**Speaker Biographies**
(Alphabetical by first name)

**Alex Manu**

Dr. Manu, until the start of this year, was the Medical Officer (Newborn Health Research & Guidelines Development) at the Maternal, Newborn, Child and Adolescent Health Department, World Health Organization/HQ in Geneva, Switzerland. He is an MD by background, holds a Master’s degree in Medical/Bio-statistics and PhD in Epidemiology from the University of London (School of Hygiene and Tropical Medicine, LSHTM). He has substantial experience working in developing country settings, in both community- and facility-based interventions from their design, through implementation to evaluation. He has played lead roles as principal investigator/coordinator of very high-profile research in developing country settings. At WHO, he coordinated the multi-country, multi-centre AMANHI cohort harmonization study that estimates the burden, causes and distribution of maternal, fetal and newborn mortality & morbidity, assessed gestational age to identify preterm newborns and established bio-repositories of maternal, paternal and newborn biological samples to test hypothesized biomarkers of adverse pregnancy and birth outcomes (including preterm births) in sub-Saharan Africa and South Asia. He also played lead roles in the WHO team that developed the WHO recommendations for improving outcomes of preterm births. Previously at the Kintampo Health Research Centre (Ghana) and University of Ghana Medical School, Dr Manu led many maternal and child health interventions including Ghana Newhints study and Malaria Vaccine trials. He is currently a lecturer at the LSHTM, consultant to UNICEF/HQ on the Every Mother Every Newborn Quality Improvement Initiative, and Save the Children USA on the preterm birth strategy. His interests are in health systems strengthening to ensure equitable and improved quality of MNCH care, newborn survival including preterm births and early child development interventions.

**Amanuel Gidebo**

Amanuel Gidebo is originally from Ethiopia and currently lives in Canada and works for World Vision Canada as MNCH technical specialist. In the past 15 years, Dr. Gidebo has worked with government and nongovernment organizations in various capacities including as district health officer, nutrition program manager and MNCH technical specialist. He graduated from Jimma University in Ethiopia with Degree of doctor of medicine and studied MPH in University of Brussels in Belgium. Dr. Gidebo worked with Ministry of Health in Ethiopia as general practitioner and district health manager before joining the humanitarian/development field. Dr. Gidebo also worked for Save the Children and World Vision in Ethiopia. He joined World Vision Canada in 2008 and have been serving in various capacities including resource mobilization and technical advice to World Vision’s MNCH and nutrition programs overseas in multiple countries, primarily in Africa and Asia both in development and emergency contexts. Maternal and child health and health systems in fragile contexts are his major areas of interest. Currently he provides technical leadership to the Born On Time initiative as well as World Vision Canada’s MNCH and nutrition work in humanitarian settings (fragile contexts and emergencies) on programmatic and policy matters.
Andreas Kuznik

Dr. Andreas Kuznik is Senior Director in the department of Health Economics and Outcomes Research at Regeneron Pharmaceuticals. In 2011, he spent 6 months as a Pfizer Global Health Fellow at the Infectious Diseases Institute in Kampaala, Uganda, where he first began to apply health economic modeling techniques to infectious diseases in resource limited settings. Dr. Kuznik and his academic collaborators have since published extensively on the cost-effectiveness of medical interventions in the therapeutic areas of HIV/AIDS, Tuberculosis, Syphilis, Sickle-cell Disease, and Snakebite envenoming. One particular area of interest and research focus has been antenatal care, where Dr. Kuznik’s research findings suggest that a significant improvement in public health could be achieved for relatively little cost. Among the various medical interventions available for antenatal care, syphilis screening appears to be particularly attractive from a public health and health economic point of view, which is the topic of today’s discussion.

Anthony Costello

Dr. Anthony Costello is a renowned international expert on maternal, newborn and child health and the Director of the Department of Maternal, Newborn, Child and Adolescent Health at the World Health Organization. Dr. Costello is the founder of the NGO - Women and Children First, and has chaired two Lancet Commissions on Health and Climate Change, with the most recent Commission report published in June 2015. Dr. Costello has always brought together research and action: he began his research career with studies of energy metabolism of the infant brain as Field Director and Medical Officer at Save the Children in Nepal. Based in a remote rural district, he led a public health programme for mothers and children and helped start MIRA (Mother and Infant Research Activities), now the largest health research organisation in Nepal. As Professor of International Child Health Dr. Costello also studied social and equity determinants of maternal and newborn health, nutrition and food security in pregnancy and infancy, and modelled the impact of life-saving drugs and hygiene for maternal and perinatal mortality. He has led programmes in collaboration with a number of bilateral and multilateral organizations and NGO’s, and for the past four years, represented UCL on the Board of The Partnership for Maternal, Newborn and Child Health. Dr. Costello has been awarded several fellowships: at the Royal College of Physicians, London; Royal College of Paediatrics and Child Health; and the Academy of Medical Sciences. He also received the highest honour of the Royal College of Paediatrics and Child Health for his research - the James Spence medal. Dr. Costello has served as UCL Pro-Provost for Africa and the Middle East, and Honorary Consultant Paediatrician at the UCL Hospital for Tropical Diseases and the Great Ormond Street Hospital for Children.

