

# SAVE THE MOTHERS MATERNAL & CHILD HEALTH ANNUAL CONFERENCE

Friday, April 24, 2026, Nkoyoyo Hall,  
Uganda Christian University

## THEME:

**“Every Change Project Matters:  
Multidisciplinary Collaborations To  
Reach Every Woman & Every  
Newborn, Everywhere”**





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Friday, April 24, 2026, Nkoyoyo Hall,  
Uganda Christian University

Organizers: Save the Mothers and  
Uganda Christian University



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# Acronyms

|               |                                                               |
|---------------|---------------------------------------------------------------|
| <b>AOGU</b>   | Association of Obstetricians and Gynaecologists of Uganda     |
| <b>ANC</b>    | Antenatal Care                                                |
| <b>APHRC</b>  | AFrican Population and Health Research Center                 |
| <b>AGYW</b>   | Adolescent Girls and Young Women                              |
| <b>BPCR</b>   | Birth Preparedness and Complication Readiness                 |
| <b>CBO</b>    | Community Based Organisation                                  |
| <b>CDFU</b>   | Communication For Development Foundation Uganda               |
| <b>CCI</b>    | Communities For Childbirth International                      |
| <b>CHWs</b>   | Community Health Workers                                      |
| <b>DHIS2</b>  | District Health InFormation Software 2                        |
| <b>DHO</b>    | District Health Office                                        |
| <b>LPHS</b>   | Local Partner Health Service                                  |
| <b>MCH</b>    | Maternal and Child Health                                     |
| <b>MBFHI</b>  | Mother Baby Friendly Hospital Initiative                      |
| <b>MEC</b>    | Medical Eligibility Criteria                                  |
| <b>MoH</b>    | Ministry of Health                                            |
| <b>PMTCT</b>  | Prevention of Mother to Child Transmission                    |
| <b>PNC</b>    | Postnatal Care                                                |
| <b>PrEP</b>   | Pre-Exposure Prophylaxis                                      |
| <b>PHC</b>    | Primary Health Care                                           |
| <b>RMNCAH</b> | Reproductive, Maternal, Newborn, Child, and Adolescent Health |
| <b>SRH</b>    | Sexual and Reproductive Health                                |
| <b>STM</b>    | Save the Mothers                                              |
| <b>UDHS</b>   | Uganda Demographic and Health Survey                          |
| <b>UNFPA</b>  | United Nations Population Fund                                |
| <b>UCU</b>    | Uganda Christian University                                   |
| <b>WHO</b>    | World Health Organisation                                     |

# Acknowledgements

**S**AVE the Mothers East Africa (STM EA) extends its sincere appreciation to all individuals and institutions whose commitment, expertise, and collaboration contributed to the success of the **STM2026 Annual Maternal and Child Health Conference**.

We are grateFul to the conference delegates, guest of honour, keynote speakers, presenters, moderators, panellists, exhibitors, development partners, implementing partners, and volunteers whose active participation enriched the conference and Fostered meaningFul dialogue on improving maternal, newborn, child, and adolescent health.

STM EA expresses its gratitude to **Uganda Christian University (UCU)** For its continued institutional support and commitment to advancing safe motherhood. We especially acknowledge the Faculty of Public Health, Nursing and MidwiFery, our host Faculty For the support in promoting multidisciplinary education, research, innovation, and community engagement to improve maternal and newborn health outcomes.

We also extend our appreciation to the Government of Uganda, particularly the Ministry of Health; the Church of Uganda; MPHL Faculty, students, alumni and the health Facilities, districts, and partners supporting the Mother Baby Friendly Hospital Initiative (MBFHI).

Special appreciation is extended to STM2026 Conference partners whose collaboration and support made the conference possible:

- Ministry of Health, Uganda
- PATH Uganda
- AmreF Health AFrica – Uganda
- Communication For Development Foundation Uganda (CDFU)
- Marie Stopes Uganda
- Centenary Bank
- Clinton Health Access Initiative (CHAI)
- TERREWODE and TERREWODE Women's Community Hospital
- Uganda AIDS Commission
- Raising Hope International Friends
- 3FHI
- Hand in Hand Uganda
- Mothers Heart Uganda
- Bbanga AFaayo Initiative Uganda
- ZOE Girls
- JF Foods
- School of Social Sciences, UCU
- Faculty of Agriculture, UCU
- School of Business, UCU
- Tom Etii – MPHL Class of 2016
- Nathan Chambula – MPHL Class of 2025

Your partnership, technical expertise, Financial support, and shared commitment to advancing safe motherhood made STM2026 a success.

Finally, **STM EA sincerely thanks the STM2026 Conference Organizing Committee, the Save the Mothers East AFrica Secretariat**, Uganda Christian University staff, student volunteers, and all those who worked behind the scenes to ensure the successful planning and execution of the conference.





*Dr Mushin Nsubuga ED STM East Africa, Prof Aaron Mushenyezi, Hon Margaret Muhanga, & Hon Beatrice Akello Akori*

## Conference Abstracts Committee

**S**TM acknowledges the dedicated Abstracts Committee for their critical role in soliciting, reviewing, and refining submitted abstracts. The Committee ensured a rigorous review process, resulting in high-quality submissions. Prof. Robert Basaza – Chairperson, Josephine Namyalo – Secretary, Teopista Agutu – Alternate Secretary, Emmanuel Otieno – Alternate Secretary, Dr. Mushin Nsubuga – Member, Dr. Godwin Awio – Member, Dr. Edward Mukooza – Member, Dr. Jean Chamberlain – Member and Ms. Jacqueline Kobusingye – Member

## Conference Moderation

**T**HE conference proceedings were moderated by Ms. Harriet Adong, Director of Communication and Public Relations at Uganda Christian University; Ms. Joan Mugenzi, Lead Coach at Imagine Me Africa; and Dr. Jonathan Tumwebaze, Dean of the School of Social Sciences at Uganda Christian University.



*Ms. Harriet Adong*



*Ms. Joan Mugenzi*



*Dr. Jonathan Tumwebaze,*

## Executive Summary

**O**N 24 April 2026, Save the Mothers East Africa (STMEA), in partnership with Uganda Christian University (UCU), convened the Annual Maternal and Child Health Conference 2026 at Nkoyoyo Hall, UCU, Mukono. The conference, held under the theme “Every Change Project Matters: Multidisciplinary Collaborations to Reach Every Woman and Every Newborn, Everywhere,” brought together over 200 participants from government, academia, health professions, civil society, development partners, faith-based organizations, and community structures.

