

APPENDIX 3 - SRH INNOVATIONS IN HUMANITARIAN SETTINGS⁹

Innovation example	Date	Short description	Organisation	Location	Target population	SRH component	Problem being addressed	Intended outcomes	Innovation component (product (digital), product (non-digital), service, mode of delivery, development/design process, partnership model, policy, approach to scale and dissemination)	Type of innovation (invention, adaptation, adoption)	Innovation Phase (Recognition, Search, Invention/Adaptation, Pilot, Scale)	Source of information
DMPA-SC self-injectable contraceptives digital training resources for health workers and clients	2020	<p>PATH has recently developed digital training resources for healthcare providers and clients learning to administer the injectable contraceptive, subcutaneous DMPA (DMPA-SC). A 10-lesson DMPA-SC eLearning course for healthcare providers is available in English and French and can be taken on computer or mobile device with internet access. Content includes an emphasis on informed choice counseling, new lessons on calculating the injection date and conducting follow-up visits, and updated information on training clients to self-inject.</p> <p>In addition to the eLearning course, PATH and John Snow, Inc. have developed short 5- to 7-minute DMPA-SC training videos for both self-injection clients and healthcare providers. Available in English and French, the videos can be translated or adapted to fit in programme contexts.</p>	PATH & John Snow Inc.	Global	Women of reproductive age SRH Practitioners	Family planning	Difficulty of face-to-face training of healthcare providers and clients during COVID-19.	By leveraging digital platforms, family planning programmes can integrate new approaches that help reduce the costs, time, and inconvenience associated with traditional classroom training.	Service (training) Mode of delivery (online)	Invention	Pilot	Path.org - DMPA-SC digital training resources for health workers and clients
A digital, interactive decision-making tool to empower adolescents to make informed contraceptive choices in acute humanitarian emergencies (WhichMethod)	Ongoing	Women can walk through a set of questions on a tablet to help them with decision-making around family planning. They then take this to the provider to discuss their options. This offers more privacy, especially for adolescents, and is a good way to tailor FP counselling. It also reduces time constraints for HCPs, allows more time for other services to be available. Potential to remove issues of provider biases. Modified an algorithm From the US and Mexico. The data can give insights into contraceptive decision-making	Save the Children and Columbia University	Yemen, Columbia, South Sudan (acute response)	Adolescents & young people	Family planning	<p>Increased contraceptive needs of adolescents during emergencies, difficulties accessing unbiased services and need for privacy around contraceptive decision-making.</p> <p>Lack of time to interact with healthcare providers for contraceptive counselling.</p>	WhichMethod will provide adolescents and young women with access to a digital, interactive, tailored contraceptive decision-making tool that they will use confidentially and privately within a health care facility to make an informed choice about the best method for them.	Product (digital)	Adaptation	Adaptation	Key Informant Interview
DMPA-SC self-injectable contraceptives "Sayana Press" for refugee women in a camp setting in South Sudan	2019 - 2020	<p>Pilot project in Uganda with women refugees from South Sudan to test self-injection of Sayana Press injectables.</p> <p>The project worked through community health workers (CHWs) who provided counseling on family planning options. CHWs were able to administer DMPA-SC to women who chose this method, as well as teach women how to inject themselves in the future. Women who self-injected were given two additional units to take home, amounting to nine months of protection. Coupled with community dialogues to increase acceptance of family planning and sensitisation for many groups, including men and religious leaders, PATH provided more than 9,000 women with contraception. Forty-three percent of these women were using family planning for the first time.</p>	PATH Uganda (funded by UNFPA)	Uganda (Palabak refugee settlement)	Women of reproductive age	Family planning	Lack of access to family planning.	Increased uptake of DMPA-SC Reduced unmet need for contraception.	Mode of delivery (self-care)	Adaptation	Pilot	<p>Path.org - Contraception during a crisis: The potential of self-injection.</p> <p>The Guardian - 'We're not baby factories': the refugees trying injectable contraceptives.</p>

