



Annual Report 2023

A few words from our Executive Directors

As we approach our 20th Anniversary in 2024, BAMA has much to be proud of. When we began, we were a small, founder-driven, community-based organization, with an annual budget of just \$5,000 USD. Thanks to a dedicated staff of 43 public health professionals, we close the year, partnering with local and national, government, working in four districts and one municipality, to transform the quality of reproductive, maternal, and newborn health services for a population of nearly two million people.

Our comprehensive maternal and newborn health programs are built on a strong foundation of trust between BAMA and local district health systems. We begin at the family level, where 200 Mama and Papa Ambassadors, BAMA-trained and mentored Community Health Workers, serve as our eyes and ears at the village level. As Master Trainers, BAMA mentor midwives and physicians share knowledge and skills with over 500 colleagues across 59 health facilities. By improving their knowledge and skills, we create a culture of caring throughout the health system.

In 2023, we continued our scaling of the BAMA maternal and newborn health program to Masaka District and city, serving approximately 68,000 reproductive-aged women and 16,000 newborns. Masaka City is the home of the region's only referral hospital, and we have had to confront new challenges, as women and babies are transferred from surrounding districts, where BAMA has no presence. In 2023, the Ministry of Health invited BAMA to be the lead implementing partner with the government to increase access to quality maternal and newborn care services. Our focus is to identify the resources necessary to expand our impact and serve tens of thousands mothers and babies.



This year, thanks to the generous support of Enabel, the Belgian Development Agency and Spring Fertility, our Mama Rescue Project completed its first phase. This simple mobile phone app links women in labor to local motorcycle taxi drivers, providing lifesaving transport from remote villages to health centers, and emergency referral is from health centers to hospitals through a corps of trained automobile taxi drivers.

Since June 2021 we transported 27,373 women in labor, with an average transport time of just 15.3 minutes. 3,229 mothers with complications were referred from health centers to district hospitals for emergency obstetric care.

The time for referral was reduced from 3 1/2 hours to just 34 minutes! With reduced funding in 2024, we will be forced to adapt Mama Rescue, retaining the emergency referral services in Rakai and Kyotera districts. We are pleased to report that Enabel's funding will allow us to expand the full Mama Rescue Project to the western districts of Kasese and Kabarole.

Thanks to support from Grand Challenges Canada/Saving Brains and USAID/JSI's Partnership Plus Program, we expanded the Mama Ambassador Program to a third year, improving early childhood development and mental health for young mothers. We have continued to demonstrate improved health for over 800 adolescent mothers and their children. Thanks to our expanded male engagement activities, as well as our partnership with

extended families, political, and law enforcement leaders, we saw a decrease in the incidence of sexual and gender-based violence in 2023.

Transforming health systems in countries with limited resources requires many partners; no organization, however dedicated and skilled, can do it alone. In addition to the Ugandan and District governments who work alongside BAMA staff, we are building a trusted network of NGO partners, who share our vision of a world where quality health care for all women and children is a human right.

Working with the Adara Group, an Australian non-profit focusing on improving intensive neonatal care in Uganda, we have adapted their Hospital to Home Program, supporting newborns who are at risk for developmental delay, while Adara implements our Mentor Midwife model in the Nakaseke District. We have continued our successful collaboration with the FreO2 Foundation, which has resulted in the installation of sustainable oxygen concentration and delivery systems in 20 health centers and hospitals in Uganda.

We are forever grateful for the partnership of the Rakai, Kyotera, Masaka City and Masaka District Governments, the Ugandan Ministry of Health, and the communities we serve. Our successes are the result of a dedicated staff of 43 health professionals who everyday go above and beyond to serve the women and children of Uganda. We also thank hundreds of midwives, physicians, and Mama and Papa Ambassadors.

Last but not least, we thank our many donors; your generous investment in the health of women and children gives us the strength and courage to continue.

With gratitude,



Daniel Murokora MD

Executive Director
Babies and Mothers
Alive Foundation



Marc Sklar MD, MPH

Executive Director
Babies and Mothers
Alive USA





Who we are

Babies and Mothers Alive (BAMA) is an innovative bi-national partnership between Babies and Mothers Alive Foundation, a community-based NGO registered with the Government of Uganda, and Babies and Mothers Alive USA, a US-based 501(c)(3) non profit.