The event provided a platform for sharing evidence, innovations, and community-based interventions aimed at improving maternal, newborn, child, and adolescent health outcomes. The conference also highlighted the ongoing impact of the Master of Public Health Leadership (MPHL) program, with several alumni presenting research and change projects implemented within their workplaces and communities. Their participation demonstrated how investments in leadership development continue to translate into evidence-informed practice and improved maternal and newborn health outcomes.

Minister of State for Health (Primary Health Care) Hon Margaret Muhanga’s participation, alongside national and international experts, university leadership and senior policymakers reinforced maternal and newborn health as a national development priority and a key area of multisectoral collaboration. This was further highlighted by the participation of Hon. Beatrice Akori Akello, Minister of State for Economic Monitoring (Office of the President) and an alumna of the Master of Public Health Leadership (MPHL) program, underscoring the role of multidisciplinary sectors in MCH.

The keynote address was delivered by Prof. Jerome Kabakyenga, Founding Director of the Institute of Maternal, Newborn and Child Health at Mbarara University of Science and Technology (MUST). The conference emphasized that every intervention whether a small-scale community initiative or a large system innovation, contributes meaningfully to improving health outcomes.

Across keynote addresses, panel discussions, oral and poster presentations, exhibitions, and plenary engagements, strong consensus emerged on the importance of multisectoral collaboration, community engagement, and the integration of evidence-based approaches in strengthening health systems. Participants highlighted the importance of strengthening referral systems, improving respectful and dignified maternity care, and ensuring continuity of care across the life course.

The role of universities and training institutions in producing multidisciplinary leaders and change agents was strongly emphasized, particularly through experiential learning and community-based education models such as the Master of Public Health Leadership (MPHL) program and the Mother Baby Friendly Hospital Initiative (MBFHI).

Presentations and exhibitions showcased locally driven innovations, including emergency referral systems, immunization outreach strategies, menstrual health interventions, adolescent-friendly services, digital health solutions, and community based behaviour change initiatives. These demonstrated the effectiveness of practical, low-cost, and context-specific “change projects” in addressing persistent maternal and newborn health challenges. The conference further underscored the importance of data-driven decision-making, innovation, and sustainability in scaling effective interventions.

The STM2026 Conference successfully created a dynamic platform for learning, collaboration, reflection and reaffirming that sustained multisectoral partnerships, community participation, and evidence informed action are essential to achieving the shared goal of ensuring that no woman or newborn dies from preventable causes.

Looking ahead, Save The Mothers and Uganda Christian University will build on the conference momentum to advance selected research and change projects beyond conference presentation to implementation and scale. This Conference-to-Implementation approach reflects a shared commitment to translating evidence into action for improvements in maternal and child health.

## Introduction

**M**ATERNAL, newborn, and child health (MNCH) remains a major global public health challenge, particularly in low- and middle-income countries, where preventable maternal and newborn deaths continue to occur despite global commitments under Sustainable Development Goal 3 (SDG 3). Although progress has been made, many countries remain off track to achieve the 2030 targets for maternal, newborn, and child survival. The majority of maternal deaths occur due to preventable causes that could be addressed through timely access to quality, respectful, and equitable health services across the continuum of care.

In Uganda and the broader East African region, these challenges are compounded by health system constraints, inequities in access, and gaps in leadership, coordination, and community engagement. Addressing them requires strengthened health systems, multidisciplinary collaboration, and sustained investment in leadership and innovation.

Save the Mothers (STM) contributes to this agenda through leadership development, health systems strengthening, and community engagement. Its core interventions include the Master of Public Health Leadership (MPHL) program offered in collaboration with Uganda Christian University; it equips multidisciplinary professionals to lead change in maternal and newborn health within their sectors

and communities. The Mother Baby Friendly Hospital Initiative (MBFHI) implemented in 15 Facilities across Uganda strengthens health Facilities to deliver safe, respectful, and high-quality maternity and newborn care through training, mentorship, and quality improvement.

The Annual Maternal and Child health Conference serves as a platform for knowledge exchange, research dissemination, policy dialogue, sharing of innovative change projects that contribute to improved maternal, newborn, child, and adolescent health outcomes. By bringing together stakeholders multidisciplinary the conference promotes collaboration and collective action to address maternal and child health challenges.



## Conference objectives

THE conference was guided by the following objectives:

1. **Showcase Maternal and Newborn Health change projects:** Highlight interventions from health facilities, communities, NGOs, MPHL alumni, and partner organizations.
2. **Facilitate Stakeholder Dialogue:** Strengthen awareness of maternal and newborn health challenges and opportunities through discussions and knowledge exchange.
3. **Promote Evidence-Based Practices and Innovations:** Share research, and innovative interventions that improve maternal and newborn outcomes.
4. **Document Practical Recommendations:** Capture actionable recommendations to inform maternal and newborn health programs and policies.
5. **Recognize Leadership and Innovation:** Celebrate individuals and teams demonstrating impact in maternal and newborn health.

# Themes and Sub-themes

**C**ONFERENCE theme: *Every Change Project Matters: Multidisciplinary Collaborations to Reach Every Woman and Every Newborn, Everywhere,*

## Sub-Themes For Abstract Submission

- 1. Every Change Project Matters: Small Actions, Scalable Impact:** Community & health Facility-based change projects demonstrating practical, low cost solutions that improve access, quality, or experience of care, and lessons From small, local and emerging initiatives.
- 2. Working Together Across Sectors to Save Mothers and Newborns:** Partnerships across health, transport, education, social services, Faith, cultural institutions and communities that strengthen reFerral systems, access to care and continuity of MCH services.
- 3. Equity in action: Reaching Every Woman and Every Newborn, Everywhere:** Approaches that reach hard-to reach, vulnerable and marginalized populations including rural, urban, poor, reFugee, adolescents, and persons with disabilities.
- 4. From Home to Health Facility:** Collaborative Solutions to Reduce Delays: Integrated community-health Facility strategies that address decision making, access and quality of care across the three delays including reFerral systems and emergency preparedness as well as continuity of care.