Using an integrated call-centre with real time data for SRH commodity management in South Sudan	Information not readily available	Integrated call centre to increase data visibility of health commodities at service delivery points in South Sudan. This includes a telephone and online platform for data collection and includes voice recordings of all calls and generates shareable reports. Stock managers from PHUs/hospitals/district centres call or use the online platform and data is added to a dashboard by agents. Reports can then be generated.	USAID Global Health Supply Chain Program	South Sudan	SRH Practitioners	Health system strengthening	Lack of real-time data and visibility of stock levels at health facilities leading to stock-outs.	Increase data visibility of health commodities at health facilities and provide reports for stock managers.	Product (digital)	Invention	Pilot	IAWG - SRH Innovations in Humanitarian Settings: Experiences in service delivery, data collection, and supporting staff
The Frontline Implementers' Support Network to connect and amplify the innovative work of SRHR implementers	April 2020 - ongoing	In April 2020, SCOPE submitted a concept for strategies to connect implementers and amplify their innovations through a Frontline Implementers Support Network. Subsequently, IAWG organised three webinars, with support from SCOPE, to allow implementers to exchange information about COVID-19 adaptations, share common challenges, and gather information about requests for support and ways to connect. To support further development of the Frontline Implementers Support Network, and informed by the results of the Frontlines in Focus webinars and ongoing input from IAWG members, SCOPE embarked on design research to inform creation of a vibrant community of practice among SRHR implementers in humanitarian crises.	IAWG & SCOPE	Global	SRH Practitioners	Health system strengthening	The COVID-19 pandemic has demanded rethinking about the usual ways of working in humanitarian contexts. With implementers more isolated due to lockdowns and movement restrictions, local actors - more than ever - have played a key role in driving global efforts to ensure SRHR continuity through adaptation and ingenuity. In tandem with other localisation efforts in humanitarian response, IAWG is emphasising the need to ensure local actors and frontline implementers are put at the center of the SRHR response of its members.	To support frontline health workers to connect and share experiences.	Partnership model (network) Development/design process	Invention	Invention/adaptation	IAWG - Frontline Implementers for SRH in humanitarian crises: Needs, insights and opportunities for a support network
Toolkit for mapping the MISP and its adaptation for preparedness and response to COVID-19, other pandemics, and major outbreaks	2020-ongoing	The objective of this toolkit is to help SRH coordinators (or, where not available, health coordinators or managers) ensure the availability, accessibility, acceptability, and quality of lifesaving SRH services by: <ul style="list-style-type: none"> mapping the status of SRH services before a crisis or major outbreaks, such as COVID-19 mapping the status of the MISP implementation and who is doing what, where, when, why, and how, including implementation barriers related to the MISP mapping the status of the supply chain for SRH, the inclusion of priority populations (template 1, line 50 onward), expenditure and financing for health and SRH documenting how COVID-19 related events and decisions (e.g., lockdown, deconfinement) impacted the implementation of and access to MISP and other SRH services offering a comprehensive checklist of activities for MISP preparedness and response in the context of COVID-19 offering a comprehensive checklist of activities related to MISP implementation in the context of COVID-19 that cut across critical domains, including supply chain, triage, and screening, infection prevention and control, personal protective equipment, health staff and safety, self-care in select SRH areas, remote consultations, adapting how community health workers deliver care in the community, elements of community-based harm reduction approaches in contexts of severe movement restrictions, and community engagement. 	IAWG	Global	SRH Practitioners	Health system strengthening	The need to adapt MISP programming in light of the COVID-19 pandemic.	Information not readily available.	Product (non-digital)	Adaptation	Pilot	IAWG - Toolkit for Mapping of the MISP for SRH and its Adaptation for Preparedness and Response to COVID-19 and Other Pandemics and Major Outbreaks
