on agreed milestones, and remain steadfast in the shared goal of ensuring that no mother dies from preventable postpartum haemorrhage.

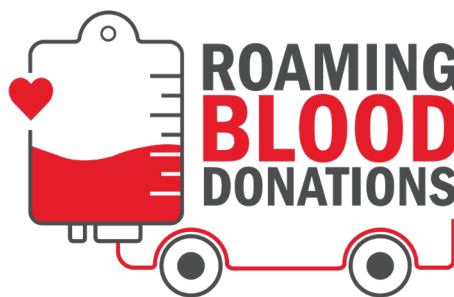
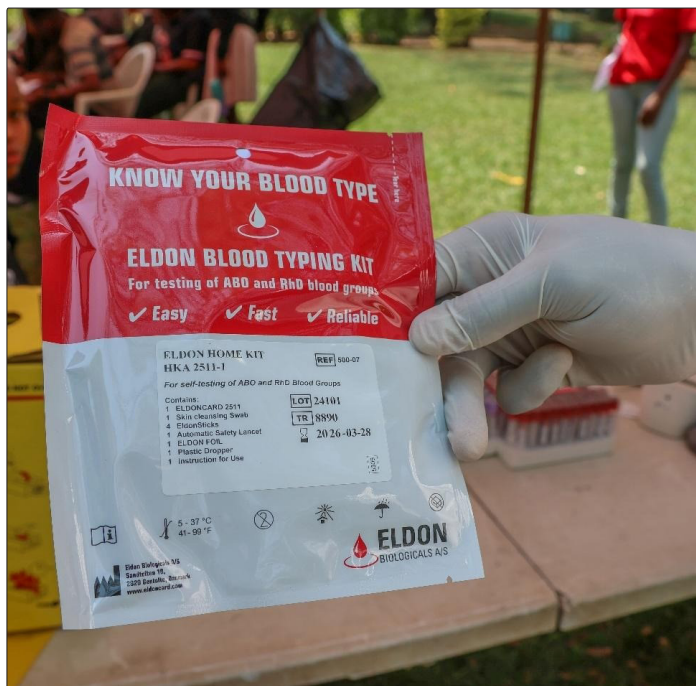
Roaming Blood Initiative

Progressing The ROAMING Blood Collection Initiative

Intensified Engagement with Eldon Biologicals A/S

The PPH Foundation intensified its engagement with Eldon Biologicals A/S to support the ROAMING blood group testing and donation scheme. The sustained consultations are aimed at fostering advancement of the project into a resilient national blood collection programme to bridge the current blood-demand-supply gap. With the continual support of Eldon Biologicals A/S, the EPPH project lead Prof Obimbo and project champion Prof Ogeng'o have held productive meetings with several other interested partners. Eldon Biologicals donated the blood group test cards for the pilot phase.

“ The March 2026 blood targets 5,000 units of blood for areas experiencing blood crises in PPH hot spot counties



Focusing the Mission: The Logo

The PPH Foundation has designed a logo for the ROAMING Blood Testing and Donation Scheme. The logo clearly depicts the mission of the project/programme – saving lives by filling an existential gap through outreach, mobilization and networking with focus on measurable output.

Soliciting Partners for 2026 Blood Drive

The PPH Foundation continues soliciting partners to support the 2026 blood drive, scheduled for March, 2026. The drive targets 5000 units of blood for areas experiencing blood crisis in PPH hot spot counties, where every drop of blood counts. Let us partner to save mothers, newborns, families and communities.



Partner engagement with ICRHK



The End Postpartum Haemorrhage Initiative, in collaboration with the Kenya Obstetrical and Gynaecological Society, participated in a two-day partner convening hosted by the International Centre for Reproductive Health Kenya on 20 and 21 January 2026 at the Royal Tulip Hotel in Nairobi. The meeting brought together partners under the OMMI Consortium, Okoa Mama Na Mtoto, to reflect on progress and strengthen coordination.

