



GREENLAMP

A bright future for women and girls



«Never doubt that a small group of thoughtful committed citizens can change the world; indeed, it's the only thing that ever has.»

– Margaret Mead



THE PROBLEM IS...

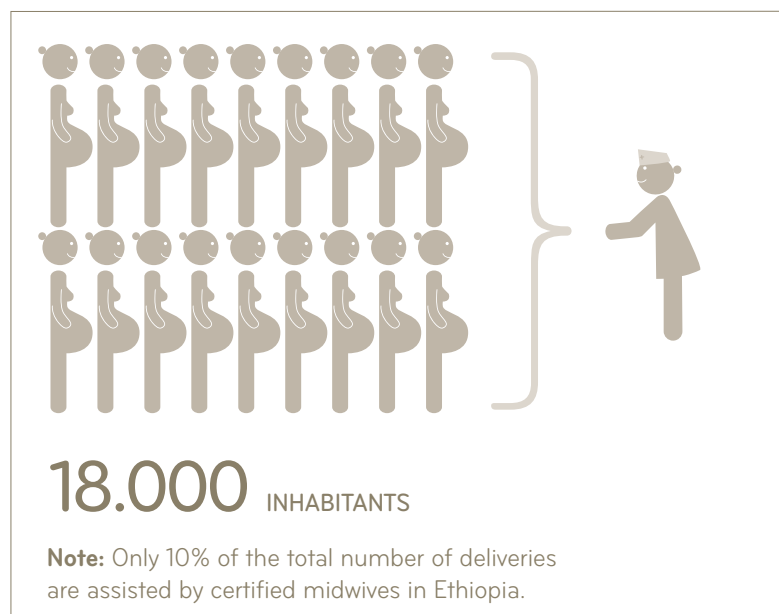
While Ethiopia is one of the fastest growing economies in Africa and is home to the African Union, over a third of its people are ultra-poor, living on less than USD 1.25 a day.¹ The size of the country means that in rural areas where poverty is concentrated, populations are dispersed over large areas and families and communities struggle to access health services and infrastructure. For a population of almost 100 million, Ethiopia has less than 200 obstetricians/gynecologists and less than 5,000 trained midwives.² This is too few, especially as many women in rural areas live great distances from the most basic health facilities and do not benefit from knowledge and contraceptives to delay and space their pregnancies.

Ethiopia's maternal mortality rate (MMR) remains among the highest in Africa and the world at 420 female deaths per 100,000, compared with 6 per 100,000 in Switzerland.³

Number of inhabitants per midwife

ETHIOPIA

PRESENT SITUATION



RECOMMENDATION

WORLD HEALTH ORGANIZATION



Source: <http://countryoffice.unfpa.org/ethiopia/drive/StateofEthiopiaMidwifery.pdf> 2012

¹<http://mdgs.un.org/unsd/mdg/Data.aspx>

² Maternal Health: Investing in the Lifeline of Healthy Societies & Economies, Africa Progress Panel Policy Brief September 2010. www.who.int/pmnch/topics/maternal/app_maternal_health_english.pdf

³http://www.unicef.org/gambia/Maternal_Mortality_Rate_2013.pdf



Obstructed Labor and Fistula

As pregnant women in rural Ethiopia have little or no access to emergency obstetric services, they often face obstructed labor. After days of agonizing labor women almost always lose their baby and may die themselves. Those who survive suffer extensive internal damage caused by prolonged pressure on their organs and tissues. This results in a condition called obstetric fistula, which is almost unknown in Switzerland, but unfortunately common in rural areas of Ethiopia. As tissue of the birth canal, urinary and digestive tracts are destroyed, permanent fistulas (holes) between these structures result from the healing process and women are left in a miserable condition of incontinence and infection. As a result they are socially excluded and stigmatized.

The scale of maternal mortality remains very high in low-income countries. According to the United Nations Population Fund (UNFPA), every two minutes, somewhere in the world, a woman dies in pregnancy or labor. In Ethiopia alone, approximately 9,000 women die in obstructed labor each year with another 9,000 surviving, but with fistula⁴.