About us

We were founded by Drs. Daniel Murokora and Marc Sklar in 2004 with the mission to improve reproductive, maternal, and newborn health in Uganda. Our staff of 43 committed health professionals empower women and their families to build healthy communities by supporting reproductive, maternal, newborn, and early childhood healthcare, sexual and reproductive health education.



BAMA Program

Improving maternal and child health

The Babies and Mothers Alive (BAMA) Program is a dynamic partnership with the Ugandan Ministry of Health and four district governments to improve the quality of health care and reduce maternal and newborn mortality for close to a million people.

The BAMA Program employs a comprehensive model that addresses the three-delays responsible for most maternal and newborns deaths: the delay in seeking, reaching and receiving skilled care at government health facilities. Between 2016 and 2023, we have reduced maternal and perinatal mortality by 84% and 61% respectively in the Rakai and Kyotera Districts. In 2023, we fully implemented BAMA's Health System Strengthening interventions in an additional 11 health facilities in Masaka City and District. Importantly, this has included the Masaka Regional Referral Hospital, which is the only referral hospital in our region of nine districts, with a population of 2.2 million people.

200 Mama and Papa Ambassadors, BAMA-trained Community Health Workers assist pregnant women in rural areas to develop birth preparedness plans, stressing the importance of delivering at a health facility under the supervision of a skilled birth attendant. We have expanded our corps of Mentor Midwives and Physicians to 60. They build the knowledge and skills of 500 healthcare providers in emergency obstetric and newborn care — preventing the vast majority of deaths that are due to treatable complications during pregnancy and childbirth.

As we came to the close of 2023, we confirmed funding from ENABEL, the Belgian Development Agency which will support the scaling of BAMA and Mama Rescue to the western districts of Kasese and Kabarole in 2024.

Mama Ambassador Program (MAP)

Improving adolescent maternal and child health

Adolescent pregnancy is a major health problem in Uganda, with 24% of pregnancies occurring in women younger than age 19. To address the needs of these young women, BAMA established the Mama Ambassador Program (MAP), a peer-support parenting group model to improve early childhood health and development and maternal mental health.

In 2023, we concluded the second phase of the MAP, with a cohort of 720 mother-baby pairs completing three years of support group sessions from the third trimester of pregnancy to age three.

The MAP delivered on its promise of improved health outcomes. Over 99% of children were assessed with normal development at age three. At baseline, 41.1% of young mothers had symptoms of depression and/or anxiety, which by three years was reduced to just 7.2%. In 2023, we employed a comprehensive intervention for 600 young mothers, including group therapy, mindfulness techniques, and cognitive behavioral therapy, with an 82% positive response rate. We realized dramatic reductions over the past year in the incidence of Sexual and Gender-based Violence, with a 64% reduction from 8.4% to 3.0%.

In our Transition to Scale proposal presented to both the US and Canadian Governments, we hope to integrate this proven model into the government's health delivery system.





Mama Rescue Project

Improving access to maternal and child health

In 2021, Babies and Mothers Alive, with support from Enabel, the Belgian Development Agency's Wehubit Program and Spring Fertility, launched the Mama Rescue Project, a mobile phone application providing women from remote areas with free transport to health facilities via motorcycle or automobile taxi.

From June 2021 through July 2023, we transported 27,373 women in labor from village to health center, as well as providing emergency transport for 3,229 women in need of referral from health center to the hospital.

We were able to transport women from their homes to health centers in just over 15 minutes. We have reduced emergency referral time from health center to hospital from 3 ½ hours to 34 minutes. We have increased referrals from 8% to 11%:

By addressing the delay in accessing skilled maternity and newborn care once the decision to deliver at a health center has been made, we have dramatically reduced the time it takes women to move from their communities to health facilities and to refer them from lower level to higher level health units. This leads to a reduction in maternal and newborn complications and deaths. We are grateful that Enabel has decided to support the expansion of Mama Rescue to the western districts of Kasese and Kabarole in 2024.

USAID/Uganda Family Planning Activities

Increasing access to family planning information and services

Thanks to the support of USAID through their partnership with Pathfinder International, BAMA is implementing the Uganda Family Planning Activities (FPA) in the Rakai District. Our goal is to increase access to modern family planning and to promote best practices in sexual and reproductive health.

In 2023, we completed our third year of implementation of this critical component of the BAMA comprehensive reproductive health program. High fertility rates and adolescent pregnancies contribute to increasing health risks for both mothers and babies. Over the past three years, we have mobilized and sensitized communities to advocate for positive social norms, provided voluntary family planning methods, and created referral links for family planning within the district health system. Our work focuses on respect for the health and rights of women, ensuring that they have full agency in reproductive health decision-making.

