

SAVE THE MOTHERS Annual Safe Motherhood Conference 2025



11 APRIL 2025, HELD AT NKOYOYO
HALL, UGANDA CHRISTIAN UNIVERSITY



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ACRONYMS

Amref	: African Medical and Research Foundation
ANC	: Antenatal Care
AOGU	: Association of obstetricians and Gynaecologists of Uganda
CCI	: Communities for Childbirth International
CDFU	: Communication for Development Foundation Uganda
DHO	: District Health Office
EWENE	: Every Woman Every New Born Everywhere
FP	: Family Planning
HDU	: High Dependency Unit.
NICUs	: Neonatal Intensive Care Units
MBFH	: Mother Baby Friendly Hospital Initiative
MCH	: Maternal and Child Health
MoH	: Ministry of Health
MP	: Member of Parliament
MPHL	: Master in Public Health Leadership
NASGs	: Non-Pneumatic Anti-Shock Garments
PNC	: Postnatal Care
QOC	: Quality of Care.
SDG	: Sustainable Development Goals
SCORED	: Simplified Call for Real Empowerment and Development
STMEA	: Save the Mothers East Africa
UCU	: Uganda Christian University
VC	: Vice Chancellor





INTRODUCTION

On Friday, April 11, 2025, Save the Mothers East Africa (STMEA) marked its 20th anniversary with the Annual Safe Motherhood Conference, held at Nkoyoyo Hall, Uganda Christian University (UCU) in Mukono. The Conference convened over 170 delegates from more than seven countries, united by a shared commitment to ensuring that **no mother or child dies due to preventable childbirth complications**.

The conference theme was ***the impact of multidisciplinary professionals in strengthening community engagements for safe motherhood***. This theme underscored the critical role of multidisciplinary professionals in promoting community-centered solutions for maternal and child health. The event brought together a wide range of stakeholders including faculty, alumni, and students of the Master of Public Health Leadership (MPHL) program, members of the Uganda Christian University community, Ministry of Health representatives, STMEA and STM board members (Canada and USA), funding partners, Non-Governmental Organizations (NGO), religious and political leaders, schoolchildren, and other well-wishers.

The day's program featured a rich blend of devotion, opening and welcome remarks, keynote addresses, oral and poster presentations, panel discussions, exhibitions, awards, and a Save the Mothers Network Think Tank meeting. The Guest of Honour was the **Most Rev. Dr. Stephen Kaziimba Mugalu**, Archbishop of the Church of Uganda and Chancellor of UCU, while the **Keynote Speaker** was **Dr. Richard Mugahi**, Commissioner for Reproductive and Child Health at the Ministry of Health, Uganda. The opening and welcome remarks were delivered by Dr Mushin Nsubuga, Executive Director STMEA and Mr David Mugawe, Deputy Vice Chancellor Finance and Administration – UCU.



DEVOTION

In his opening devotion, **Rev. Eng. Paul Sembiro**, UCU Chaplain, reflected on Romans 13:8–10, emphasizing that the true power to transform communities lies in love: “When we advance the power of love, we promote Save the Mothers.”

He urged delegates to express love through actions, sharing knowledge about safe motherhood, offering support to those in need, mentoring youth, and engaging men in conversations on responsibility.

OPENING REMARKS

Dr. Mushin Nsubuga - Executive Director, *Save the Mothers East Africa*

Dr. Mushin Nsubuga, Executive Director of Save the Mothers East Africa (STMEA), opened his remarks with a joyful greeting in the name of the Lord Jesus Christ. He warmly welcomed all delegates to the 2025 Annual Safe Motherhood Conference and expressed the great privilege of gathering together to celebrate two decades of Save the Mothers’ impactful journey.



Reflecting on the milestone, Dr. Nsubuga described the occasion as a testament to twenty years of commitment to ending preventable maternal and newborn deaths. He emphasized that the conference theme, “*The Impact of Multidisciplinary Professionals in Strengthening Community Engagements for Safe Motherhood*” is closely aligned with the vision of Save the Mothers. From its inception, the organization has upheld the belief that maternal and newborn health is not solely the responsibility of health workers. Instead, he stressed, it requires a multisectoral approach, one that brings together professionals from government, education, faith-based organizations, the media, business, civil society, and cultural institutions to advocate for safe motherhood.

He narrated the origins of STMEA, rooted in the insights gained from the 1999 Safe Motherhood Conference in Sri Lanka. It was there that members of the Association of Obstetricians and Gynecologists of Uganda (AOGU) and the Society of Obstetricians and

Gynecologists of Canada (SOGC) recognized the need for a multidisciplinary solution. Among these visionary founders were Prof Pius Okong, Prof. Florence Mirembe, Dr. Olive Sentumbwe, and Dr. Jean Chamberlain Froese. Together, they envisioned a training program that would equip leaders from various sectors to become champions for maternal health in their respective spheres. This vision materialized in 2005 with the launch of the Master of Public Health Leadership (MPHL) program at Uganda Christian University.

Over the past twenty years, Dr. Nsubuga noted, STM has made significant strides. The MPHL program has cultivated a network of game changers who are leading efforts in maternal health across different sectors. The organization has also strengthened health care systems through the Mother Baby Friendly Hospital Initiative (MBFHI), which has been implemented in 15 hospitals. Community engagement remains central to STM’s strategy, helping the organization to expand its reach and deepen its impact.

As STM marks this 20-year milestone, Dr. Nsubuga reaffirmed the organization’s commitment to four strategic pillars: training and research, community engagement, alumni networking, and sustainability. These pillars, he emphasized, will guide the next chapter of STMEA’s journey.