PrEP (pre-exposure prophylaxis) to prevent HIV among sex workers and transgender communities in Honduras	Information not readily available	PrEP is being provided for sex workers and transgender people who experience a high prevalence of HIV in Honduras.	MSF	Honduras	Sex workers LGBTQIA+ People living with HIV/AIDS	HIV/AIDS & STIs	High prevalence of HIV among sex workers (3.5%) and transgender community (25%) compared to the general population (0.4%).	Information not readily available.	Service (treatment)	Adaptation	Pilot	Key Informant Interview

A new partnership to support LGBTQIA+ organisations, people living with HIV/AIDS and sex workers with access to services and justice in Ecuador	Information not readily available	UNHCR collaborated closely with Community-Based Organisations working with LGBTQIA+ populations on identification and referral of cases, assistance distributions and capacity development. Partnership with Public Health Defender's Office to address situations of discrimination on access to public services and housing. With UNFPA, review of Ministry of Public Health guidelines on access to Public Health Services for these key marginalised populations.	UNHCR Ecuador	Ecuador (populations from Colombia, Ecuador & Venezuela)	Sex workers People living with HIV/AIDS LGBTQIA+	-HIV/AIDS & STIs Safe abortion/ post-abortion care	Lack of access to health and justice services for marginalised populations in Ecuador.	Information not readily available.	Partnership model	Adaptation	Pilot	IAWG - Innovative Strategies to Reach Vulnerable Populations in Humanitarian Settings
Training HCPs on the use of low-cost urinary tract infection (UTI) and preeclampsia test strips in Sierra Leone	2016 - ongoing	In Sierra Leone, World Hope International is training health care providers in the use of test strips for screening for urinary tract infections, preeclampsia and diabetes. The Ukweli venture plans to use the results from the study to implement a sustainable business surrounding urinalysis screening in Sierra Leone. In time, WHI and Lehigh University plan will work with the Ministry of Health and Sanitation to begin the manufacture and use of Ukweli UTI test strips in Sierra Leone and to study other possible screening applications for the strips. The project currently has a partnership with World Hope International and a distribution network of over 1000 trusted Community Health Workers.	World Hope International & Lehigh University	Sierra Leone	Women of reproductive age	Safe pregnancy, delivery & postpartum care	Urinary Tract Infections (UTIs) are the most common bacterial infections among women and are particularly common among pregnant women in sub-Saharan Africa. An untreated UTI can spread to the kidneys resulting in severe kidney damage, can cause birth complications, and can increase vulnerability to HIV and other sexually transmitted infections. Besides posing a threat to health, UTIs also impose an economic and social burden due to the stigma associated with them. In Sierra Leone, there are limited to no UTI and diabetes diagnostic services available locally and people have to travel to the closest town, usually miles away, for diagnosis and treatment.	Information not readily available.	Product (non-digital)	Invention	Pilot	World Hope International - Ukweli Test Strips Ukweli Test Strips
Integrating an MHM-friendly laundry space inside a protection centre in a camp setting in Bangladesh	Information not readily available	Integration of a laundry bar and private drying space within an existing protection centre - already considered a private and safe space. Women wash and dry products while they attend the centre. Women can take advantage of an opportunity to privately access protection services under the guise of using the laundry facilities for MHM.	CARE Bangladesh	Bangladesh (Cox's Bazar)	Women of reproductive age Refugees	Menstrual hygiene management	Lack of integration of SRH and GBV/ protection services in camp settings.	Information not readily available.	Mode of delivery (integration) Partnership model (Health + WASH + Protection sector)	Adaptation	Pilot	ReliefWeb - Menstrual Disposal, Waste Management & Laundering in Emergencies