- 5. RespectFul, Dignified, and Quality Care For Mothers and Newborns:** Initiatives that promote respectFul maternity and newborn care.
- 6. Strengthening People and Systems That Deliver change:** Health workForce support, leadership, mentorship and team-based approaches that strengthen systems, logistics, service integration and service delivery.
- 7. Innovation, Data, and Learning That Drive Change:** Research, implementation learning, appropriate technology & digital health solutions, and data-inFomed decision-making that drive low cost and high impact improvement in MCH.
- 8. Leadership, Policy, and Financing For Sustainable Safe Motherhood:** Leadership, governance, policy alignment, Financing and accountability mechanisms that sustain, scale and institutionalize eFFective change projects through advocacy, mentorship and peer learning

Throughout the conference, the diverse range of sessions and interactive engagements reFlected the conference theme and sub-themes which collectively demonstrated the importance of community engagement, multidisciplinary collaboration, equity-Focused interventions, health systems strengthening, innovation, and evidence-inFomed approaches to improving maternal, child health outcomes.



*Prof. Robert Basaza, Chairperson of the Abstract Committee, and Prof. Jerome Kabakyenga in discussion with a conference delegate during the STM2026 Conference.*

# Opening Session

**Prayer & Devotion:**  
**Rev. Dr Richard Mulindwa**



**T**HE conference officially commenced with an opening prayer and devotion led by Rev. Dr. Richard Mulindwa, Church Relations Manager at Uganda Christian University and MPHIL alumnus. Drawing From John 10:10 and Proverbs 31:25, Rev. Mulindwa emphasized the moral and spiritual responsibility of safeguarding maternal and newborn health, noting that, *“too many mothers still Face preventable risks in bringing liFe into the world; that is not just a health issue, it is a moral and spiritual concern.”* He Further stressed that mothers must be “clothed with strength and dignity” before, during, and after childbirth.

# Guest Of Honour Address

**Hon. Margaret Muhanga –**  
**Minister of State For Health**  
**(Primary Health Care)**

**T**HE Guest of Honour, Hon. Margaret Muhanga, expressed appreciation to Uganda Christian University, Save the Mothers and all partners For organizing the conference, noting that safe motherhood remains a shared national priority that unites government, academia, and development partners in a common mission.

She emphasized that safe motherhood is central to Uganda's health and development agenda, underscoring that childbirth remains a critical and high-risk moment in the liFe course that demands a well-Functioning health system. She highlighted the central role of mothers in sustaining liFe and national wellbeing, noting the urgency of protecting both mothers and newborns through timely, skilled, and respectFul care.



Reinforcing the importance of collective responsibility, she stressed that while government continues to expand and equip health facilities across the country, lasting impact depends on shared action across all sectors and levels of society. She noted that “We can have strong health policies, but real impact happens when every level of society takes responsibility for action,” calling for stronger alignment between policy, implementation, and community engagement.

Hon. Muhanga further linked maternal health to national development, observing that healthy mothers contribute to healthy children, strong families, and ultimately a productive population.

She called on researchers, communities, health workers, and leaders to actively contribute to evidence generation, service delivery, and practical implementation of health interventions. Universities, she noted, must remain at the forefront of research, innovation, and leadership development, while communities play an essential role as active participants in improving their own health outcomes.

She also reaffirmed government commitment to partnerships with institutions such as Save the Mothers and Uganda Christian University particularly in advancing initiatives that strengthen maternal and newborn health systems. Highlighting the importance of Save the Mothers MPHL and MBFHI change projects, Hon Muhanga noted that meaningful transformation often begins at community level and scales through collaboration and shared learning.

In conclusion, Hon. Muhanga called for strengthened collaboration, accountability, and practical action across all sectors, urging participants to translate dialogue into measurable improvements in maternal and newborn health outcomes across Uganda.

**Opening Address by  
Prof. Aaron Mushengyezi**  
Vice Chancellor, Uganda Christian University



**I**N his opening address, Prof. Aaron Mushengyezi welcomed delegates, government leaders, development partners, researchers, students, and alumni to Uganda Christian University and the STM2026 Conference. He commended Save the Mothers for its continued commitment to strengthening leadership in maternal and newborn health through multidisciplinary collaboration.

Prof. Mushengyezi emphasized that maternal and child health remains central to sustainable development and human dignity, noting that every mother deserves safe childbirth and every child deserves a healthy start to life. He stressed that safe motherhood is not only a medical issue, but also a leadership, systems, and societal responsibility requiring collaboration across sectors.

Highlighting the role of universities, Prof. Mushengyezi noted that institutions of higher learning must go beyond the classroom by training multidisciplinary leaders, generating research, and building partnerships that address real community challenges. He referenced Uganda Christian University's collaboration with Save the Mothers through

the Master of Public Health Leadership (MPHL) program and the Mother Baby Friendly Hospital Initiative (MBFHI) implemented in 15 hospitals across Uganda to promote safe, respectful, and dignified childbirth. He reaffirmed the university's partnership with Save the Mothers and commitment to promote safe motherhood.

Prof. Mushengyezi concluded by calling upon participants to move beyond dialogue to action through stronger partnerships, innovation, and evidence-based solutions, reminding delegates that “through leadership, partnership, and commitment, we can ensure that no woman dies while giving life and that every child has the opportunity to survive and thrive.

**Remarks by  
Dr. Mushin Nsubuga**

Executive Director, Save the Mothers East Africa

**D**R. Mushin Nsubuga appreciated the Guest of Honour, keynote speaker, university leadership, board members, partners, and the Ministry of Health for their continued collaboration and support towards safe motherhood initiatives.

Dr. Nsubuga emphasized that every MPHL alumnus represents a “change project” within their community or sphere of influence. He



highlighted the impact of initiatives such as the Mother Baby Friendly Hospital Initiative (MBFHI), which promotes safe, respectful, and dignified childbirth care in health facilities including Mbale Regional Referral Hospital, Mukono Hospital, and Amai Community Hospital in Amolatar. He noted that improving maternal and newborn health requires collective action, innovation, and sustained partnerships across sectors.

He concluded by encouraging participants to move beyond discussion to implementation, reminding stakeholders that every contribution matters in reaching every woman and every newborn everywhere.