Dr Nsubuga extended heartfelt gratitude to Uganda Christian University, the Ministry of Health, donors, students, alumni, partners, friends, and well-wishers who have walked alongside STM throughout its journey. “Thank you for joining us today as we celebrate 20 years of impact and chart the way forward to safe motherhood,” he said. He expressed hope that the conference would ignite renewed commitment and bold ideas for advancing maternal and newborn health.

Mr. David Mugawe - Deputy Vice Chancellor, *Uganda Christian University (on behalf of the Vice Chancellor)*



Representing the Vice Chancellor, Mr. David Mugawe conveyed the Vice Chancellor’s regrets for being unable to attend and extended a warm welcome to all delegates.

Mr. Mugawe expressed heartfelt gratitude to His Grace, the Most Rev. Dr. Stephen Kaziimba Mugalu, for gracing the 20th anniversary celebration of Save the Mothers. Reflecting on the origins of Save the Mothers, he acknowledged that the

journey had not been easy. “STM was a difficult baby to be born,” he remarked, but praised the founder members for their dedication and resilience in bringing the vision to life and walking the journey with dedication and commitment.

He noted that Save the Mothers features prominently in Uganda Christian University’s strategic plan, reflecting a deliberate institutional commitment to investing in the program. Recent investments have included improvements to Mirembe Hall, with plans for further development in the year ahead.

In a personal anecdote, Mr. Mugawe shared an experience of boarding a taxi to his office in Mengo and encountering a pregnant woman in distress. He recalled giving up his seat near the window and requesting that the men in the taxi assist in getting her to Mengo Hospital. “I became a certified traditional birth attendant (TBA) that day,” he said, with a touch of humor and humility.

His message to the Save the Mothers team was clear: “Take a moment to evaluate your achievements and plan better.” He emphasized the importance of periodic review to ask where the organization is, where it wants to go, and how it will get there. Mr. Mugawe concluded by thanking partners, the Ministry of Health, alumni, and lecturers who have volunteered their time and expertise. “You are all doing a great job,” he said, “busy people who have agreed to walk this journey with us.”



GUEST OF HONOUR ADDRESS

The Most Rev. Dr. Stephen Kaziimba Mugalu *Archbishop, Church of Uganda; Chancellor, Uganda Christian University; Safe Motherhood Champion*

The Guest of Honour, The Most Rev. Dr. Stephen Kaziimba Mugalu, expressed his heartfelt gratitude to the organizers of the conference and his joy in being part of the 20th anniversary of Save the Mothers. As a Safe Motherhood Champion and Chancellor of Uganda Christian University, Archbishop Kaziimba spoke with deep conviction about the value of this cause, drawing from both professional and personal experience.



He acknowledged the tireless efforts of Hon. Sylvia Ssinabulya, former Woman Member of Parliament for Mityana and MPHL alumna, whose advocacy influenced him to support the Safe Motherhood campaign. Through her efforts, he was persuaded to send clergy to train under the Master of Public Health Leadership (MPHL) program offered by Save the Mothers. Among those trained were Rev.

Richard Muwonge Mulindwa and Rev. Moses Semugooma. He also recognized the outstanding work of MPHL alumni including Dr. Obed Kabanda, Rev. Moses Mukholi, Peter Olet, Jeremiah Mbulamani, and Selevano Thembo.

Archbishop Kaziimba shared a personal testimony: “I have been married to Margaret for 41 years, and we have five children, though one is in heaven. She lived only five minutes. So now, we have four sons. When my wife was about to deliver our first child, I was away on ministry work. She had to walk three kilometers from our home in Madudu to Kayanja, where she could get public transport to Kawolo Hospital in Lugazi in Buikwe district central Uganda. During that journey, she kept stopping to rest. No taxi driver wanted to take a woman in labor who would occupy too much space and delay their schedule. Eventually, she got a ride to Lugazi, but had to walk another kilometer from the main road to the hospital. By the time she arrived, the baby was too tired and did not survive. Margaret almost died too.”

He added, “That is why I am passionate about safe motherhood. I must advocate for it. When we celebrated 41 years since that day, we returned to the place where we buried our daughter and there is still no health facility there. I am now advocating for a maternity unit to be built in that village. It will be named Margaret Kaziimba Health Centre. It is already built in faith, because I don’t yet have the money, but the plan is already made.”

“I usually don’t share this story,” he admitted, “but this is the right moment so you can understand why I care so deeply about families, children, and women. I will never forget our little girl. She would be 41 years old now. I ask for your prayers so we can raise the resources needed to build that health facility.”

The Archbishop congratulated Save the Mothers for their commitment to ensuring no mother or child dies due to preventable pregnancy-related complications. “Thank you for 20 years of beautiful Safe Motherhood ministry,” he said. “This milestone is a testimony that when we bring together purpose, partnership, and passion, as seen in the collaboration between Save the Mothers and Uganda Christian University, we create lasting change.”

Reflecting on the conference theme, Archbishop Kaziimba emphasized that safe motherhood is not just a medical concern. “Doctors alone cannot solve it. We need educators, policymakers, civil society, journalists, faith leaders, communities, boys, and girls working together.” He commended the MPHL program for training over 500 leaders from across Africa and beyond in community-centered maternal health advocacy.

He also referenced Scripture: “In John 10:10, Jesus says, ‘The thief comes only to steal and kill and destroy; I have come that they may have life and have it to the full.’” He called for this abundant life to be extended to mothers and children.

Archbishop Kaziimba highlighted the importance of involving men and boys in the advocacy work. “If we ignore the boy child, we risk perpetuating a system where girls and women suffer, governed by men who were never taught to respect or support them. Advocacy must be holistic and empower women and girls while mentoring boys to become responsible, compassionate, and just leaders.”