Creating safe spaces for MHM among displaced populations in a camp setting in Uganda (Cocoon)	Ongoing	YLabs is using a user-centered design approach to understand and create safe spaces for displaced women and girls experiencing and managing menstruation in Uganda. The methodology of this project is rooted in user-centered design. Cocoon will obtain comprehensive user insights and input from women, girls and community members. Their knowledge, attitudes, behaviours, and experiences will input into every stage of the design process to ensure the solution is valued, utilised and sustainable. First, the findings of this study will be used to inform the intervention design. Then, a multi-disciplinary team of service designers, public health professionals, programme partners, and creative designers will work together to use insights to inspire and inform the creation of a range of prototype interventions that will be tested and refined. Sharing the findings with study participants and their communities in an equitable and actionable format as a priority for YLabs and their partners. The report will also be printed and disseminated in Uganda among various partners and a plain English version will be translated into Juba Arabic and Bari Kakwa. This dissemination process will be led by the project's local partner.	YLabs	Uganda (Bidi Bidi Refugee Camp)	Women of reproductive age	Menstrual hygiene management	Inadequate access to safe, private, accessible spaces for menstrual hygiene management (MHM) is a pressing problem for people in humanitarian crises. Fears, misinformation, and stigma limit women's ability to manage menstruation in safety and dignity, especially those with disabilities. Sanitation facility design needs to address these challenges and meaningfully engage women and girls. Understanding the complexity around MHM in humanitarian crises is urgently needed, given that menstruation remains shrouded in secrecy and stigma.	The expected outcomes of this project are to develop, adapt, pilot and evaluate a product or service that will create safe spaces for managing menstruation among displaced populations.	Development/design process	Adaptation	Search	Elrha.org - Cocoon: Safe Spaces For Managing Menstruation Among Displaced Populations

Using girl-centred design to develop MHM solutions in a camp setting in Malawi	2020 - ongoing	Use of girl-centred design techniques to support girls to create a solution to wash and dry their menstrual products privately in a camp setting. The girls designed small, discreet bags (like pillowcases) which can be used to wash products and then to hang outside with a girl's specific number on for easy identification.	Plan International	Malawi (Dzaleka refugee camp)	Adolescents and young people Refugees	Menstrual hygiene management	Lack of girl-led MHM solutions in camp settings.	Information not readily available.	Development/design process (HCD) Product (non-digital)	Adaptation	Adaptation	Key Informant Interview
Menstrual health and hygiene for people with intellectual impairments in Nepal and Vanuatu (The Bishesta Campaign)	Ongoing	The Bishesta campaign is an intervention to improve understanding and behaviours around menstrual health and hygiene for people with intellectual impairments and their carers. The campaign centres around two characters named Bishesta and Perana – Nepalese names that mean 'extraordinary' and 'motivation'. In the intervention, Bishesta has an intellectual impairment and is learning to manage her menstruation as independently as possible, with Perana's support. Using period packs containing necessary materials, and practical tools, visuals such as dolls, and roleplays based on these characters, participants communicate with each other about what menstruation is, and how to manage it hygienically and with dignity.	World Vision Vanuatu, LSHTM Water Aid Nepal, LSHTM	Vanuatu & Nepal	People with disabilities	Menstrual hygiene management	Lack of available information and support on MHM for people with intellectual impairments and their carers. Current MHM interventions are tailored to the needs of people without disabilities; the unique MHM needs of people with disabilities have only begun to be considered and these limited considerations have not extended to people with intellectual impairments. Without accessible information, menstruation can be confusing and frustrating for the person menstruating and those supporting them, which is exacerbated by rapid changes and displacement during emergencies. Huge issues with carers trying to support young people with intellectual disabilities during menstruation in situations of displacement with lack of privacy.	A robust evidence base on MHM interventions for people with intellectual impairment in humanitarian settings is established through a participatory process. Research findings are used to adapt and refine MHM tools for people with intellectual impairments in a humanitarian context. MHM tools for people with intellectual impairments are piloted and evaluated for use in humanitarian contexts. Advocacy for consideration of MHM for people with intellectual impairments & scale up of Bishesta tools for use in humanitarian contexts is conducted.	Service (campaign) Development/design process	Invention	Adaptation	WaterAid - The Bishesta campaign: menstrual health and hygiene for people with intellectual impairments Elrha - MHM For People With Intellectual Impairment In Emergencies