Community health dialogue sessions were implemented in seven sub-counties in 48 health facilities. These sub-counties were selected due to their low contraceptive prevalence and high adolescent pregnancy rates. We also conducted home visits, and leveraged existing youth groups to integrate family planning messaging. Through cultural and religious platforms, and by engaging male partners, we are increasing women's agency in accessing contraception. We also support access to family planning methods and linkage to services by community health workers.





Justine Nalunjogi

**BAMA Mentor Midwife
Lwanda HCIII Rakai District**

“When I was selected to be part of the BAMA Foundation mentorship program, I was overjoyed at the opportunity to learn from experienced midwives and improve on my skills.

Throughout the training with BAMA, I learned how to handle obstetric emergencies such as Postpartum Hemorrhage (PPH) and how to resuscitate a newborn in distress. The knowledge and skills that I have acquired have been invaluable, and I am now confident in my ability to provide the best possible care to my patients.

The number of maternal deaths in my area has decreased significantly. I owe this success to BAMA and the mentorship program that has equipped me with the knowledge and skills that I needed to save lives. I have been able to fulfill my dream of becoming a skilled and compassionate midwife.”

Dr. William Mulindwa

BAMA Medical Officer

“Pre-eclampsia claims the lives of too many mothers, almost as much as Post-partum Hemorrhage (PPH), and thus is the 2nd leading cause of maternal mortality and morbidity, while negatively impacting newborn morbidity and mortality as well.

The knowledge gap and fear of caring for such mothers among health workers almost doubles the chances of mortality due to pre-eclampsia. Therefore, capacity building through equipping health workers with necessary knowledge and skills is key in reducing this mortality.”





Maria

BAMA Beneficiary

“During a BAMA outreach in our village, I went for a scan for the first time where a BAMA doctor told me that my baby had a malpresentation. I had no idea what that meant until Dr. William explained to me that my baby is abnormally positioned in my womb and it could be dangerous for me and the baby during delivery.

He referred me to Rakai Hospital, where the doctors there performed an emergency C-section to deliver my baby safely.

Thanks you BAMA for these routine outreaches done in our villages and the ultrasound scan that was brought to our village. I cannot imagine what would’ve happened if I had not been referred to the hospital or if I had not gone for antenatal screening during the outreach.”

Dr. Faith Nakiyimba

District Health Officer Masaka District

“BAMA has been in Masaka for the last two years. Before then there were many gaps in maternal and newborn care at the District and health facility level. Our supervisory role and community engagement in maternal newborn health services were not adequate but these services are now better.

BAMA has supported the implementation of health management committees and units, and improved health workers’ accountability to these committees.

BAMA has also supported the Ministry of Health in carrying out training to the District on roles and setup of Health Unit Management Committees because they were not functional.

Our health workers, especially the midwives, are much more equipped with knowledge and skills in maternal and newborn care through the training that is offered by BAMA, and we have started to see the trend of complications and deaths related to maternal and newborn care drop in our district.”





Joan Namayanja

**Medical Clinical Officer
Kasali HC III Kyotera District**

“One of the most valuable resources provided by the BAMA Program is the improvement in buffer stocks, such as: basins, Mama kits, and essential medicines at the health center level.

These have helped boost antenatal care attendance of mothers, as well as the number of deliveries at Lwanda HCIII. This has not only improved the health outcomes of mothers and their babies, but also helped to strengthen the healthcare system as a whole.

BAMA's intervention has made a big difference in the lives of women and their families in the Rakai District.

I have always dreamed of providing essential healthcare services to young women in labor.”