He concluded by urging all stakeholders to amplify maternal health awareness and integrate it into conversations at home, in schools, at workplaces, and in places of worship. “Investing in mothers is investing in the future of our nation,” he affirmed. Quoting Mother Teresa, he reminded the audience: “Not all of us can do great things, but we can do small things with great love.”

“Let us pray for many more years of impact; saving lives, elevating the dignity of mothers, and honoring them. May God continue to use each one of you to be a blessing to Uganda and beyond. In the name of God the Father, the Son, and the Holy Spirit.”

Call to Action

Strengthen Community-Based Maternal Health Infrastructure Through Faith-Based Partnerships

Drawing from Archbishop Kaziimba’s personal testimony and ongoing advocacy for establishing a maternal health facility in underserved areas like Madudu, the conference recommends scaling up collaboration between safe motherhood stakeholders, communities, and government to invest in maternal health infrastructure in remote regions. These partnerships can help bridge geographic access gaps and foster holistic care rooted in local realities.

Integrate Male Engagement and Boy-Child Mentorship into National Safe Motherhood Campaigns

Echoing the Archbishop’s call to empower both girls and boys, the conference recommends that maternal health advocacy and programming include deliberate strategies for mentoring boys and engaging men as allies in promoting gender equity. Educating boys to respect, value, and support women will contribute to dismantling harmful norms and strengthening the social foundations for safe motherhood.

KEYNOTE ADDRESS

Dr. Richard Mugahi - *Commissioner, Reproductive and Child Health, Ministry of Health*

Delivering the keynote address, Dr. Richard Mugahi, reflected on the remarkable 20-year journey of Save the Mothers. He acknowledged STM’s significant contributions in cultivating a robust movement of safe motherhood champions. “It’s been an interesting journey,” he remarked, noting with appreciation the growing network of advocates and alumni who have taken on leadership roles in maternal and child health.

Dr. Mugahi emphasized that safe motherhood must be understood through both social and



scientific lenses. On the social side, he explained, “Safe motherhood is about love, dedication, and commitment and this is everyone’s business.” From a scientific standpoint, he identified six key pillars that define effective maternal health interventions: family planning, antenatal care, obstetric care, postnatal care, abortion care, and HIV/STD control. These, he added, must be supported by foundational systems such as communication for behaviour change, equitable access, and strong primary health care.

Addressing the persistent causes of maternal and newborn deaths, Dr. Mugahi identified haemorrhage as the leading cause, followed closely by high blood pressure during pregnancy. However, he also noted that significant progress has been made. “Globally, we have seen a reduction in child mortality, and Uganda is part of this trend,” he stated, referencing a decline from 52 to fewer than 40 deaths per 1,000 live births. He attributed this progress in part to expanded immunization programs and improved newborn care. Still, he cautioned, hospitals alone cannot ensure good maternal and child health.

He stressed that maternal health is a shared responsibility. At the Ministry of Health, strategic investments have been made in service delivery, leadership and governance, health information systems, financing, and human resources. He also highlighted the ongoing challenges presented by the well-known “three delays” model: delay at home (in making the decision to seek care), delay in reaching a health facility (often due to bad roads or long distances), and delay in receiving care once at a facility. Delay one and delay two are everyone’s role. Clergy can work on these delays. “Some mothers live in the highlands or mountainous areas, far from services,” he noted. “We must address these barriers if we are to save lives.”

In terms of strategic focus, Dr. Mugahi shared the Ministry’s commitment to going beyond survival, aiming to help mothers not only survive but thrive and transform. He called for a shift from mere access to equitable coverage with quality, and from programs where mothers, newborns, and adolescents are addressed separately, to a lifecycle approach that treats them as interconnected. “We need to move beyond treating the mother and child as separate entities,” he said. “That’s why we now promote the ‘Reborn’ package, which integrates care for both mother and baby as one entity.”

Dr. Mugahi emphasized the importance of expanding quality care beyond urban centres. “We must provide more inclusive care in the highlands and rural areas. It’s encouraging that more mothers are now surviving outside Kampala, but we must do more to ensure equitable healthcare across the country.”

He concluded with key takeaways for the audience. Maternal and newborn mortality is on the decline in Uganda, but far too many lives are still lost to preventable causes. The government is committed to investing in systems, innovation, and the health workforce. He emphasized the critical role of weekly Maternal and Perinatal Death Surveillance and Response (MPDSR) reviews, which are already saving lives and must be scaled up and sustained.

The three delays model, he said, continues to provide a clear roadmap for targeted action. But going forward, he called for a transition from fragmented, donor-driven initiatives to government-led programs rooted in local realities. “We need coherence and alignment,” he urged.

He underscored the importance of the EWENE Framework (Every Woman, Every Newborn Everywhere), which provides a unifying platform to drive accountability and align resources with national priorities. Dr. Mugahi invited delegates, safe motherhood champions and partners to orient themselves with the EWENE targets and integrate them in their safe motherhood interventions. To achieve Sustainable Development Goal 3- ensuring good health and well-being, Dr. Mugahi stressed the need for relentless focus on quality of care, resilience in the health system, and a firm commitment to ensuring that no woman or newborn is left behind, regardless of geography or socioeconomic status.