The convening was organised by ICRHK and brought together consortium members including Ushiriki Wema, Options Consultancy Services, Lwala Community Alliance, Wanahabari Centre, Kenya Medical Training College, Shina Foundation, Women Engaged in Development, Fountain of Hope, Fanikisha Foundation, OLLWI, and KOGS through the End PPH Initiative. These organisations are sub-grantees under a three-year Bill and Melinda Gates Foundation grant managed by ICRHK.

The primary objective of the meeting was to review Year One implementation, align priorities across partners, and set the strategic direction for Year Two of the programme. During the sessions, the End PPH Initiative and KOGS made a

presentation highlighting key achievements and milestones from the first year of implementation. The presentation also outlined implementation challenges encountered and shared cross-cutting lessons drawn from field experience and partner engagement.

In addition, priority activities planned for Year Two were presented and discussed with consortium members and ICRHK, reinforcing collaboration and shared accountability in advancing maternal health outcomes.

“*Reviewing progress with ICRHK and consortium partners ensured that lessons from Year One are directly informing planning and delivery for Year Two.*”

Strengthening Global Collaboration on PPH and PrAKI

From 29 to 31 January 2026, the End Postpartum Haemorrhage Initiative participated in a global convening hosted by the Global Pregnancy-related Acute Kidney Injury Consortium in Lusaka, Zambia. The meeting brought together multidisciplinary experts to review progress since the July 2025 global meeting held in Nairobi and to outline a shared roadmap for the next phase of collaboration.

The convening assembled obstetricians, nephrologists, midwives, and allied health experts from the United Kingdom, Zambia, Tanzania, Sierra Leone, Egypt, and Kenya, reflecting the growing recognition of the intersection between postpartum haemorrhage and pregnancy-related acute kidney injury. Discussions focused on emerging evidence, implementation experiences, and opportunities to strengthen prevention, early detection, and response across health systems.

During the sessions, Dr Eunice Atsali, a Co-Lead at the End PPH Initiative and Dr Wandji Brigitte, presented the End PPH Initiative's four-pillar approach to addressing postpartum haemorrhage and highlighted its relevance to PrAKI

prevention and management. They also shared planned activities for 2026 and invited consortium members to engage in upcoming flagship events, including the 2026 PPH Conference and Advocacy Run.

A subsequent joint working session provided an opportunity for deeper technical exchange and strategic alignment. The discussions affirmed strong mutual interest in collaboration and concluded with agreement to strengthen engagement and move towards formalizing a partnership between the End PPH Initiative and the Global PrAKI Consortium.

“ Addressing postpartum haemorrhage and pregnancy-related acute kidney injury together strengthens prevention, early detection, and response across health systems.



Media Advocacy Spotlight: Cervical Cancer and Postpartum Haemorrhage

In January 2026, the End Postpartum Haemorrhage Initiative continued its advocacy through the media, focusing on the critical link between cervical cancer and postpartum haemorrhage (PPH). A series of media engagements highlighted the importance of early diagnosis in reducing maternal risk and improving outcomes.