**Remarks by  
Dr. Elizabeth Ekong**

Dean, Faculty of Public Health, Nursing and Midwifery, Uganda Christian University

**D**r. Elizabeth Ekong commended Save the Mothers visionaries and noted its contribution to improving maternal and child health outcomes. She encouraged participants to actively engage, share experiences, and strengthen collaborations that will create lasting impact for mothers and newborns across the region.

## Remarks By The Chairperson, STMEA Board



### Hon. Sylvia Ssinabulya

**T**HE Chairperson Save the Mothers East Africa (STMEA) Board reaffirmed the organization's commitment to advancing maternal and newborn health.

She reflected on the journey of Save the Mothers as long but impactful, emphasizing its three core pillars: capacity building through the Master of Public Health Leadership (MPHL) program; health system strengthening through partnerships, particularly the Mother Baby Friendly Hospital Initiative (MBFHI); and community engagement through outreach initiatives.

Hon Ssinabulya noted that progress in reducing maternal mortality is a result of sustained collaboration with government and partners, stating that "when we work together with government and align policy, practice, and community action, real and measurable change becomes possible." She acknowledged government leadership in these gains and called for continued investment and stronger multisectoral collaboration to further reduce preventable maternal and newborn deaths.

She further emphasized the importance of a multisectoral approach, bringing together government, academia, health professionals, social scientists, and community leaders to ensure no woman or newborn is left behind. She also recognized MPHL alumni as key change agents extending the program's impact into communities.

STM Board Chair Hon. Ssinabulya also expressed appreciation to the STM Tri-Board: STM Canada, STM USA, and STM East Africa for their continued guidance and partnership in advancing the STM vision. Hon. Ssinabulya concluded by reaffirming STMEA's commitment to strategic growth, innovation, and partnerships, emphasizing that every project and collaboration matters in reaching every woman and every newborn with quality care.

## Keynote Address

### Prof. Jerome Kabakyenga

*Department of Community Health / Founding Director, Institute of Maternal, Newborn and Child Health, Mbarara University of Science and Technology (MUST)*

**T**he keynote address was delivered by Prof. Jerome Kabakyenga, who reflected on his long association with the MPHL program as an external examiner and commended its growth.

He focused on collaborative cross-sector engagement in strengthening health systems to reach every woman and every newborn. He emphasized that effective health systems require coordinated action between health, education, community development, and government sectors.

Prof. Jerome Kabakyenga highlighted community-based education, noting that training students in real community contexts enables them to understand social determinants of health and design practical solutions. He also underscored the critical role of Community Health Workers in extending services and improving outcomes when well supported.

He emphasized the continuum of care across pregnancy, childbirth, infancy, childhood, and adolescence, delivered at household, community, and facility levels. Strengthening health systems, he noted, requires investment in workforce capacity, infrastructure, and district systems, supported by strong partnerships.

On data and research, Prof. Jerome Kabakyenga stressed the importance of data collection, monitoring, and evaluation to understand challenges and improve programs. He noted that "without data, we are navigating without a compass," and highlighted constraints including policy limitations in areas such as adolescent health, the impact of COVID-19 on implementation, and limited resources affecting program scale-up.



He concluded that sustainable maternal and newborn health outcomes depend on multisectoral collaboration, effective use of data, and long-term commitment at all levels.

## Panel Discussion



*Mr Peter Olet, Dr Elizabeth Ekong, Dr Eve Nakabembe & Dr Betty Mirembe*

**A** DYNAMIC panel discussion highlighted the importance of partnerships, co-creation, and the evolving role of multisectoral actors in addressing safe motherhood challenges. The panel comprised Mr. Peter Olet (MPHL alumnus and Administrator, Timagi Health Centre), Dr. Eve Nakabembe (Senior Consultant Obstetrician & Gynaecologist/MBFHI), Dr. Elizabeth Ekong (Dean, Faculty of Nursing and Midwifery, UCU), and Dr. Betty Mirembe (Country Director, PATH).

The discussion emphasized that improving maternal and newborn health requires collective action across sectors and disciplines. Speakers underscored that every individual has a role to play in improving community health outcomes, with universities and training institutions called upon to nurture students as change agents who can return to their communities with practical solutions.

The panel highlighted the importance of **co-creation in education and innovation**, where teachers and students jointly identify challenges and develop solutions grounded in community realities. Universities were encouraged to move beyond traditional knowledge transfer and instead act as facilitators, coaches, and mentors for problem-solving.

Mental wellbeing was also noted as a critical foundation for effective decision-making, leadership, and service delivery in health and education systems.

Mr. Peter Olet shared experiences from Oyam District, demonstrating how community engagement can drive meaningful change. He emphasized that every community possesses inherent strengths that can be leveraged for transformation, using the analogy of communities as “passengers in a bus” requiring effective leadership to reach their destination.

Dr. Eve Nakabembe reflected on the personal and professional significance of maternal health, emphasizing that every safe birth represents a life preserved and a future secured. She called for renewed commitment to “service above self” in improving maternal outcomes.

Dr. Elizabeth Ekong reinforced the shift in academic roles from knowledge transmission to co-creation of knowledge, while Dr. Betty Mirembe stressed the importance of partnerships, community involvement, data-driven decision-making, affordability, and scalability in sustaining health innovations.

In conclusion, the panel reaffirmed that every change project matters and that sustainable improvements in maternal and newborn health depend on collaboration, innovation, and strong leadership across all levels.

## Oral Presentations and Discussions

**T**HE conference featured oral presentations showcasing evidence-based innovations, community change projects, and multidisciplinary approaches aimed at improving maternal, newborn, child, and adolescent health outcomes across Uganda.



### **Sexual and Reproductive Health Equity and Migrant Homeless Urban Youth in Uganda: Insights From Recent Evidence**

*Presented by Mulekya Francis Bwambale (HoD),  
Uganda Christian University*

The presenter shared findings on sexual and reproductive health (SRH) challenges among migrant and homeless urban youth in Kampala. Based on a systematic review of literature from Google Scholar, PubMed, and Scopus, the study found that many migrant youth from rural areas face major barriers in accessing SRH services.

Key challenges included stigma, mistrust of health workers, misinformation, mobility, and unstable living conditions. Homeless youth were also more exposed to exploitation, unsafe sexual practices, and lack of social protection. The presentation emphasized the need for youth-friendly and mobile SRH services, alongside youth-led interventions and inclusive policies to reduce inequities. It concluded that no young person should be left behind in access to health services.