Call to Action

Strengthen Integration Across the Continuum of Care

1. Dr. Mugahi emphasized the importance of breaking down silos and adopting a life-cycle approach to maternal and child health. Health systems should implement integrated care packages such as the Ministry’s “Reborn Package” that treat the mother and baby as a single unit. This continuum of care must connect maternal, newborn, child, and adolescent health services for sustained impact.
2. Address the “Three Delays” Through Localized, Equity-Driven Solutions: The keynote underscored the persistent delays in decision-making, transport, and access to quality care especially in remote areas. Thus the need for partners to prioritize community-based interventions that reduce these delays, including improved transport networks, emergency referral systems, and decentralized maternal care infrastructure in hard-to-reach regions.
3. Institutionalize accountability in Maternal Health Initiatives. Dr. Mugahi highlighted the need to move from fragmented, partner-led projects to unified, Ministry-led programs. All stakeholders should align their efforts with national frameworks like the EWENE Framework and institutionalize Maternal and Perinatal Death Surveillance and Response (MPDSR) reviews to enhance accountability, data-driven decision-making, and sustainable impact.

ORAL PRESENTATIONS

Bridging Economic Gaps for Safe Motherhood: Leveraging Social Entrepreneurship - Baguma Allen Komugisha, MPHIL alumna

In her presentation, Allen Komugisha addressed the critical economic barriers that still hinder safe motherhood in Uganda. Despite the notable decline in maternal mortality, from 336 per 100,000 live births in 2016 to 189 in 2022, many women continue to face the burden of high out-of-pocket healthcare costs. These financial constraints often force them to prioritize other family needs over their own maternal care, limiting access to essential services during pregnancy, childbirth, and the postnatal period.

In response, Allen spearheaded initiatives training over 1,500 women across Uganda in financial literacy and social entrepreneurship, in partnership with organizations such as PEDN, ACFODE, and Icon Leadership Academy. The impact of these programs has been significant. Women, particularly in Kasese and Bundibugyo, have successfully launched local businesses and cooperative ventures, leading to increased household income and improved health accountability. These initiatives have also enhanced financial management skills and decision-making capacities. In Kamwenge and Mayuge, the involvement of men in budgeting and financial planning has promoted shared healthcare responsibilities and a more equitable distribution of household duties.



Allen concluded by emphasizing that economically empowered women are more likely to prioritize antenatal care, nutrition, and skilled birth attendance. Empowerment programs are not only transformative economically but also vital to improving maternal health outcomes.

Depression Among Teenage Mothers in Kira Municipality, Uganda: Prevalence, Associated Factors, and Coping Mechanisms

Joselyn Nakeyune & Prof. Robert Basaza, Uganda Christian University

This study shed light on a pressing public health concern—depression among teenage mothers in urbanizing settings. Despite growing awareness, teenage mothers remain understudied. The research sought to assess the prevalence, contributing factors, and coping mechanisms for depressive tendencies among teenage mothers aged 16–19 in Kira Municipality.

Using a mixed-methods approach, data was collected from 200 teenage mothers. Additional data was gathered from organizations supporting teenage mothers and mental health initiatives. Quantitative analysis was conducted using SPSS, while qualitative insights were drawn from thematic analysis.



Findings revealed that 20% of the respondents experienced major depressive disorders. Contributing factors included socio-cultural pressures and economic hardship. While various coping mechanisms were identified, many were misaligned with the AAAQ (Availability, Accessibility, Acceptability, and Quality) framework, limiting access to equitable and quality mental health support.

The study called for a stronger integration of mental health screening into maternal health programs, enhanced support systems, and awareness efforts through media. Ensuring that coping mechanisms align with the AAAQ framework can significantly improve the mental well-being of teenage mothers.

Capacity Building for Gender Equality and Social Inclusion in Uganda's GBV and Reproductive Health Sector - Mary Ssonko Nabacwa and Jose Sluijs, Amref Health Africa, Kampala



Mary Ssonko Nabacwa's presentation focused on the intersection of gender inequality and reproductive health challenges, particularly in the context of gender-based violence (GBV). The presentation emphasized that societal norms equating masculinity with control continue to drive GBV, including sexual assault, unintended pregnancies, and coercive reproductive practices.

Their work explored how institutions can meaningfully integrate Gender Equality and Social Inclusion (GESI) into their reproductive health and GBV responses. Recognizing the diverse needs of adolescents, women, and persons with disabilities is crucial in designing

inclusive programs. The capacity-building initiative described used a gender-transformative approach, coupled with the social-ecological model, to bridge theory and practice.

The presenters underscored that effective GESI capacity requires not only individual knowledge and skills but also systemic institutional processes. A multifaceted, participatory strategy is essential for building inclusive, resilient programs that address the root causes of inequality in sexual and reproductive health services.

Strengthening Community–Health Facility Linkages to Improve RMNCAH Outcomes in Amolatar District, Uganda - Dr. Jimmy Odongo, District Health Officer, Amolatar

Dr. Jimmy Odongo addressed critical challenges affecting maternal and child health outcomes in Amolatar District. He noted that many women do not attend antenatal clinics, leading to undetected pregnancy risks and lower rates of institutional deliveries. Improving antenatal care attendance and health facility deliveries is essential to reducing maternal mortality and increasing immunization rates among children under five.

Interventions focused on strengthening the role of community health workers (CHWs) in health promotion and disease prevention. These included orientation sessions for CHWs, male involvement campaigns, resource pooling for emergency referrals, regular mentorship meetings, and data-driven stakeholder engagement.

The outcomes were promising. Male engagement increased ANC attendance and institutional deliveries by 20%. Stakeholder collaboration boosted service uptake by 26%. The use of health data for action planning improved vaccination rates—polio coverage rose by 25%, and BCG vaccination rates by 31%. Additionally, eight community blood donation drives collected 1,334 units of blood.