Designing inclusive and MHM-friendly WASH facilities in Lebanon	Ongoing	Currently, there is a lack of evidence-based tools and guidance for rapidly designing MHM and disability-friendly WASH facilities in humanitarian contexts. This project seeks to address this gap, by consulting in a participatory approach with women and girls, piloting new rapid engagement tools for designing inclusive and accessible WASH facilities in a participatory way, and by developing and piloting technical designs that can be adapted to other different contexts. The minimum standard checklists that will be piloted are simple and easy-to-use, and can be used across the emergency phases.	IFRC	Lebanon	People with disabilities	Menstrual hygiene management	Unsuitability of current WASH facilities for people with disabilities.	Minimum standard checklists for MHM and disability friendly communal latrines and bathing/laundrying areas, which have been piloted and tested in Lebanon. Technical designs including construction details, for MHM and disability friendly communal latrine and bathing/laundrying area, which can be adapted to other contexts. Recommendations for MHM and disability friendly WASH emergency response equipment which can be pre-positioned for rapid deployment in crises, with key items included in the Red Cross Red Crescent Emergency Item Catalogue.	Development/design process Product (non-digital)	Adaptation	Pilot	Elrha - Inclusive And MHM-Friendly Wash Facilities In Lebanon
A healthy lifestyle app connecting young people with SRH services and counselling in Myanmar (Love Question Life Answer)	2016	A mobile app, Love Question Life Answer, provides easy access to adolescent sexual and reproductive health and reproductive rights information and services. The application provides: 1) comprehensive sexuality education to young people through interactive content, quizzes and games, 2) a directory of available health services and their contacts, and 3) a hotline and chat function for young people to access qualified counselors. The app is accessible on-and offline, given intermittent Internet connectivity in rural areas. The project has been implemented in two conflict-affected states, Kachin in the north and Karen in the east.	UNFPA & Health Literacy Promotion Division, Ministry of Health and Sports, Association Francois- Xavier Bagnoud, Myanmar Medical Association, Marie Stopes International	Myanmar (Kachin & Karen)	Adolescents & young people	General SRHR	Lack of available access to SRHR information for adolescents and young people in conflict-affected states in Myanmar.	Information not readily available.	Product (digital) Mode of delivery (access to services online/offline)	Adaptation	Information not readily available	Reliefweb - Unfpa Innovation Fund: Innovating For A World Where Every Pregnancy Is Wanted, Every Childbirth Is Safe, And Every Young Person's Potential Is Fulfilled Expanding The Possible

Inclusion in action: Dignity kits for the transgender community in Kelaniya, Sri Lanka	2018	Member associations developed dignity kits with the transgender community on their request to include specific items that they need such as razors and to ensure they were able to access kits that are traditionally difficult for trans people to obtain. The transgender community was engaged in the design and helped to distribute the dignity kits.	IPPF member association	Sri Lanka (Gampaha district)	LGBTQIA+	General SRHR	Generic dignity kits do not adequately meet the needs of trans populations.	To ensure dignity kits meet the unique needs of transgender people.	Development/design process (participatory) Product (non-digital)	Adaptation	Scale	Key Informant Interview
Modified dignity kits for women and girls with disabilities in Fiji	Information not readily available	IPPF engaged with the Pacific disability forum to create dignity kits for women and girls with disabilities. Modified kits which included adult diapers and braille and audio messages on sexual and gender-based violence were designed and distributed.	IPPF member association	Fiji	People with disabilities	General SRHR	Generic dignity kits do not adequately meet the needs of disabled women and girls.	To ensure dignity kits meet the unique needs of people with disabilities.	Development/design process (participatory) Product (non-digital) Partnership model	Adaptation	Scale	Key Informant Interview