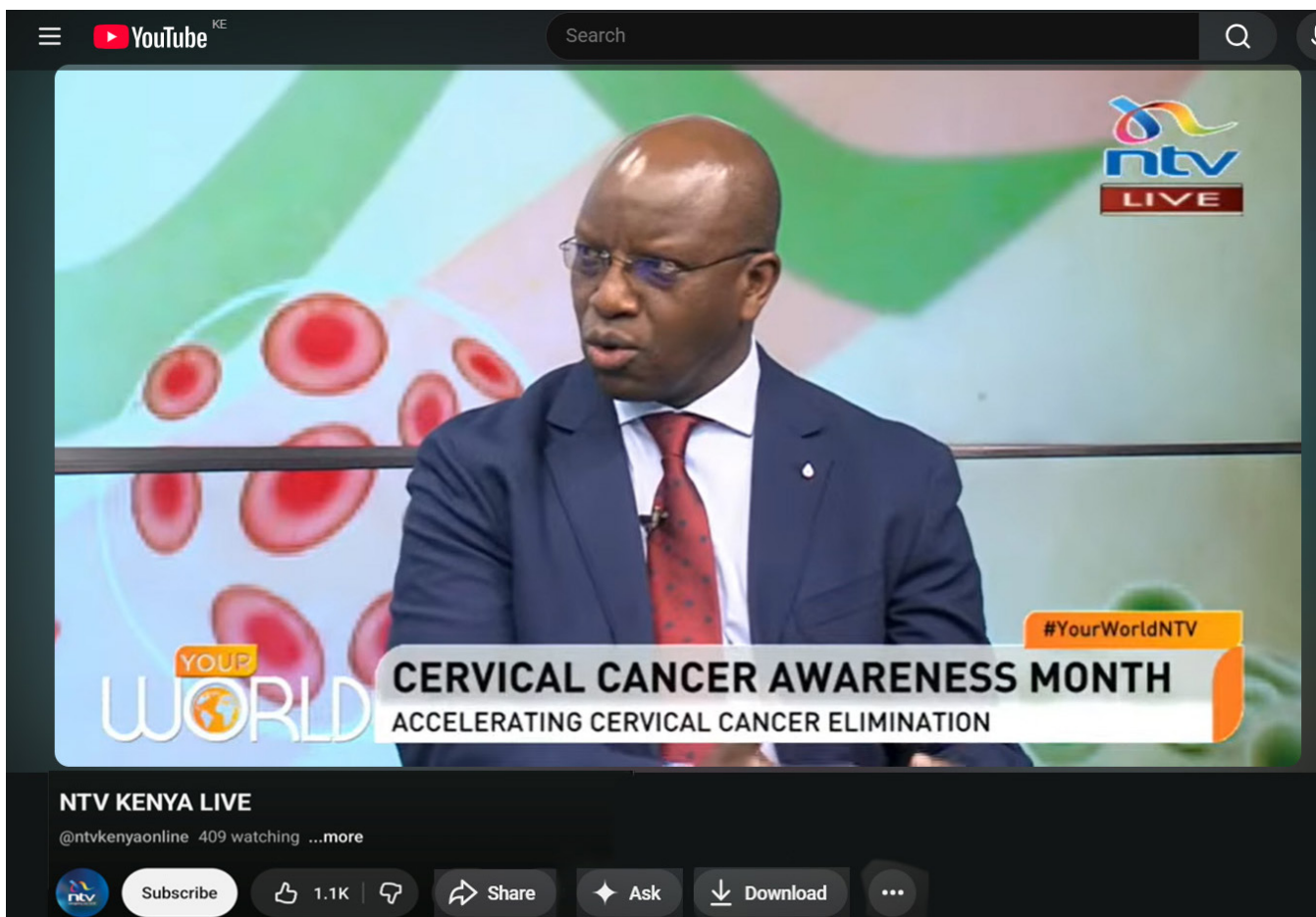
Dr Kireki Omanwa, Co-Lead of the Initiative, was interviewed on Citizen Radio, where he discussed the connection between cervical pathology and PPH, emphasizing how timely screening can save lives. He also participated in a panel discussion on NTV, where the conversation explored cervical cancer, early detection, and the potential impact on maternal haemorrhage.

The Project Lead, Prof Moses Obimbo, together with Dr Omanwa, facilitated media engagement by connecting Citizen TV with a gynaecologist who contributed expert

insights during a panel discussion. These activities exemplify the Initiative's commitment to leveraging media as a powerful advocacy tool to inform the public, influence health-seeking behavior, and support policy dialogue.

In addition, national media outlets, including NTV and KTN, ran coverage in January 2026 on cervical cancer awareness, highlighting the risks of late diagnosis and the importance of early screening. This wider coverage complements the Initiative's efforts and demonstrates ongoing collaboration with media partners to amplify life-saving maternal health messages.

“Through interviews and panel discussions, our experts are translating complex maternal health issues into messages that reach and inform the public.”