Dr. Odongo concluded that timely referral systems, resource mobilization, and mass awareness campaigns are crucial for sustaining these improvements. Recruiting more health professionals and leveraging media can further enhance community engagement and health outcomes in Amolatar and similar districts.

Inspection of Poster presentation by Guest of Honor



POSTER PRESENTATIONS

The conference featured a robust selection of poster presentations showcasing diverse innovations and research findings from professionals working across disciplines. These posters served as a platform for knowledge exchange and peer learning. The poster presentations included:

Dr. Mushin Nsubuga presented an “Assessment of Quality of Domiciliary Postnatal Care in the Elgon Region, Eastern Uganda,” highlighting service gaps and recommendations for community-based maternal care.

Dr. Alex Mokori introduced “Born Too Soon: A Guide for Coping with Preterm Birth in Africa,” offering a culturally relevant resource for caregivers of premature infants.

Allen Namutosi showcased efforts in “Economic Empowerment for Home-Based and Survival Caregivers” at Bulegeni Child and Youth Development Centre, underscoring the impact of economic resilience on caregiving.

Roselline Achola, Richard Mughai, and Dr. Charles Olaro (Ministry of Health, Uganda) presented a paper on the “Institutionalisation of Self-Care into the Health System,”

elaborating the Ministry’s strategy to promote autonomy in personal health management.

Jude Okeria (TPO Uganda) shared insights from the “MAMA PLUS Project in West Nile,” detailing how integrating mental health into maternal care enhances comprehensive care.

Zaituni Nabateregga & Jacqueline Kobusingye (Uganda Christian University) brought attention to “Labia Minora Elongation,” describing it as a harmful cultural norm affecting adolescent girls in central Uganda.

David Okeng (Communication for Development Foundation Uganda) explored “Low Access and Use of Contraceptives Among Adolescents,” emphasizing the need for youth-friendly reproductive services.

Agembi Stella (Tororo General Hospital) discussed the “Functionality of the High Dependency Unit in Tororo District Hospital,” highlighting its role in reducing maternal mortality in critical cases.

Lillian Ssengooba, Ogwal Ronald, and Alice Kabaruli presented “Sports to Kick Out Teenage Pregnancy,” featuring results from the Eye Universal Project in Kamuli and Mayuge, which uses sports as a tool for adolescent engagement.

Jennifer Hitzfeld, Alicia Cortright, and Maureen Nyaka (USA and South Africa) introduced “Youth Ignite,” a faith-based curriculum developed to improve sexual health knowledge among youth in Middleburg, South Africa.

Stella Nalubowa¹*, JB Ruka Mpiirweh¹, Donald Kagulire, Daniel Murokora and Marc Sklar; Mama Rescue Project Pioneering Cloud-Based Solutions to Overcome Transportation Barriers, Enhance Maternal and Newborn Health in Rural Uganda



These poster sessions enriched the conference experience, offering practical, community-rooted solutions to maternal and adolescent health challenges.

PANEL DISCUSSION

The panel discussion provided a dynamic platform for diverse voices from the health sector, academia, civil society, and faith-based institutions to engage on persistent and emerging issues surrounding maternal and adolescent health. Panelists and respondents explored challenges and practical strategies around economic integration, male engagement, blood availability, and the rising number of Caesarean sections in Uganda.

Key Panelist Contributions

1. **Lillian Ssengooba, Care International Uganda** emphasized the urgent need to integrate economic considerations into sexual and adolescent reproductive health programming. She underscored that empowering young people economically can enhance decision-making around reproductive choices. She further highlighted **male engagement** as pivotal in shifting attitudes and behaviours that affect maternal outcomes.
2. **Sharon Kensita, ENABEL** posed a critical question: *What sustainable strategies can ensure the “wheel” of safe motherhood continues to function effectively?* This prompted reflections on program sustainability, community ownership, and the importance of resilient health systems.
3. **Hellen Grace Anyoda**, speaking from her experience with blood banks, extended appreciation to the Ministry of Health and partners, for their role in improving maternal health outcomes in Lira. She stressed the life-saving importance of **voluntary blood donation**, referencing a successful blood drive in Lira that supported accident victims and maternity cases.
4. **Rev. Captain Esther, Church Relations Office, UCU** raised two pressing concerns:
 1. The **increasing rates of Caesarean sections**—questioning how these can be minimized where unnecessary.
 2. The **incongruity between infrastructure improvements and the persistent lack of essential drugs** in health facilities.





Responses from the presenters and experts

Dr. Jimmy Odongo (DHO, Amolatar District) thanked Ms. Anyoda for her consistent support in mobilizing blood donations, particularly in times of acute need.

Prof. Mary addressed male engagement, sharing insights from a study conducted in Karamoja in 2014. She emphasized the value of **community education, knowledge sharing, and use of radio programs** as scalable interventions to engage men meaningfully in maternal health.

Ms. Allen Baguma advocated for a **social enterprise approach** to address economic disparities in health. She argued that bridging the economic gap is everyone's responsibility and should begin with individual awareness and local-level initiatives.



On the topic of rising Caesarean section rates:

Dr. Richard Mughai (Commissioner, Reproductive and Child Health, MOH) clarified that Caesarean sections are medically sanctioned. The Ministry of Health is **actively monitoring facilities** with high C-section rates and is cognizant of the associated complications, including maternal mortality.

Prof. Pius Okong added that several complex factors contribute to the decision to perform a Caesarean. He cited a case study from Kiboga Health Centre, where the national standard C-section rate is approximately **15%**. He called for **strengthening the capacity of midwives** to handle uncomplicated deliveries, allowing doctors to focus on critical interventions only.