Inadequate and unreliable electricity supply

Ethiopia's electrical power reaches just over half of the country and only a quarter of the population has access to it. This includes rural health centers that are often without consistent electricity and lighting. As a result, women delivering in a health center at night often give birth in the dark, preventing midwives from properly detecting and managing life-threatening complications such as obstructed birth, postpartum haemorrhage or newborn asphyxia⁵. As a consequence women and children are needlessly harmed or die.

Mother and infant mortality rate

ETHIOPIA

SWITZERLAND

MOTHER	INFANT		MOTHER	INFANT
420		<p>MMR: The Maternal mortality rate is the annual number of female deaths per 100,000 live births from any cause related to or aggravated by pregnancy or its management (excluding accidental or incidental causes).</p> <p>IMR: Infant mortality rate compares the number of deaths of infants under one year old in a given year per 1,000 live births in the same year</p>		
	47		6	3.9

Source: http://www.countdown2015mnch.org/documents/2014Report/Countdown_to_2015-Fulfilling%20the%20Health_Agenda_for_Women_and_Children-The_2014_Report-Conference_Draft.pdf

⁴ www.hamlinfistula.org

⁵ Sources: <http://www.vanguardngr.com/2015/05/ethiopias-electric-power-coverage-reaches-55/> and <http://data.worldbank.org/indicator/EG.ELC.ACCTS.ZS/countries/ET?display=default>