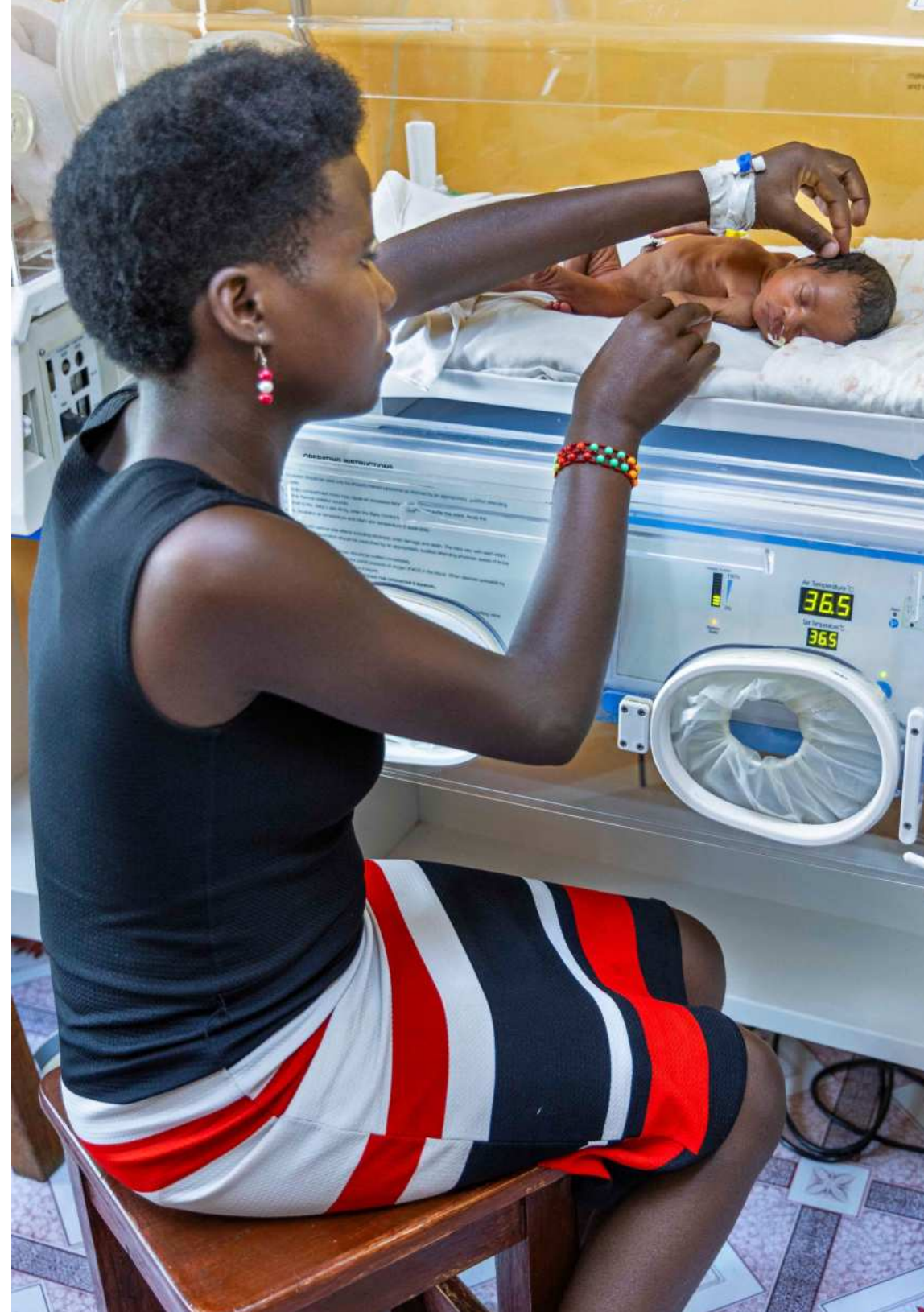
Peaceous Arishaba

BAMA Beneficiary

"I cannot thank the BAMA Foundation enough for providing me with transport through the BAMA Foundation's Mama Rescue Project, as my newborn baby needed urgent medical attention.

Thanks to their quick response and support, my baby was received at Rakai Hospital and placed in an incubator which helped my baby survive. Since then, my baby has been doing fine and there has been great improvement in her health.

BAMA Foundation's kindness and generosity has truly made a difference in our lives."



Our impact: BAMA Program



21,346
people served
through Community
Health Outreaches
conducted in 2023



4,864
women referred to
health facilities by
our Mama and Papa
Ambassadors



From 534
NICU admissions in
2022 to **481**
in 2023 with a **97%**
survival rate

Hospital to Home
Program launched in
three BAMA-
partnering NICUs
with **97** babies at
risk for poor health
outcomes served



84%
reduction in maternal
deaths since 2016



Our impact: Mama Ambassador Program



81% improvement in maternal mental health scores from enrolment to three years



89% reduction in the incidence of sexual and gender-based violence among adolescent mothers



Over **99%** of children at age three with normal development

37 peer-support Parenting Groups completed sessions from 7th month gestation to three-years of age