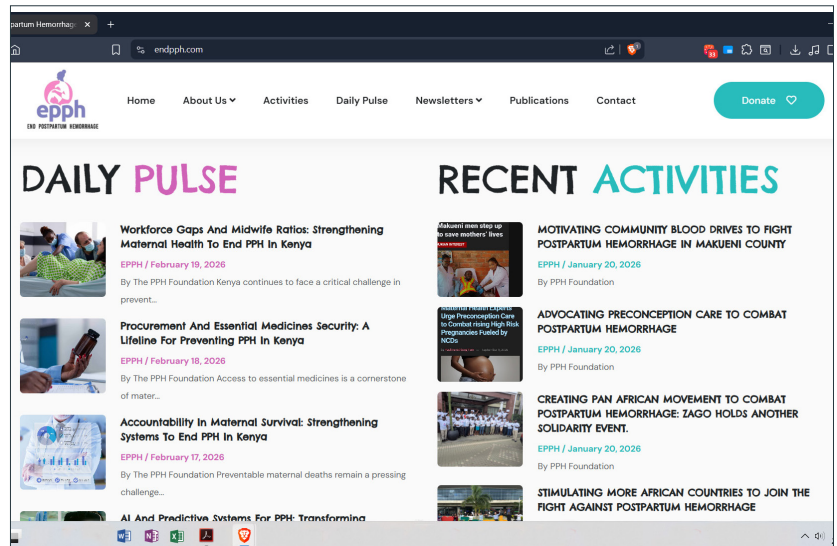
Activities

A Refreshed Digital Platform to Strengthen PPH Advocacy

The End Postpartum Haemorrhage Initiative has launched a rebranded website that reflects the growth, maturity, and expanding ambition of the movement to end preventable maternal deaths. Designed with users in mind, the new platform offers a cleaner layout, clearer navigation, and easier access to information, making it simpler for diverse audiences to engage with PPH advocacy and action.

The refreshed website brings together the Initiative’s key advocacy tools in one accessible space. Visitors can follow ongoing thought leadership through The Daily Pulse, stay connected through the PPH Insights Newsletter, and explore a dedicated publications section that showcases public media coverage on postpartum haemorrhage. This integration ensures that evidence, policy dialogue, and public engagement continue to reinforce one another.

Beyond content, the new platform serves as a living record of the Initiative’s work, partnerships, and impact, while creating room for continued growth.



Stakeholders, partners, media, and the public are invited to visit, explore, and engage with the End PPH platform at <https://www.endpph.com>, and be part of the collective effort to end postpartum haemorrhage.

“Our digital platform is more than a website, it is a living space for evidence, advocacy, and collective action.”

Expanding Digital Reach: End PPH Initiative Strengthens Social Media Engagement

The End PPH Initiative has strengthened its social media presence through daily Pulse stories shared across Facebook, LinkedIn, X, and Instagram. These updates highlight activities, news, and resources on postpartum haemorrhage prevention, keeping audiences informed and engaged. By consistently showcasing our work, the Foundation has reached health workers, partners, and communities, reinforcing awareness and advocacy.

Our social media strategy ensures that life-saving information is accessible, timely, and shareable, amplifying our mission to prevent maternal deaths. Daily Pulse stories also feature expert insights, real-life experiences, and key project milestones, creating a narrative that resonates with followers and stakeholders. This approach has increased visibility, sparked conversations, and encouraged wider participation in our initiatives. Through storytelling and engagement, the End PPH Initiative continues to build a connected, informed network committed to ending postpartum haemorrhage.



Science Corner

PPH jeopardizes breastfeeding and newborn survival

In the dim light of dawn, Nyambura cradled her newborn in a hospital bed, her heart full of love but her breasts empty of the one thing she longed to give — breast milk. After a harrowing delivery complicated by severe postpartum hemorrhage (PPH), she was weak, dizzy and overwhelmed with frustration. As each hour passed without breastfeeding her baby cry became feeble and with the dawning reality would he survive!

Breastfeeding is more than nourishment it is life-saving. Initiating breastfeeding within the first golden hour after birth and exclusively feeding for the first six months offers unmatched protection against infections, supports optimal growth and strengthens the bond between mother and baby. Yet in Kenya, only about 60–61 % of infants are exclusively breastfed for the first six months, falling short of the national targets of 80%.