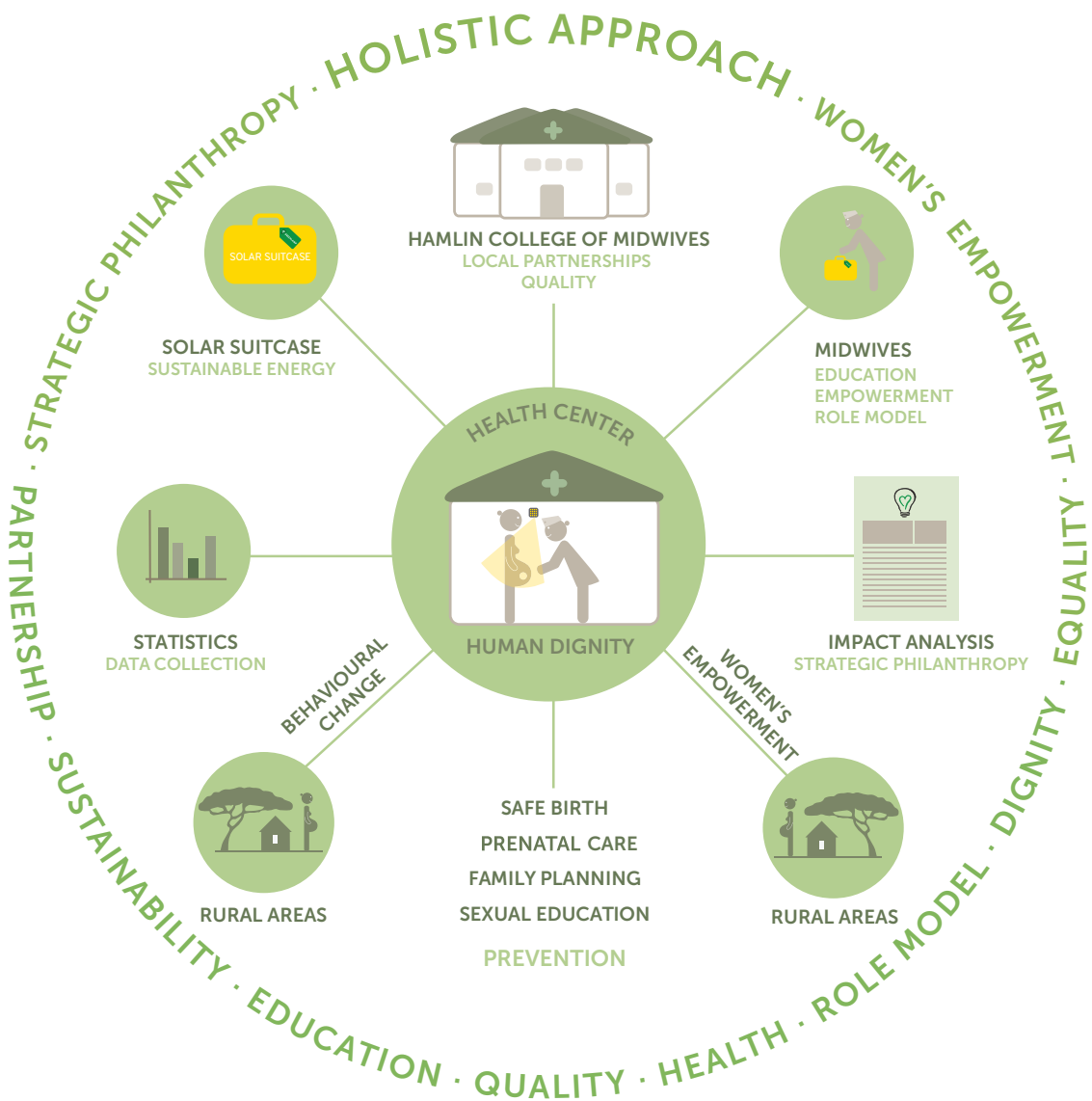


OUR HOLISTIC APPROACH | LEARN · LIGHT · LEAD

GreenLamp supports **community-to-community projects** to address avoidable harm in maternity by:

- Funding the **training of midwives** from poor rural areas to increase the number of skilled birth attendants in underserved areas.
- Providing **sustainable, reliable light and power** in rural health centers to support safe deliveries in rural areas of Ethiopia.
- Encouraging **positive behavioral change** by creating conditions whereby mothers want to give birth at the nearest **health center**. Our projects are also designed to have a **positive impact** on **women's empowerment** and **community development** by promoting midwives as **role models**.

We work hand-in-hand with communities and local authorities to ensure the sustainability of our projects and take an approach of promoting the human rights of women and girls, inspired by the African proverb: «...if you educate a woman, you educate a community». Our vision is to strive for a bright future for women and girls.





Why we are doing it

Our objectives are to:

- **improve delivery conditions** in rural Ethiopia.
- **prevent traumatic birth injuries**, e.g. fistulas, maternal and newborn death.
- **empower women and girls** to live their life in dignity through improved health and opportunities for midwifery training.

How we do it

Midwifery Training Scholarships

GreenLamp works hand-in-hand with our local Ethiopian partner, the Hamlin College of Midwives in Addis Ababa, founded by Dr Reginald Hamlin and Dr Catherine Hamlin (recipient of the Right Livelihood Award 2009 - also known as the "Alternative Nobel Prize"). The Hamlin College of Midwives, founded in 2007, has over 70 midwives in training at any one time and is an important partner in developing a sustainable strategy for safe maternity and fistula prevention in Ethiopia.⁶

GreenLamp provides scholarships to fund the training of young women, recruited from the underserved provinces, to become midwives. With our support they are able to study for four years and qualify with a Bachelor of Science in Midwifery. Our first GreenLamp-funded midwife graduated in 2014.

It costs \$4,500 each year to train and accommodate one midwifery student. After graduation they are deployed to rural health centers in their home regions and fill the gaps in skilled birth attendants in their own communities. With their training they prevent birth injuries through prenatal and postnatal care, as well as skilled deliveries in a clean environment. To empower women to space their pregnancies, they provide family planning and reproductive health advice. This not only improves the quality of women's and children's lives, but there is an estimated 140-600% return on investment in family planning methods resulting from the reduced health care costs.⁷

«If you want to unlock the most progress for the most people, start by investing in women and girls»

–Melinda Gates⁸



⁶ www.hamlinfistula.org

⁷ Carr, Bob; Melinda French Gates; Andrew Mitchell; Rajiv Shah (14 July 2012). "Giving women the power to plan their families". *The Lancet* 380 (9837): 80–82.