Our impact: Mama Rescue



27,373 women in labor transported from village to health center



3,229 women with life threatening complications received emergency transport



40 Village Savings and Loan Association enrolled to promote savings for health

Average time for transport village to health center
15.8 minutes, time for referral reduced from 3 1/2 hours to **34** minutes



Mama Rescue will be expanded to **2** new districts in 2024

Our impact: Family Planning Activity



Contraceptive uptake reached **88%** in Rakai District, a **26%** increase since 2021



4,356 people reached through community-based dialogues



21,845 community members reached through home visits

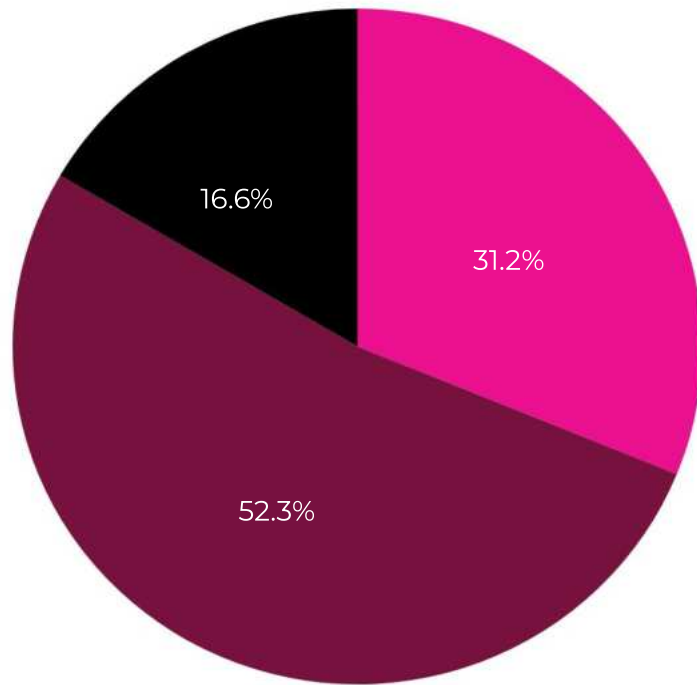
4-session Women only dialogues held for **872** women



Financial summary

Total revenue

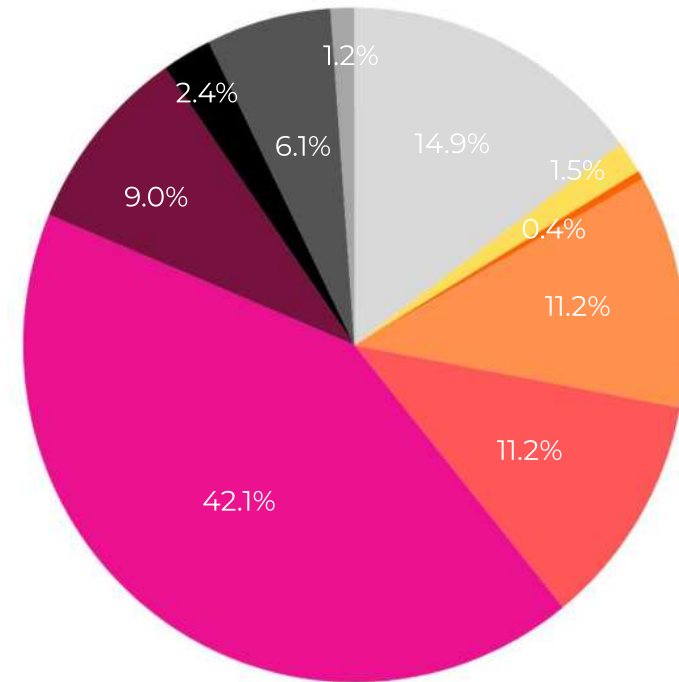
BAMA Foundation/BAMA USA \$1,480,555



- Foundations \$461,471
- Government \$774,030
- Individual donors \$245,054

Total expenses

BAMA Foundation/BAMA USA \$1,415,278



- Admin BAMA F \$210,182
- Admin BAMA USA \$21,731
- Fundraising \$5,994
- HR BAMA USA \$158,012
- BAMA Core Rakai Kyotera \$158,403
- TTS II, MAP (USAID, GCC) \$ 596,474
- Mama Rescue Program \$127,590
- Family Planning Activity \$34,342
- FreO2 \$86,189
- Ambulance Project \$16,361

Thank you to our generous partners



Ugandan Ministry of Health



Nicoll Family Fund



Partnerships **PLUS**



...and many more. Thank you for your generous support and partnership.