A novel procedure for treating imperforate hymen in newborns in DRC	Information not readily available	Novel clinical procedure for treating imperforate hymen with a cotton bud, reducing the need for invasive treatments. Training of national staff across countries to be able to quickly and simply do this procedure.	MSF	DRC	Newborns	Newborn care	Lack of existing medical procedure to treat imperforate hymen in newborns in DRC.	Information not readily available.	Service (new clinical procedure)	Invention	Pilot	Key Informant Interview
The Safe Delivery App (SDA) to train healthcare providers (HCPs) on maternal and newborn care in Somalia	Information not readily available	Improving the quality of maternal and newborn care. The Safe Delivery App is a digital dissemination platform to get the Newborn Health in Humanitarian Settings Field Guide (NBFG) guidelines into the hands of clinical providers in humanitarian crises with the aim of improving maternal and newborn care. The app consists of 13 modules and can be used offline. A new module on SRH and COVID-19 was recently added to the app.	Maternity Foundation (Save the Children delivering)	Somalia (Puntland)	SRH practitioners	Newborn care Safe pregnancy, delivery & postpartum care Health system strengthening	Poor maternal and newborn health indicators in Somalia.	Information not readily available.	Product (digital) Service (training)	Adaptation	Pilot	IAWG - SRH Innovations in Humanitarian Settings: Experiences in service delivery, data collection, and supporting staff
Online medical abortion training course for humanitarian practitioners	2019 - ongoing	MSF along with howtouseabortionpill.org launched a free, open-source, evidence-based online course on medication abortion, or abortion with pills, to teach humanitarian practitioners how to safely provide information and abortion services to women and girls in humanitarian aid settings. The online training consists of five animated videos that provide a solid foundation in how to safely administer an abortion with pills and support women through the process.	MSF & howtouseabortionpill.org	Global	SRH practitioners	Safe abortion/ post-abortion care	People living in crisis and conflict situations don't commonly have access to computers, smartphones, or the Internet. That is why it's essential for humanitarian workers to learn about medication abortion and share their knowledge.	The online course is designed to train humanitarian aid workers in how to safely provide medication abortion, or abortion with pills.	Service (training)	Adaptation	Scale	How to use abortion pill - Lesson 1: An Overview on Abortion
Home-based safe abortion with remote management by midwives in the Middle East	2020 - ongoing	Use of misoprostol for home-based safe abortion with remote management by midwives for women in the Middle East. During COVID-19, some MSF programmes have also provided self-managed medication abortion at home with support from hotlines, digital platforms and peer educators	MSF	Middle East	Women of reproductive age	Safe abortion/ post-abortion care	The innovation addresses the secondary effects of COVID-19 on the continuity of services, specially interruption of sexual and reproductive health that may impact the lives of women and girls.	Self-managed abortions do not require in-person visits to health care facilities and offer an option to women living in places where abortion is not readily available.	Mode of delivery (self-care)	Adaptation	Pilot	Key Informant Interview
An app to assist Syrian refugees in navigating the health system and accessing services in Turkey (HERA)	Information not readily available	The HERA app is an open-source mobile application specifically designed for the Syrian refugee population in Turkey. Encourages uptake of antenatal care and child immunisations among other health services.	HERA & Just One Giant Lab (JOGL)	Turkey	Women of reproductive age Refugees	Safe pregnancy, delivery & postpartum care	Lack of access to health services for Syrian refugees in Turkey.	Information not readily available.	Product (digital)	Adaptation	Information not readily available	Project HERA
A new middle-upper arm circumference (MUAC) tape for illiterate TBAs in Burkina Faso to screen pregnant women for malnutrition (Project Fada Ngourma)	Information not readily available	Development of a MUAC tape readable by illiterate TBAs to identify malnourished pregnant and lactating women using colours.	MSF	Burkina Faso	Women of reproductive age Internally displaced persons Host communities	Safe pregnancy, delivery & postpartum care	Malnutrition of pregnant and lactating women which can result in low birth-weight babies and issues with newborn care.	An improvement in the collection of data on malnutrition among pregnant and lactating women and on quality of screening for malnutrition.	Product (non-digital)	Adaptation	Information not readily available	Key Informant Interview