### **From Home to Health Facility: Collaborative Strategies to Reduce Maternal and Newborn Care Delays in Tororo District**

**by Connie Bwire, MPHL alumna**

*Presented by Patricia Cheptook MPHL student*

**T**HE presenter shared findings from a six-month intervention aimed at reducing the three delays in maternal and newborn care. The project engaged community members, cultural and religious leaders, VHTs, pregnant women, spouses, and health workers to improve birth preparedness and strengthen referral systems.

Key interventions included community dialogues, improved referral coordination, introduction of communication phones for facilities, and a fuel pool system supported through PHC funds. The intervention significantly improved communication between health facilities and resulted in timely referral of approximately 90% of emergency maternal cases. The presenter noted that early intervention improved outcomes and that the model is low-cost and scalable across districts.



### **Advancing Child Survival Through Immunization: Evidence From Local Civil Society Partnerships**

*Presented by Deogratias Agaba,  
PATH / MPHL Alumnus*

**T**HE presentation highlighted a PATH-supported initiative under Gavi's Equity Accelerator Fund aimed at improving immunization coverage in underserved communities. Working with the Uganda National EPI programme and civil society organizations, the project identified zero-dose children and

expanded outreach through mobile vaccination services.

The initiative improved immunization coverage and strengthened community-health system linkages. However, challenges remain in ensuring completion of vaccinations in the second year of life. The presenter emphasized that strong community partnerships are essential in reaching underserved populations and ensuring that no child is left behind.



**Dignity in Every Cycle: Inclusive Menstrual Health For Girls with Special Needs in Mukono Municipality**

*Presented by Gorreti Aanyu,  
Hand in Hand Uganda / Mukono Special Needs Education Centre /  
MPHL Alumna*

**T**HE presenter shared an inclusive menstrual health intervention targeting girls with special needs in Mukono Municipality. The project aimed to improve menstrual hygiene management, dignity, and school retention through education, reusable sanitary pads, and skills training on pad-making.

Teachers, caregivers, parents, community leaders, and sign language instructors supported implementation to ensure inclusivity. The project reached over 2,900 girls with menstrual health education, distributed reusable sanitary pads to more than 2,000 girls, and trained about 1,000 girls in reusable pad production. The intervention reduced stigma, improved school attendance, and enhanced dignity among girls with special needs.

**Discussions and Participant Reflections**

Participants discussed key issues emerging from the presentations, particularly sustainability, inclusion, and service delivery. Questions were raised on the sustainability of the Fuel pool system in Tororo District. It was clarified that the system is supported through pooled Primary Health Care Funds with accountability mechanisms ensuring continuity.

Participants also highlighted communication barriers faced by persons with hearing impairments in accessing health services, particularly the limited availability of sign language interpreters. A strong recommendation was made for investment in sign language training to promote equitable and dignified care.

On immunization, clarification was provided that while vaccinated children may still contract diseases such as measles, vaccination significantly reduces severity, complications, and mortality.

The oral presentations demonstrated how locally led innovations and multidisciplinary collaborations continue to strengthen health systems and improve maternal, newborn, child, and adolescent health outcomes across Uganda.

# Poster Presentations



*Medi poster, 3FHI, Amref poster,*

**B**UILDING on the oral presentations and panel discussions, the conference also featured a poster presentations showcasing multidisciplinary innovations, operational research, and community-based interventions aimed at improving maternal, newborn, child, and adolescent health outcomes. The poster sessions provided an important platform for knowledge exchange, peer learning, and dissemination of evidence-based practices from academia, civil society, local governments, and development partners.

The presentations reflected the conference theme by demonstrating how diverse “change projects” are contributing to improved health systems, community engagement, equity, and service delivery across Uganda. Key thematic areas included reproductive, maternal, newborn, child, and adolescent health; immunization; adolescent wellbeing; health systems strengthening; digital health innovations; nutrition; economic empowerment; menstrual health; refugee health; emergency referral systems; and community-based approaches to safe motherhood.

Several presentations highlighted innovative approaches to addressing inequities among

vulnerable populations, including migrant youth, adolescent mothers, refugees, girls with special needs, and women in hard-to-reach communities. Others focused on strengthening referral systems, improving antenatal care attendance, increasing immunization coverage, promoting respectful maternity care, and leveraging technology, machine learning, and digital monitoring to improve maternal and child health outcomes.

Notable presentations included research on family planning interventions among couples in Uganda; urban health strategies for improving reproductive, maternal, newborn, child, and adolescent health services; community midwifery collaborations to reduce maternal care delays in Northern Uganda; maternal health information-seeking behaviours among pregnant women; and data-driven approaches for identifying zero-dose and under-immunized children.

Additional presentations explored inclusive menstrual health programming for girls with special needs, peer-led antenatal care models for adolescent mothers, community health insurance initiatives, behaviour change communication interventions in refugee

settlements, maternal emergency transport innovations, and entrepreneurship-based empowerment initiatives For women and adolescent girls.

The poster presentations Further demonstrated the growing role of multidisciplinary partnerships in generating locally relevant

solutions and scaling community-driven innovations. They also highlighted the contribution of MPHIL alumni, researchers, civil society organizations, local governments, and universities in advancing evidence-informed approaches to maternal and child health improvement across Uganda.



## Exhibitions



**T**HE conference also featured an exhibition segment where organizations and institutions showcased innovative programs, products, research initiatives, and community-based interventions contributing to the advancement of safe motherhood and improved maternal, newborn, and child health outcomes. The exhibitions provided participants with opportunities For networking, knowledge sharing, partnership building, and learning From practical Field experiences.

Exhibitors highlighted a wide range of initiatives including maternal and child health advocacy, community engagement approaches, emergency referral systems, reproductive health services, nutrition and livelihood interventions, gender-transformative programming, and health education innovations aligned with the conference theme.

Participating organizations included Communication For Development Foundation Uganda (CDFU), Mother's Heart Uganda, Save the Mothers East Africa, AMREF Health Africa, Babies and Mothers Alive, Communities For Childbirth International (CCI), JFoods, Marie Stopes Uganda, Rural Community Development Organization (RCDO), HEROES For Gender Transformative Action, the UCU School of Social Sciences, and the Faculty of Public Health, Nursing and Midwifery at Uganda Christian University.

The exhibition sessions Further demonstrated the importance of multidisciplinary collaboration and community-centered innovations in strengthening health systems and reaching every woman and every newborn with quality care and support services.