RECOGNITION AND AWARDS



The **Save the Mothers Annual Safe Motherhood Conference 2025** honored distinguished individuals and groups for their outstanding contributions to safe motherhood, community health, and the advancement of maternal health programming. The awards and certificates of appreciation were presented to celebrate both long-standing commitment and emerging champions in the field.

AWARDS

Founders' Lifetime Achievers Award

This prestigious award was presented to the founders of Save the Mothers who have demonstrated exceptional dedication and leadership in promoting safe motherhood and maternal health, leaving a lasting impact on the sector: Prof Pius Okong, Prof Florence Mirembe, Dr Jean Chamberlain and Dr Olive Sentumbwe.

Young Champion for Safe Motherhood Award

Presented to **Mutesi Elizabeth**, a 9-year-old student from Triple P School, for her extraordinary advocacy and commitment to safe motherhood, notably through her efforts in Music Dance and Drama to raise awareness.



Certificates of Appreciation

Abstract Committee Members – Acknowledging their vital role in reviewing and selecting high-quality research and presentations that enriched the conference. These included Prof Robert Basaza, Dr. Mushin Nsubuga, Dr. Omona Kizito, Dr. Godwin Awio, Dr. Jennifer Hetfield, Mercy Mwanje, Jackeline Kobusingye, Emmanuel Othieno, Josephine Namyalo and Teopista Agutu.

The conference presenters were also awarded certificates of appreciation.

Game changers and safe motherhood MPHL champions awarded certificates of appreciation included Peter Olet, Selevano Thembo, Martha Ajilong among others





EXHIBITIONS

As part of the conference activities, various organizations showcased their contributions to advancing safe motherhood through an exhibition. The displays highlighted innovative programs, community engagement strategies, health services, and advocacy efforts aligned with maternal and child health priorities. Participating organizations included:

- Communication for Development Foundation Uganda (CDFU)
- Mother's Heart Uganda
- Save the Mothers
- AMREF Health Africa
- UAP Old Mutual
- Babies and Mothers Alive
- Communities for Childbirth International (CCI)
- JFoods

These exhibitions provided delegates with an opportunity to learn, network, and explore collaborative approaches for improving maternal and newborn health outcomes across different sectors.

CLOSING REMARKS

Chairperson STMEA Board, Sylvia Sinabulya

In her closing remarks, Sylvia noted that the day has been beautiful and she feels proud, she was able to recognize the board members and thanked the core team Dr Jean, the abstract committee and alumni committee, MPHL alumni and all stakeholders who have contributing to safe motherhood efforts. , the board looks at the future and Alumni has key role to play, need to organise, coordinate and amplify the works STM is doing.

She thanked the presenters of Abstracts and said they have been given certificates for work well done, people who participated in the renovation of Namirembe Hall will get certificates.



ENTERTAINMENT SEGMENT

The entertainment segment of the conference featured a dynamic performance by **Myko Ouma**, whose musical contribution added a vibrant touch to the event.

Additionally, the **Triple P Primary School**, founded by **Plan Virginia**, an MPHL graduate, played an important role in the entertainment program. The pupils from the school presented impactful safe motherhood messages through their songs, effectively combining creativity and advocacy to raise awareness on this vital issue.





RECOMMENDATIONS

- 1. Strengthen Community-Based Maternal Health Infrastructure:** Scale up partnerships among communities, stakeholders, and multi-sectoral actors to invest in maternal health infrastructure in remote areas. This will help reduce the three delays by bridging access gaps and delivering care aligned with local needs.
- 2. Integrate Male Engagement and Boy-Child Mentorship into Safe Motherhood Campaigns**
- 3. Institutionalize Accountability in Maternal Health Initiatives:** Align stakeholder efforts with frameworks like EWENE and enforce MPDSR reviews to ensure data-driven decision-making. This enhances accountability, transparency, and the sustainability of maternal health outcomes.
- 4. Strengthen Economic Empowerment as a Strategy for Maternal Health**
Incorporate financial literacy and social entrepreneurship into maternal health programs, especially for rural and low-income women. Inclusive economic models that involve both women and men in household budgeting can improve maternal health decision-making.
- 5. Integrate Mental Health into Maternal and Adolescent Health Services**
Embed mental health screening, counseling, and referral services into maternal and adolescent health care packages. This ensures holistic support for mothers and adolescents during critical life stages.
- 6. Enhance Community–Facility Linkages for Improved RMNCAH Outcomes**
Strengthen referral systems and community health structures to bridge the gap between households and health facilities. Improved linkages ensure timely access to care and better

reproductive, maternal, newborn, child, and adolescent health outcomes.

- 7. Increase Investment in Maternal and Child Health:** Prioritized investment is essential to scale up effective interventions and infrastructure.
- 8. Support Community-Level Emergency Preparedness Initiatives:** Promote grassroots solutions like blood donation drives and pooled emergency transport to close critical service delivery gaps.
- 9. Foster Multi-Stakeholder Collaboration and Resource Mobilization** to scale up proven maternal health innovations.

CONCLUSION

The **Save the Mothers East Africa (STMEA) 2025 Conference** celebrated 20 years of impactful work in safe motherhood. It was noted that the **multidisciplinary, community-centered approach** is critical in saving the lives of mothers and babies. This call to action is directed at all stakeholders; educators, policymakers, civil society, journalists, faith leaders, and community members who must work collaboratively to address the pressing issue of **maternal and newborn mortality**. Maternal and newborn health should become **a national conversation**, with a concerted effort to commit resources toward ending preventable deaths and improving the quality of care for mothers and their newborns.

The conference ended with a prayer and delegates were ushered to lunch..