⁸ www.refinery29.com/2015/05/87344/12-photos-melinda-gates-india#m05g16t20w15



Light for Life Solar Suitcase

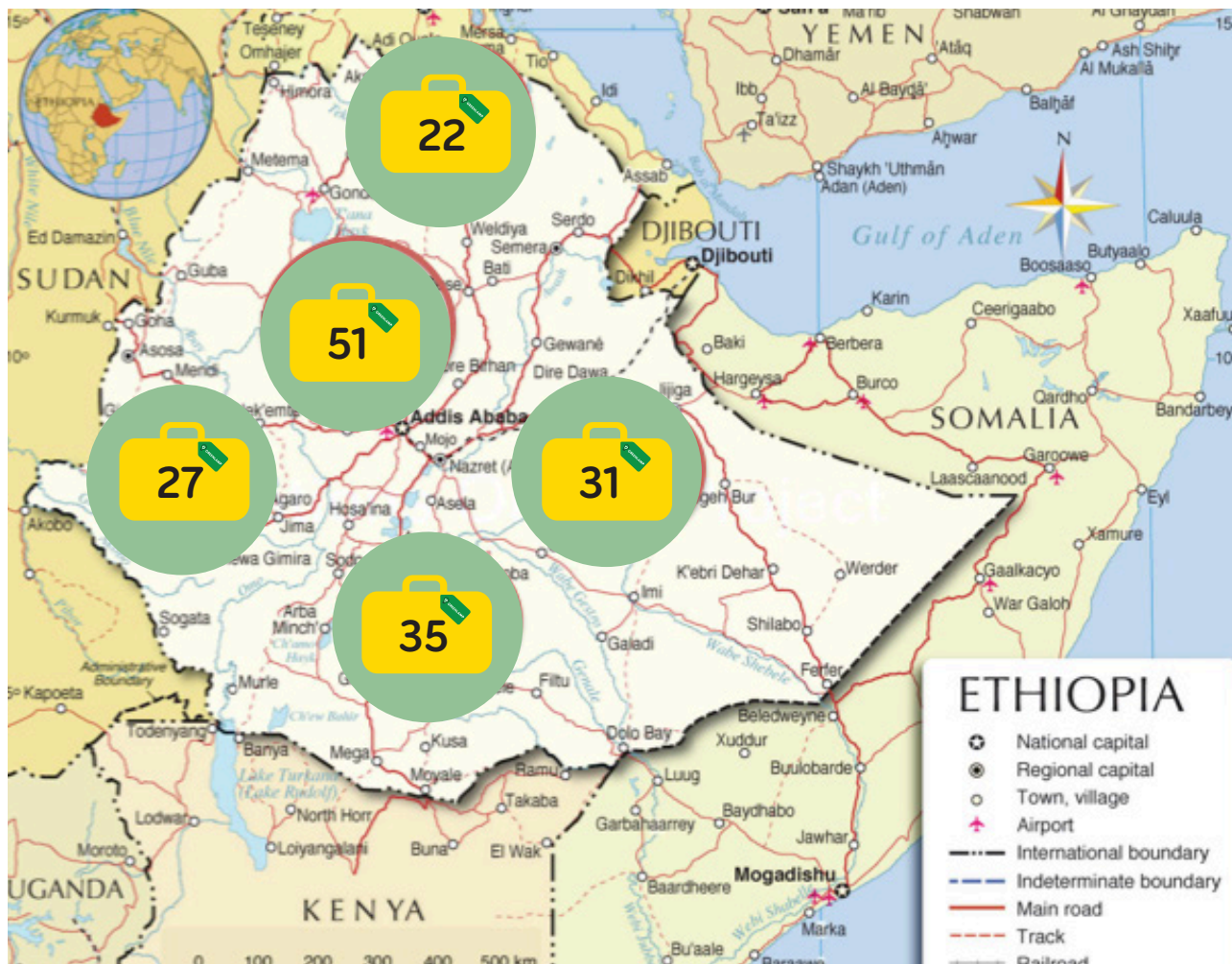
Access to emergency obstetric care provided by certified midwives in equipped health centers with electricity, and referral to higher level facilities, can decrease risks for mothers and newborns.