## Closing Ceremony



*Candlelight tribute honoring mothers and babies lost & renewing a shared commitment to act led by Prof J Kabakyenga keynote speaker, Dr J Chamberlain STM Founder & Dr BaiFa Arwinyo of Mbale Regional Referral Hospital.*

**T**HE conference concluded with a reflective candlelight tribute led by Dr. Jean Chamberlain, Founding Member of Save the Mothers, alongside Prof. Jerome Kabakyenga, the keynote speaker, and Dr. BaiFa Arwinyo of Mbale Regional Referral Hospital. The ceremony honoured mothers and babies who have lost their lives, particularly from preventable causes, while renewing participants' shared commitment to advancing safe motherhood.

In her remarks, Dr. Chamberlain appreciated participants, partners, and organizers for their continued dedication to improving maternal and child health outcomes. She acknowledged the significant progress made over the years in reducing maternal and newborn deaths, while emphasizing that much more remains to be done both in Uganda and globally. She reminded participants that maternal and newborn

mortality continues to affect families across the world, underscoring the need for sustained collaboration, innovation, and commitment.

A solemn moment of reflection was observed in remembrance of mothers and babies who have died, serving as a call to action for participants to strengthen efforts towards protecting future generations. During the ceremony, participants lit candles as symbols of remembrance, hope, solidarity, and renewed commitment to ensuring that no woman or newborn dies from preventable causes.

The ceremony concluded with a message of hope and collective responsibility, encouraging all stakeholders to continue championing safe, respectful, and equitable maternal and newborn healthcare within their communities and institutions.

## Conference Evaluation and Participant Feedback

**P**ARTICIPANTS completed a post-conference evaluation assessing the relevance, organization, quality, and overall experience of the STM2026 Conference. Overall feedback indicated high satisfaction with the conference content, keynote address, oral and poster presentations, venue, organization, and networking opportunities.

Participants described the conference as informative, well-organized, and highly relevant to current maternal and child health challenges. The keynote, presentations, and community-based "change projects" were particularly appreciated for showcasing practical, evidence-based solutions. Multidisciplinary engagement and networking opportunities were also highly valued, alongside the strong alignment of the conference theme with real community health needs.

Positive remarks were made on time management, hospitality, and the quality of discussions, as well as the opportunity to learn from alumni, practitioners, researchers, and development partners.

Key recommendations for future conferences included increasing student participation, strengthening inclusion through sign language interpretation,

allowing more time for interaction, enhancing partner visibility, expanding community testimonies, improving publicity, and making participation more affordable for students and abstract presenters.

Overall, participants affirmed that the conference provided an informative, thought-provoking platform that strengthened learning, collaboration, and commitment to advancing maternal and newborn health.



# Recommendations

## 1. Strengthen Multisectoral and Multidisciplinary Collaboration For Safe Motherhood

Stakeholders should deepen collaboration between government, health institutions, universities, civil society, communities, and development partners to ensure coordinated and sustained action toward improving maternal, newborn, child, and adolescent health outcomes.

## 2. Scale and Institutionalize Community-Based “Change Projects”

Successful community and Facility-based change projects should be documented, supported, and scaled within health systems and training institutions as practical models for improving maternal and newborn health outcomes.

## 3. Enhance Equity and Inclusion in Maternal and Newborn Health Services

Programs and policies should prioritize reaching vulnerable and underserved populations, including adolescents, migrant youth, refugees, persons with disabilities, and communities in hard-to-reach areas through tailored, accessible, and youth-friendly services.

## 4. Strengthen Community Engagement and Participation in Health Systems

Communities should be actively engaged

as partners in designing, implementing, and evaluating maternal and newborn health interventions, including strengthening the role of community structures such as VHTs, local leaders, and civil society actors.

## 5. Invest in Leadership Development and Transformative Education

Universities and training institutions should strengthen multidisciplinary leadership training, community-based education, and experiential learning to equip graduates with practical problem-solving skills and the ability to drive and sustain community-based change in maternal and newborn health.

## 6. Strengthen Data Use, Innovation, and Evidence-Based Decision-Making

Stakeholders should strengthen systems for data collection, monitoring, learning, and digital innovation to guide evidence-based decision-making and support the scale-up, effectiveness, and sustainability of maternal and newborn health interventions.

## 7. Strengthen Health Systems, Referral Networks, and Continuum of Care

Efforts should focus on improving coordination across community and Facility levels, strengthening referral systems, and ensuring continuity of care across pregnancy, childbirth, infancy, childhood, and adolescence.

# Conclusion

**T**HE STM2026 Annual Maternal and Child Health Conference achieved its objectives by providing a dynamic platform for sharing evidence, innovations, and community-based interventions aimed at improving maternal, newborn, child, and adolescent health outcomes. The conference reaffirmed that every change project—whether small or large—contributes meaningfully to strengthening health systems when grounded in collaboration, evidence, and community engagement.

Across the discussions, presentations, and exhibitions, a strong consensus emerged on the critical importance of multisectoral partnerships, university-led leadership development, and community participation in addressing persistent maternal and newborn health challenges. The conference further reinforced a shared commitment among stakeholders to accelerate efforts toward ensuring that no woman or newborn dies from preventable causes, and that every mother and child receives dignified, safe, and quality care.

The evidence shared throughout the conference also demonstrated that sustainable progress in safe motherhood depends on integrated action across sectors, equitable access to quality services, and the effective translation of knowledge into practical, context-specific solutions.