Point-of-care ultrasound training for HCPs in Yemen	2020 - ongoing	Bridge to Health Medical and Dental USA, with MedGlobal, is developing a point of care ultrasound training programme that will increase the efficiency and accuracy of triaging and diagnosing critical patients. The innovation will strengthen the healthcare system by training local health care providers in Yemen in use of a novel ultrasound with cloud-based monitoring, focusing on pneumonia, trauma, and complications of pregnancy. Healthcare providers will be trained to use the innovation in hard-to-reach conflict zones and upload scans to a cloud-based system for remote viewing by experts to provide quality assurance, mentoring, and ultimately certification as independent providers.	Bridge to Health Medical and Dental USA & MedGlobal	Yemen	SRH Practitioners	Safe pregnancy, delivery & postpartum care	Presently, Yemen is experiencing the largest humanitarian crisis in the world, with an estimated 80% of the population in need of assistance or protection. Consequently, the health system is on the verge of collapse resulting from a critical shortage of health care providers and functional health facilities disproportionately impacting vulnerable populations such as women and children. Additionally, diagnostic imaging is rarely accessible in Yemen, leaving healthcare providers with little support.	Information not readily available.	Product (non-digital) Service (training)	Invention	Pilot	Humanitarian Grand Challenge - Point of Care Ultrasound in Yemen
Micro-franchised community health workers (CHWs) to extend maternal and child healthcare in South Sudan	March 2013 - March 2016	The innovation tested was a novel, micro-franchised social enterprise business model to allow 200 CHWs to generate income, with incentives for their work to reduce maternal and child mortality. The objective was to establish a public-private enterprise of micro-franchised mobile health workers that would extend healthcare throughout South Sudan to those who need it most. Activities included development of: 1. A standardised training module for mobile health workers 2. A standardised kit and inventory of health supplies and products 3. A standardised, SMS-based inventory and patient contact management system. Initial health worker training can be undertaken by hospital or clinic staff. The workers and their home-based clinics then earn a viable income, based on clients served and products sold. Additional revenues can be generated from contracts with NGOs or donors for implementing public health campaigns.	Cape Breton University, South Sudan government	South Sudan	Women of reproductive age SRH Practitioners	Safe pregnancy, delivery & postpartum care	The use of community health workers (CHWs) is a common strategy to reach people from low-income, rural and marginalised communities in many countries, including South Sudan. However, because these workers are often unpaid, it is a challenge to keep them motivated to deliver the necessary health services.	Information not readily available.	Mode of delivery Approach to scale and dissemination	Adaptation	Pilot	Grand Challenges Canada - Micro-franchised community health workers extending maternal and child health care in south Suda
E-partograph to facilitate the referral of women with obstetric emergencies among refugee hosting communities in Uganda	Information not readily available	Development and testing of a synchronised e-partograph to improve management of intra-partum care and support the referral system for emergency obstetric care among refugee hosting communities in Adjumani district, Uganda. The Makerere University School of Public Health developed and studied the viability of a portable electronic partograph (e-partograph) prototype.	The Makerere University School of Public Health	Uganda (Adjumani District)	Women of reproductive age Refugees Host communities	Safe pregnancy, delivery & postpartum care Health system strengthening	Difficulties with referrals for Emergency Obstetric Care.	This innovation sought to reduce the time it took for Primary Health Care (PHC) centres to refer mothers who are experiencing emergency obstetric complications to a referral hospital.	Product (digital)	Adaptation	Adaptation	Grand Challenges Canada - Developing and testing a synchronised e-partograph to improve management of intra-partum care and support the referral system for emergency obstetric care among refugee hosting communities in Adjumani district, Uganda