GreenLamp provides compact, mobile solar power in the form of "Solar Suitcases" containing solar panels that with a day's charging from sunlight can power the specially developed medical lighting system, phone chargers and fetal monitors. A midwife with access to a Solar Suitcase can improve the quality of maternal and newborn health care using renewable and sustainable energy.

Five regions in Ethiopia have received GreenLamp-funded Solar Suitcases as part of our master plan to install 166 units by the end of 2015. A total of over one thousand health staff have been trained in their use (up to 10 per facility) to ensure that the equipment is optimally maintained and used to provide night-time medical lighting. This has a positive impact, not only on mothers and their babies, but on midwives themselves who are enabled to provide better care.

Machse Beley, a Hamlin-graduated midwife at Agita Health Centre, where a Solar Suitcase was installed by GreenLamp in March 2014 says: «Without the Solar Suitcase, I would not be able to stay and work here. This health center has no other light source, no electricity and is in a very rural area.»

Solar Suitcases installed per region





OUR PARTNERS

GreenLamp has strong local, Swiss and international partnerships. Apart from the highly valued partnership with the **Hamlin College of Midwives** in Ethiopia, the California-based NGO **We Care Solar** supplies the Solar Suitcases. Within Switzerland the **UBS Optimus Foundation** generously matched the funds raised by GreenLamp Franc-for-Franc which enabled our efforts to be doubled during last year's Light for Life Solar Suitcase project.

EVALUATION OF OUR IMPACT

Incorporating effective monitoring and evaluation is vital to the success of any strategic philanthropy project. GreenLamp's monitoring and evaluation demonstrates that where a Solar Suitcase has been installed and a trained midwife is present, women are increasingly arriving to give birth at these regional health centers. This indicates that we are achieving the positive behavioral change that we are aiming for.

The impact of a Solar Suitcase on raising women's trust in delivery centers was highlighted by Gezework Alemante, midwife at the Ambessane Health Center, in Amhara Region: «I am so happy we have the Solar Suitcase. I never worry about light at night. The community knows about the light here, and we also tell them at the prenatal care visits. No more babies are dying because there is no light at the Health Center.»



Latest Statistics⁹

An increase of **65% in safe deliveries.**

More than a **200% increase in the 4 prenatal visits** as recommended by the WHO¹⁰

70% more families bring their newborn in for a post-natal check up, a very important step in decreasing infant mortality.

Almost **80% more women** come for family planning and reproductive health advice.

⁹ Data released October 2015 and collected by our local partner, Hamlin College of Midwives, from 17 health centers that have had a Solar Suitcase in use and two trained midwives present for a period of 18 months.

¹⁰ World Health Organization



YOU CAN SUPPORT US IN MANY DIFFERENT WAYS

Get involved with GreenLamp and together we can have a positive impact – particularly for women and girls in rural Ethiopia:

- **Join our community-to-community initiatives** by attending our events and receiving our communications.
- **Become a Member of GreenLamp** and help us to continue to work on a voluntary basis, so that all our fund raising can continue to go directly to our projects.
- **Make a donation or sponsor our events.** All donations above CHF 100 are eligible for a tax deduction in Switzerland. Donors are welcome to reference their donations to GreenLamp in their own corporate materials.
- **See that your contribution is making a tangible difference** as our progress is charted through rigorous monitoring, evaluation and reporting.

Account Details

GreenLamp, Langackerstrasse 139,
CH-8704 Herrliberg, Switzerland
Swiss Franc Account **IBAN CH47 0023 0230 1884 3701 W**

GreenLamp currently has eight board members; all work pro bono.
Additional volunteers provide support for events and special needs.

GreenLamp is funded through charitable donations, membership fees and sponsorship. We are a registered Swiss non-profit association founded in November 2012. Our annual accounts are externally audited. We run on volunteerism and 100% of charitable donations go directly to our projects.

«Corporate Social Responsibility can be much more than a cost, a constraint, or a charitable deed –it can be a source of opportunity, innovation, and competitive advantage.» – Harvard Business Review



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