Maternal survival and neonatal health are deeply intertwined. When mothers suffer complications like PPH, their ability to initiate and sustain breastfeeding is jeopardized; with cascading effects during the critical “first 1000 days” of life, when infants are most vulnerable to infection, malnutrition and developmental setbacks. The Lancet Small Vulnerable Newborns Series highlights that preterm birth, fetal growth restriction and low birthweight; all linked to maternal health; create “small vulnerable newborns” with a high risk of mortality and disability.

For the smallest infants, good outcomes depend on a package of care: optimal breastfeeding, immediate postpartum family planning, maternal nutrition support, and management of obstetric and medical conditions. Together, these actions provide quality of care in the postpartum period, determines whether a baby survives and thrives!

In Kenya, only about 60–61 % of infants are exclusively breastfed for the first six months, falling short of the national targets of 80%

Food for Pregnancy



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6. Photo by PPH Infographics

Closing Remarks

Lets adopt the Taj Mahal Monument as a Model in the Fight Against PPH

As we reflect on the Taj Mahal in Agra, India; a monument built in memory of Mumtaz Mahal, who died during her 14th childbirth from postpartum haemorrhage, we are reminded of the enduring value of every mother’s life. Its beauty and scale mirror the resilience of women worldwide, while the mist at its base evokes the essential role of families and communities in supporting safe motherhood. The monument, built with immense resources, labor, and dedication, stands as a testament to what humanity can achieve when love, leadership, and commitment unite.

Yet, while the Taj Mahal inspires admiration, countless women continue to die from preventable complications like PPH, their lives unmarked but deeply felt in families and communities. If humanity can move mountains of marble, we can mobilize innovation, resources, and action to ensure no woman dies giving life. Let this reflection inspire continued dedication, collaboration, and urgency as we work together toward a future free from postpartum haemorrhage.

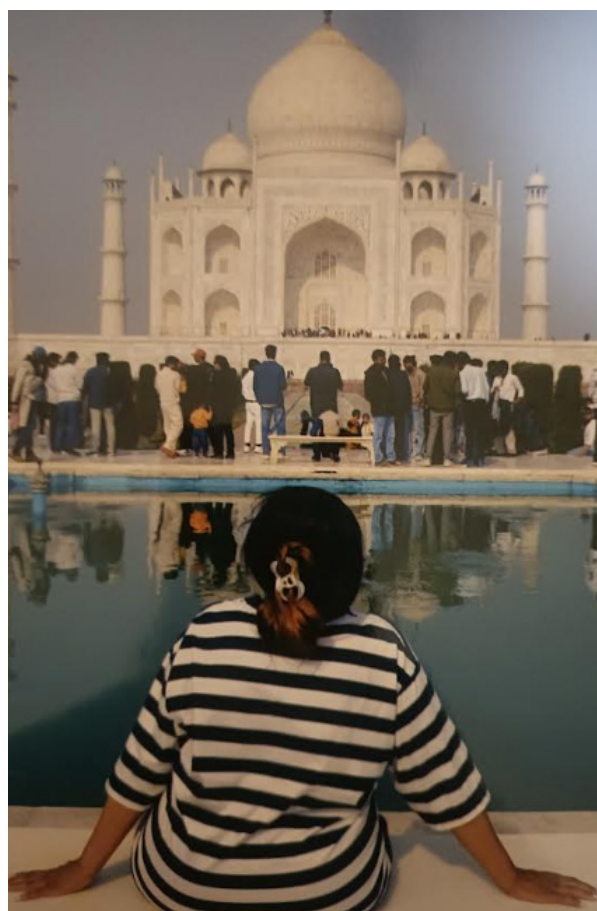
Here are some of the links from our previous newsletters.

<https://endpph.com/newsletter/pph-insights-issue-001-october-2025>

<https://endpph.com/newsletter/pph-insights-issue-002-november-2025>

<https://endpph.com/newsletter/pph-insights-issue-003>

“ If humanity can move mountains of marble, we can mobilize innovation, resources, and action to ensure no woman dies giving life





PPH Foundations Partners