BREAKAWAY SESSION:

Advancing the Save the Mothers Network Association

Save the Mothers Network Think Tank

Following the main plenary of the Save the Mothers Annual Safe Motherhood Conference 2025, participants convened for the **Save the Mothers Network Association Think Tank meeting**, which served as the Network's Annual General Meeting (AGM). This session brought together Master of Public Health Leadership (MPHL) alumni, students, and key stakeholders to reflect on the progress made toward formalizing the **Save the Mothers Alumni Network Association**.

Progress Report by the Think Tank: Mr. Peter Olet, Chairperson of the Think Tank Committee, opened the session by highlighting the strides made since the establishment of the STM Think Tank by the STMEA Board during the 2024 conference. A team of 11 dedicated MPHL alumni, led by Mr. Olet, had voluntarily taken on the responsibility of laying the groundwork for the alumni association.

Mr. Olet articulated the **vision and purpose** of the Network: to improve maternal and child health outcomes in East Africa through collaborative action, knowledge exchange, and alumni engagement. He reaffirmed that maternal health remains central to the socio-economic and emotional well-being of communities and is a critical human rights issue.

He outlined the **objectives** of the STM Alumni Network, which include:

- Advocating for and supporting the mission of Save the Mothers East Africa (STMEA).
- Launching income-generating initiatives to sustain alumni and program activities.
- Promoting alumni-led change projects across the region.
- Establishing a dynamic global platform for alumni engagement.
- Fostering collaboration with like-minded national and international bodies.
- Creating spaces for knowledge sharing and innovation in safe motherhood practices.



The Think Tank's major accomplishments over the past year included the election of a 12-member **Steering Committee**, the hosting of more than ten strategic planning meetings, and the drafting of a **Network Constitution**, which is currently under legal review.

Mr. Olet concluded his presentation with a formal appeal to the STMEA Board and Uganda Christian University (UCU) leadership for:

- Technical guidance and governance support.
- Financial assistance for legal registration and operational expenses.
- Office space for the Network's secretariat.
- Alumni data to aid in effective mobilization.
- Linkages between alumni change projects and potential funders.

Remarks by Hon. Sylvia Ssinabulya, STMEA Board Chairperson

The session concluded with remarks from **Hon. Sylvia Ssinabulya**, Chairperson of the STMEA Board and herself an MPHL alumna. She expressed deep appreciation to the Think Tank and the working committee for their commitment, acknowledging the progress made since the Board entrusted them with the task of organizing the alumni body.

She paid tribute to the visionaries behind Save the Mothers and acknowledged current board members, including Pastor Josephine and Mrs. Kiwanuka, for their support. Hon. Ssinabulya also thanked the organizing teams of the 2025 conference.

Emphasizing the strategic importance of the alumni, she remarked that with over 500 graduates, the MPHL alumni represent a vast and powerful movement whose individual and collective contributions are central to the story of Save the Mothers. However, she noted that many alumni operate in isolation, and the Network presents an opportunity to consolidate efforts, amplify impact, and share success stories.

“We need the Alumni to document and elevate the change projects birthed through this program,” she said. “Each graduate completes a project. How do we build on this? Through this Network, we can visit each other’s projects, support one another, and carry the Save the Mothers message further.”

Way forward

She affirmed the Board’s commitment to supporting the Network, including a resolution to:

- Extend the Think Tank’s mandate by one year to allow for legal registration of the Network and plan elections.
- Invite alumni representatives to the next board meeting to formally present their proposals.
- Plan for the first formal alumni elections upon legal registration—potentially during the next conference or as a standalone event.

In closing, she thanked all who contributed to the conference’s success—presenters, organizers, and particularly those involved in the **renovation of Namirembe Hall**, all of whom were recognized with certificates of appreciation.

She concluded: “As alumni, we have a critical role to play in the governance and future of Save the Mothers. The journey has begun. Let us move forward together.”

Thank You

Special Thanks all SMCH2025 conference delegates, our partners, Uganda Christian University, MPHL students, alumni and faculty, Government of Uganda – Ministry of Health, Church of Uganda.

MBFHI partners: Mbale Regional Referral Hospital, Jinja Regional Referral Hospital, Tororo Hospital, Mityana Hospital, Nakaseke Hospital, Mubende Hospital, Mukono General Hospital, Kagando Hospital, Kawolo Hospital, Naggalama Hospital, Buikwe Hospital, Mildmay, and Boroboro Health Centre in Lira & Amai Community Hospital Lango Diocese, Mbale and North Mbale Dioceses

Partners: Care International Uganda, CDFU, Amref, UAP, JFood Ventures,
Funders:

1. Diane and Vic Reader Jones
2. Marta Jean and William Vandermarel
3. Nadine and Loren Ulrich
4. Cornelia (Corry) Morcos
5. Harrison Cooper Foundation
6. Congregation of the Sisters of St. Joseph in Canada
7. Bridgeway Foundation
8. Ross-Shire Foundation
9. Jeff Fund

Exhibitors: JFood Ventures, CCI, Mothers Heart Uganda, CDFU, UAP Old Mutual, Amref

Is your organization interested in collaborating with or sponsoring Save the Mothers? Contact Dr. Mushin Nsubuga at eadirector@savethemothers.org

No mother or child should be harmed or die due to preventable pregnancy and childbirth complications.