The conference marked not only a platform for knowledge sharing but also the beginning of a renewed commitment by Save the Mothers East Africa and Uganda Christian University to move promising research and change projects from presentation to practice. Through a structured Conference-to-Implementation initiative, the two institutions will support the adoption, scale-up, and sustainability of high-impact interventions that improve maternal, newborn, child, and adolescent



*Dr. Betty Mirembe, Path Uganda Country Director and Dr. Nsubuga Mushin Executive Director STMEA*



**SIGN LANGUAGE:** One of the learners from Hand in Hand Uganda, who is deaf, presented alongside Ms. Gorreti Aanyu, an MPH alumna. She shared her experience of being empowered through skills training in the production of reusable sanitary pads and menstrual health management. The initiative was started by Ms. Aanyu in her role at Hand in Hand Uganda. Director STMEA



# APPENDIX 1: Conference Program

## SESSION 1: 8:30 -9:00 AM:

Arrival, Registration, Tea & Entertainment by Jose Sax: STMEA team

## SESSION 2: 9:00 – 9:25 AM:

**Opening Session /Moderator:** Harriet Adong, Director Communication & PR UCU

- Welcome & Housekeeping: Harriet Adong

- Opening Prayer & Devotion: Rev. Canon Eng Paul Ssembiro

## SESSION 3: 9:25 – 10:10 AM: Welcome Adress & Panel Discussion

**Moderator Dr Joan Mugenzi – Lead Coach Imagine - Me Africa**

**Welcome address: Dr Mushin Nsubuga – ED STMEA**

**Panel Discussion: Peter Olet** - MPHL alumni- Administrator Timagi Health Center, **Dr Eve Nakabembe** Senior consultant Obs & Gyn/MBFHI, **Dr Elizabeth Ekong**, Dean FPNM-UCU, **Dr Betty Mirembe**-Path Country Director **Dr Richard Mugahi**-Commissioner Reproductive, MCH MoH,

## SESSION 4: 10.15 – 10.45AM Opening Address / Keynote Speaker / Moderator Harriet Adong

**Opening Address:** Prof Aaron Mushengyezi VC UCU,

**Keynote speaker:** Prof Jerome Kabakyenga – Department of Community Health/ Founding Director Institute of Maternal, Newborn and Child Health at MUST

## SESSION 5: 10:50 – 11:40 AM:

**Oral Presentations /Moderator:** Dr Jonathan Tumwebaze

**Oral Presentations & Discussions**

**Group photo**

## SESSION 6: 11:45 AM – 12:30 PM:

**Poster & Exhibition Engagement/Entertainment**

**Group 1 lead:** Dr Olive Sentumbwe - STM Founder / Ambassador Steven Mubiru

**Group 2 lead:** Dr Jean Chamberlain - STM Founder & Hon Beatrice Akor – Min of State for Economic Planning /Woman MP Agago district.

## SESSION 7: 12.30– 12:45 PM:

**Guest of Honour Address-** Hon Margaret Muhanga

## SESSION 8: 12.45 PM - 1.15 PM

**Recognition, Closing Cereomny/vote of thanks/call to action**

Dr Jean Chamberlain – STM Founding Member

## SESSION 9: 1.15 PM:

Lunch /Networking/Entertainment

THANK YOU FOR BEING PART OF STM 2026 Conference, 24 April 2026

# APPENDIX 2: Poster presenters

| No. | Presenter(s)                                                                                          | Institution/Affiliation                                                                                    | Poster Title                                                                                                                                                                                  |
|-----|-------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1   | Christine Muhumuza, Susan M. Kiene, Kate Buckshaw, Mengyun Jiang, Abigail E. Bryer & Katelyn M. Sileo | Department of Epidemiology and Biostatistics, Makerere University School of Public Health, Kampala, Uganda | <i>Adaptations to Intervention Content and Approach For a Couples-Based Family Planning Intervention in Uganda: Application of Findings From a Pilot Trial to a Full-Scale Efficacy Trial</i> |
| 2   | Robert K. Basaza, Sarah Byakika, Emmanuel D. Otieno & Boniface Mutafina                               | Department of Public Health, Uganda Christian University, Mukono, Uganda                                   | <i>Rethinking Urban Health Strategies to Improve Access and Quality of Reproductive, Maternal, Newborn, Child, and Adolescent Health Services in Uganda</i>                                   |
| 3   | Akello Harriet & Zaslow Rachel                                                                        | Mother Health International                                                                                | <i>Shared From Home to Health Facility: Community Midwifery Collaboration to Reduce Maternal Care Delays in Amuru District, Northern Uganda</i>                                               |
| 4   | Josephine Namyalo, Kiwa S. Joseph & Emmanuel Otieno                                                   | Save the Mothers East Africa, Mukono, Uganda                                                               | <i>Maternal Health Information Seeking Behaviours and Perceptions among Ugandan Pregnant Women: A Theory-Informed Qualitative Study</i>                                                       |
| 5   | Kenneth Michael Ogwok & Daphne Nyachaki Bitalo                                                        | Department of Computing, Uganda Christian University, Mukono, Uganda                                       | <i>Data-Driven Precision Public Health: Leveraging Machine Learning to Track and Reduce Zero-Dose and Partially Vaccinated Children in NakiFuma, Uganda</i>                                   |
| 6   | Nassali Juliet (MPHL Alumna)                                                                          | J Food Vendors, Wakiso District                                                                            | <i>Empowering Youth and Women through Value Addition Skills Training and Access to Bakery Ingredients</i>                                                                                     |
| 7   | Ivan Kiyuba (MPHL Alumna) & Josephine Namyalo (MPHL Faculty)                                          | Department of Public Health, Faculty of Nursing and Midwifery, Uganda Christian University, Mukono, Uganda | <i>Factors Associated with Birth Preparedness and Complication Readiness among Pregnant Teenagers Seeking Care in Kayunga District</i>                                                        |
| 8   | Nathan Okiror & Jane Nakawesi                                                                         | Baylor Foundation Uganda, Kampala                                                                          | <i>Peer-Led Group Antenatal Care: A Multisectoral Approach to Increasing Early ANC Uptake among Adolescent Mothers in Tororo District</i>                                                     |
| 9   | Kobuyonjo Scovia (MPHL student)                                                                       | Fort Portal Regional Referral Hospital                                                                     | <i>Factors Influencing Intimate Male Partner Involvement among Mothers Attending Antenatal Care at Fort Portal Regional Referral Hospital</i>                                                 |
| 10  | Hope Okeny, Emmanuel Otieno, Robert K. Basaza & Karin                                                 | Community-Based Initiative, Gulu, Uganda                                                                   | <i>Community Health Insurance Changing Lives in Gulu, Uganda: What are the Benefits to Women of Reproductive Age?</i>                                                                         |
| 11  | Jacqueline N. Ngonzi                                                                                  | Women Connect For Good Uganda                                                                              | <i>Sustainable Practical Livelihoods: Economic Empowerment as a Pathway to Safe Motherhood and Child Health among Rural Women in Uganda</i>                                                   |
| 12  | Davis Akampumuza, Jackie Katana, Philip Bakahirwa & Samuel Masanga                                    | Faith For Family Health Initiative (3FHi), Uganda                                                          | <i>Utilizing Interactive Radio SMS Polls to Understand Social Pathways to Care and Climate Resilience in Maternal Health among AGYW in Ntoroko District, Uganda</i>                           |
| 13  | Irene Omono Atimango & Cinderella Anena                                                               | Lamwo District Local Government / UNFPA                                                                    | <i>Operationalizing Midwife-Led Models of Care For Adolescents: Facility-Level Evidence Contributions From the UNFPA-Supported SAY Program in Lamwo District</i>                              |

