For Immediate Release

July 23, 2015

PRESS RELEASE

Saving Lives at Birth: A Grand Challenge for Development *Announces Round 5 Award Nominees for Innovative Solutions to Prevent Maternal, Infant Deaths in the Hardest to Reach Regions of the World*

Program Announces Partnership with the
Korea International Cooperation Agency at Annual Development[X]Change

WASHINGTON – The *Saving Lives at Birth: A Grand Challenge for Development* announced 17 new award nominees in its fifth global call for groundbreaking solutions to protect mothers and newborns during their most vulnerable hours. Between July 21- 22, 2015, the 53 finalists participated in the final stage of the competition at the annual Development[X]Change in Washington, D.C. which serves as a launching pad for innovators and new grantees to network, collaborate, learn and forge partnerships to help develop and scale the next transformational innovations in childbirth. The two-day Development[X]Change also included a pitch competition featuring 14 diverse innovations from the existing portfolio that are showing great promise for partnership and further investment.

The program also announced a new partnership with the Korean International Cooperation Agency (KOICA). KOICA joins the U.S. Agency for International Development (USAID), the Government of Norway, the Bill & Melinda Gates Foundation, Grand Challenges Canada (funded by the Government of Canada), and the U.K's Department for International Development (DFID) in this effort to seek innovative prevention and treatment approaches for pregnant women and newborns in low-resource settings.

"Saving Lives at Birth mobilizes the world's brightest thinkers, researchers and entrepreneurs around maternal and newborn survival," said President KIM Young-mok of KOICA. "KOICA is thrilled to join this partnership, which is an impressive global platform for catalyzing groundbreaking innovation with impact."

Launched in 2011, the *Saving Lives at Birth* partnership has provided over $47 million in funding to 81 innovative tools and approaches over its first four rounds. Many of the program's successful initial investments are already having an impact as they begin to scale. To date, these innovations have benefited over 1.5 million women and newborns, saving at least 4,000 lives. KOICA intends to commit an additional $5 million to the program to continue efforts in support of the development and scale-up of potentially transformational innovations to catalyze progress.

The 17 award nominees were selected from more than 750 submissions. More than half of the applications came from low-and middle-income countries. Additional nominees for transition-to-scale awards (up to $2 million) will be announced later this year.

Award nominees of Saving Lives at Birth Round 5 include 13 validation nominees (around $250,000):

- **Bempu Health Private Ltd -** Bangalore, Karnataka, India: *Introduction of a simple, low-cost newborn wristband that alerts a mother in case of hypothermia, enabling early action in India.*
- **Bioceptive, Inc .-** New Orleans, Louisiana, USA: *Validation of a novel, reusable IUD inserter in Bangladesh to expand access to long-acting reversible contraception.*
- **Emory University -** Atlanta, Georgia, USA: *Validation of a microneedle patch for tetanus toxoid vaccination.*
- **Ifakara Health Institute -** Dar Es Salaam, Tanzania: *Testing the emergency aerial delivery of blood and lifesaving medicines to mothers in rural Tanzania.*
- **Lucky Iron Fish Inc**. - Guelph, Ontario, Canada: *Scale-up of Lucky Iron Fish™: a low-cost, innovative solution to iron deficiency saving lives of women and children in urban Cambodia*.
- **Mbarara University of Science and Technology -** Mbarara*, Uganda: Testing of the Augmented Infant Resuscitator (AIR), which provides instant feedback to enable self-training, skills retention, and rapid corrective action for health workers in Uganda.*
- **Moi University College of Health Sciences -** Eldoret, Kenya: *Testing a peer-support model that groups pregnant women together in the same community to receive maternal and child health services.*
- **Nanobiosym, Inc. -** Cambridge, Massachusetts, USA*: Validation of the Gene-RADAR® nanotechnology platform to detect early HIV in infants in Rwanda.*
- **PATH -** Seattle, Washington, USA: Validation of the NIFTY™ cup, a simple, safe, ergonomic, and affordable tool designed to optimize breast feeding to preterm infants and other infants with breastfeeding difficulties.
- **The Mintaka Foundation for Medical Research** - Geneva, Switzerland: *Further development of a highly heat-resistant and non-invasive form of oxytocin to reduce maternal death through post-partum hemorrhage.*
- **University of Michigan** - Ann Arbor, Michigan, USA: *Design and assessment of a task-shifting assistive contraceptive insertion device to increase access to long-term contraception in low-resource settings.*
- **University of Nairobi** - Nairobi, Kenya: *Validation of a sustainable, barcode-based incentive system that rewards mothers with discounts on essential items to encourage ANC attendance in Kenya.*
- **WHO** - Geneva, Switzerland: *Clinical validation of the Odon device for assisted vaginal delivery.*

And 4 seed grant nominees (up to $250,000):

- **Diagnostics for All** - Cambridge, Massachusetts, USA: *Development of a single point-of-care, sensitive, low-cost, rapid, paper-based diagnostic test for anemia, HIV, HBV, and syphilis to streamline the screening of pregnant women during antenatal care.*
- **Georgia Tech Research Corporation** - Atlanta, Georgia, USA: *Development and testing of a low-cost, portable technology to assess the risk of obstructed labor in Ethiopia.*
- **University of Toronto** - Toronto, Ontario, Canada*: Development of quadruple fortified salt for simultaneous delivery of iron, folic acid, vitamin B12 and iodine.*
- **William Marsh Rice University** - Houston, Texas, USA: *Development of a low-cost, point-of-care bilirubin measurement device to diagnose neonatal jaundice and monitor phototherapy in low resource settings.*

Saving Lives at Birth is a global call for groundbreaking, scalable solutions to infant and maternal mortality around the time of birth. It aims to address the 287,000 maternal deaths, 2.9 million neo-natal deaths, and 2.6 million stillbirths that occur each year around the world.

To learn more about the Saving Lives at Birth and its five rounds of innovators working in maternal and newborn health, go to: www.savinglivesatbirth.net