Stm2025 annual safe motherhood conference

<https://www.youtube.com/live/uZcbQu4LY4U?si=LsbiUEywdDnRm-EO>

Conference abstract booklet

<https://savethemothersea.org/media/attachments/2025/05/02/conference-booklet-.pdf>

Website: <https://savethemothersea.org/> Twitter: [@stm_EAfrica](https://twitter.com/stm_EAfrica)

PHOTO GALLERY







MODERATORS

The conference proceedings were ably planned and moderated by a distinguished team of professionals whose expertise and facilitation contributed significantly to the event’s success. These included:

- **Ms. Harriet Adong**, Director of Communications and Public Relations, *Uganda Christian University*
- **Dr. Martin Kizito**, Dean, School of Social Sciences, *Uganda Christian University*
- **Ms. Jackie Katana**, Executive Director, *3FHI*
- **Ms. Joan Mugenzi**, Lead Coach, *Imagine Me Africa*

Their skillful moderation ensured productive dialogue, time management, and seamless transitions throughout the day’s sessions.



APPENDICES

Appendix 1: Conference Program

SESSION ONE: 9.00 AM - 9.55 AM – STM Team Arrival. Registration. Tea. Networking. Entertainment by Michael Ouma Jazz band. Devotion - UCU Chaplaincy: 10:00 – 10:10 am Opening Remarks: STMEA Executive Director: 10:10 – 10:20 am Welcome remarks - Vice Chancellor: 10.20 -10.30 am Keynote Address: Dr Richard Mugahi, Commissioner Reproductive & Child Health-MoH: 10:30 – 10.45 am Entertainment: 10.45 AM – 10.55 am
SESSION TWO: 10:00 -10.55 AM MODERATOR: Harriet Adong- Director Comms & Public Relations UCU Devotion - UCU Chaplaincy: 10:00 – 10:10 am Opening Remarks: STMEA Executive Director: 10:10 – 10:20 am Welcome remarks - Vice Chancellor: 10.20 -10.30 am Keynote Address: Dr Richard Mugahi, Commissioner Reproductive & Child Health-MoH: 10:30 – 10.45 Aam Entertainment: 10.45 am – 10.55 am
SESSION THREE: 10:55 AM -11:40 AM Moderator: Dr Martin Kizito – Dean School of Social Sciences UCU Oral presentations: 10.55 – 11.30 am Discussions: 11.30 -11.40 am
SESSION FOUR: 11.40 AM -12:15 PM Moderator: Joan Mugenzi CEO – Imagine Me Africa Poster presentations & Exhibition: Led by STM Founders Poster Presentations: 11.40 – 11.55 am Exhibitions: 11.55 -12.05 pm Group photo: 12.05 pm-12.15 pm Entertainment – Michael Ouma plays in the background.
SESSION FIVE: 12.15 PM– 1.00 PM Moderator: Jackie Katana ED, 3FHI STMEA Chairperson invites the Guest of Honor: 12.15-12.20 pm Guest of honor speech: The Most Rev. Dr. Stephen Kaziimba Mugalu, Archbishop of Uganda: 12.20 -12.30 pm Recognitions, Awards: 12.30 pm -12.50 pm (Michael Ouma plays in the background) Way forward: Prof Florence Mirembe, Save the Mothers Founder 12.50-12.55 pm
LUNCH, & ENTERTAINMENT by Michael Ouma: 1.00 PM –2.30 pm Conference Ends 2.40 pm
2.40 PM – 3.20 PM – STM ANNUAL GENERAL MEETING

Appendix 2: Oral and Poster Presentations

Oral Presenters	Title
Dr Jimmy Odong -DHO, Amolatar	Strengthening Community-Health facility linkages to improve RMNCAH outcomes in Amolatar district, Uganda
Joselyn Nakyeeyune – MPH student	Depression among teenage mothers in Kira municipality, Wakiso district: Prevalence, Associated Factors and Coping Mechanisms
Prof Mary Ssonko	Capacity Building for Gender Equality and Social Inclusion in Uganda's gender-based violence and Reproductive Health Sector
Baguma Allen Komugisha	Bridging economic gaps for Safe Motherhood-Leveraging Social Entrepreneurship

Poster Presenters

Poster Presenters	Titles
Mushin Nsubuga, Save the Mothers	Assessment of Quality of Domiciliary postnatal care in the Elgon Region, Eastern Uganda
Alex Mokori	Born too soon: A Guide for coping with preterm Birth in Africa.
Allen Namutosi	Economic Empowerment for homebased and survival Caregivers at Bulegeni Child and youth Development Centre
Roselline Achola, Richard Mughai, Charles Olaro - MOH Uganda	Institutionalisation of self- care into health system; A role of Ministry of health.
Jude Okeria -TPO Uganda	Integrating mental health into maternal care; Lessons from MAMA PLUS Project West Nile Uganda.
Zaituni Nabateregga & Jacqueline Kobusingye – UCU	Labia Minora Elongation: A Silent Harmful Cultural norm among adolescent girls in Central Uganda
David Okeng -CDFU	Low Access and use of contraceptives among Adolescents
Agembi Stella -Tororo General Hospital -Uganda	One -Functionality of the high Dependency Unit in Tororo District Hospital
Lillian M Ssengooba ^{1*} , Ogwal Ronald, Alice Kabaruli Care, Kampala,Uganda	Sports to kick out teenage pregnancy: The eye universal project in Kamuli and Mayuge, Uganda
Jennifer Hetfield, Alicia Cortright, Maureen Nyaka -US & South Africa	Youth Ignite: A faith -Based Curriculum to improve sexual health among youth in Middleburg, South Africa.
Stella Nalubowa, Mama Rescue Project, stellanalubowa2@gmail.com , Tel: +25670196-8663	Pioneering Cloud-Based Solutions to Overcome Transportation Barriers, Enhance Maternal and Newborn Health in Rural Uganda





Thank you for attending...



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or be harmed due to preventable childbirth
complications