| No. | Presenter(s)                                                                                                                                   | Institution/Affiliation                                                     | Poster Title                                                                                                                                                                     |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 14  | Nabugewa Fiona                                                                                                                                 | Mbarara University of Science and Technology, Mbarara, Uganda               | <i>Development of a Machine Learning Model For Predicting and Classifying Risk Factors Associated with Neonatal Deaths at Rakai General Hospital</i>                             |
| 15  | Diana Cherotin, Clark Joshua Brian Wong, Eddy Okwir, Frehd Nghania, Lwanga Ssekiswa Zimwanguyiza, Alex Mugume, Albert Maganda & Dithan Kiragga | Local Partner Health Services Eastern & Karamoja / Baylor Foundation Uganda | <i>Digital Performance Monitoring to Improve PMTCT Service Delivery in Resource-Limited Settings: Successes From Eastern Uganda</i>                                              |
| 16  | Sam Cherop, Michael Muyonga, Lilian Mugisha & Ayub Wangubo                                                                                     | Amref Uganda, Kampala, Uganda / Kween District                              | <i>Contribution of Community Quality Improvement Initiatives in Improving First Visit Antenatal Care Attendance Across Six Hard-to-Reach Health Facilities in Kween District</i> |
| 17  | Evelyn B. Acheptoris, Jennifer Owomuhangi, Ronald N. Khamasi, Alexander Mugume, Denise J. Birungi & Dithan Kiragga                             | Local Partner Health Services East-Baylor                                   | <i>Eliminating Missed Opportunities: Midwife-Led Point-of-Care Hemoglobin Testing through ANC Client Flow Reorganization in Eastern Uganda</i>                                   |
| 18  | Jane Harriet Namwebya (MPHL alumna), Prosmolly Agebare, Robina Nannungi, Peter Kisaakye, Gloria Seruwagi & Chi-Chi Undie                       | Population Council                                                          | <i>Addressing Unintended Pregnancy: A Behaviour Change Communication Intervention Integrated into Food and Cash Distribution in Kiryandongo Refugee Settlement</i>               |
| 19  | Namwanga Edwige, (MPHL alumnus) Natuhwera Adeline, Mayaega Emmanuel, Namutebi Justine                                                          | Kyetume HC III, Lwengo District                                             | <i>Improving Identification and Uptake of Pre-Exposure Prophylaxis among Pregnant and Lactating Women at Kyetume HC III, Lwengo District</i>                                     |
| 20  | Julius C. Ssekinkuse                                                                                                                           | Communication For Development Foundation Uganda, Kampala, Uganda            | <i>Improving Access to Maternal Health Information among Hard-to-Reach Adolescents and Young Women in Uganda through a Toll-Free Call Centre Facility</i>                        |
| 21  | Christine Mawadri                                                                                                                              | Cutana Technologies                                                         | <i>From Innovation to Implementation Gaps: The Case of CUTANA Technologies in Emergency Maternal Transport</i>                                                                   |
| 22  | Jeremiah Mbulamani (MPHL alumnus)                                                                                                              | Mother's Heart Uganda                                                       | <i>Empowerment Through Entrepreneurship: The Story of Mufoto's 100 Women in 100 Weeks</i>                                                                                        |
| 23  | Kobusinge Lilian                                                                                                                               | Makuutu Health Center III, Bugweri District Local Government                | <i>Community Intervention to Improve High-Risk Pregnancy Outcomes among Pregnant Women in Makuutu Health Center III, Bugweri District</i>                                        |
| 24  | Henry Wasswa, Harmson Opira Kiteze, Simon Peter Lugoloobi & Lilian Kamanzi                                                                     | Amref, Kampala, Uganda                                                      | <i>Assessing Health Care Providers' Knowledge, Attitudes, Practices and Use of the Medical Eligibility Criteria For Contraceptive Methods Provision in Uganda</i>                |

| No. | Presenter(s)                                                                                                        | Institution/Affiliation                                          | Poster Title                                                                                                                                                                                    |
|-----|---------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 25  | Nakidoodo Suzan, Michael Muyonga, Lilian Kamanzi Mugisha, Edith Samalie Namugabo, Judith Apio Agatha & Henry Wasswa | Amref, Kampala, Uganda                                           | <i>Working with Youth-Led Organizations to Strengthen Accountability, Uptake and Youth-Led Monitoring For AYSH Services</i>                                                                     |
| 26  | Josephine Ossiya                                                                                                    | OSSIYA 100 100 Foundation                                        | <i>Strengthening Community Participation in Maternal and Child Health through Targeted Behaviour Change in Magoro Subcounty, Uganda</i>                                                         |
| 27  | Doreen Namatovu                                                                                                     | Department of Visual Art and Design, Uganda Christian University | <i>Designing a Maternal Care Kit: A Fashion-Based Intervention For Mothers in Low-Resource Settings</i>                                                                                         |
| 28  | Daphine Nayebare                                                                                                    | Zoe Girls Health Initiative                                      | <i>Community Empowerment For Adolescent Girls and Teenage Mothers to Prevent Repeat Teenage Pregnancies, Improve School Persistence, and Break Poverty Cycles in Jinja City, Igenge Village</i> |
| 29  | Mukalu Mohamed (MPHL alumnus)                                                                                       | Communities For Childbirth International                         | <i>Community-Based Referral and Telephone Triage System For Obstetric Cases in Busoga Region, Uganda</i>                                                                                        |
| 30  | Phionah Amutuhair                                                                                                   | Uganda Christian University                                      | <i>Indigenous Knowledge of Traditional Foods and Nutritional Care among Mothers of Children Five Years and Below in Selected Peri-Urban Areas of Mukono, Uganda</i>                             |







**Save the Mothers East Africa,  
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