Charlotte E. Warren

One of Population Council’s lead social scientists in maternal and newborn health (MNH), a nurse (UK Registered Sick Children and General Nurse) with a Masters in Primary Health Care and a PhD in Health Sciences from Ghent University; has over 25 years of maternal and newborn, and reproductive and public health implementation experience with over 17 years of living and working in Africa and focuses on developing innovative solutions to improving access to MNH services. Dr. Warren is the director of the Ending Eclampsia Project which seeks to expand access to proven underutilized interventions and commodities for the prevention, early detection, and treatment of pre-eclampsia and eclampsia and strengthens global partnerships. Dr. Warren leads the ground breaking study on measuring the prevalence of disrespect and abuse during childbirth in Kenya, including developing solutions to promote respectful maternity care. She is also the study PI to identify barriers that women living with fistula in developing countries face, which prevent them from seeking and reaching adequate and appropriate care (Nigeria and Uganda) as well as implementation research on integrating SRH and HIV services and postnatal care (Kenya and Swaziland). Warren has extensive experience planning, developing and managing reproductive health and MNH projects, policy with a particular focus on Africa. She has experience in program management, training and quality assurance, implementation research, and design of models of health care integration and emergency public health.
Felicity Ukoko

As an award-winning, skilled midwife with over 20 years experience in the United Kingdom, Felicity Ukoko has unparalleled insight into the needs of mothers and babies. Drawing from this insight and expertise, she has become a global advocate for maternal, newborn and child health at the Wellbeing Foundation Africa. Born in Gweru, Zimbabwe and trained as a nurse at Parirenyatwa Hospital, Felicity began her career as a midwife in the UK National Health Service (NHS) where she was promoted rapidly to a management position. During her time at the NHS, Felicity pioneered clinical governance and introduced Respectful Maternity Care (RMC) principles into Newham Hospital and Queen's Hospital, which led to RMC now being a major part of midwifery training in these facilities – a legacy that will hopefully change health outcomes for many mothers. Outside of the NHS, Felicity has worked with Imperial College Health Partners, a designated Academic Health Science Network. In 2005, Felicity won an award from the British Journal of Midwifery for her work with pregnant asylum seekers awaiting dispersal. She is also a champion for the White Ribbon Alliance (WRA) and Founder-member of WRA Zimbabwe. In her role at WBFA, Felicity advocates on a global scale for the rights of mothers and their babies to respectful, quality care. She was recently invited to join the Global Steering Committee for the Public Private Partnership to Prevent Preterm Births with a focus on Nigeria. Felicity holds a B A Honours in Midwifery and Women’s Health and Masters in Public Health.

Gloria Adoyi

Gloria Adoyi is a Program Coordinator for Population Council in Nigeria, working under the Reproductive health unit of the organization. For the past 4 years, she has been working around the prevention and management of pre-eclampsia and eclampsia in northern Nigeria and nationally. She successfully completed the second phase (completed in 2014) of MacArthur-funded maternal mortality reduction project in Kano where tremendous successes were recorded. She has effectively coordinated field activities in Kano and the Council’s collaboration with regulatory authorities and teaching institutions in the country to ensure that PE/E and Magnesium Sulphate are on their pre-service teaching curriculum. She has rigorously monitored project facilities in the state and facilitates the collection of quality data from various sites through frequent supervision and mentoring of Health care providers. This has led to the early detection of PE/E in pregnant women by health care providers. She has also participated in the development of a training guide for Community Health Practitioners on PE/E and on the use of MgSO4. Gloria is currently working on both the third phase of the MacArthur project and the USAID-funded Ending Eclampsia project as the project officer; she also assists in the Fistula care plus project in Nigeria.

Janneke Hartvig Blomberg

Janneke Hartvig Blomberg is a Senior Manager of the Maternal, Infant and Young Child Nutrition (MIYCN) Global Program at the Global Alliance for Improved Nutrition (GAIN), where she besides managing a part of the overall global portfolio of projects, is responsible for the technical quality of the global program. Janneke joined GAIN after 4 years as Nutrition Specialist with the World Bank (Africa region) where she was responsible for the provision of nutrition technical support on a range of investments including in the health, social protection and agriculture sectors, besides responsible for the World Bank investments in nutrition in Tanzania, notably on food fortification. Prior to this she co-developed and coordinated the BSc degree in “Public Health Nutrition and Food Policy”, a first of its kind globally, at the WHO collaborating center Metropol University College, Denmark.

Janneke comes from a background as project manager for nutrition programs in both national and international NGOs and has a MSc in Public Health Nutrition from the London School of Hygiene and Tropical Medicine, UK and a Honors BSc in Nutritional and Nutraceutical Sciences from University of Guelph, Canada.
Jeffrey M. Smith

Dr. Jeffrey Smith is an obstetrician/gynecologist and public health practitioner with 25 years of clinical and public health experience in developing countries, across Asia, Africa and Latin America. He works for Jhpiego as the Vice President for Technical Leadership based in Baltimore and until recently was the Maternal Health Team Leader at the USAID-supported Maternal and Child Survival Program, in Washington, DC. He is also Assistant Professor of Gynecology and Obstetrics in the Johns Hopkins University School of Medicine and of International Health in the Johns Hopkins University Bloomberg School of Public Health. In addition to his technical management positions within Jhpiego, he spent 10 years in Asia leading maternal and reproductive health programs in Nepal, Afghanistan and Thailand.

Jeniece Alvey

Jeniece is a Nutrition Advisor at USAID in the Bureau for Global Health. She has over five years of experience in global reproductive, maternal, newborn and child health, and nutrition. Prior to joining USAID, Jeniece supported reproductive health research and evaluation activities for the Measurement, Learning & Evaluation Project at the University of North Carolina at Chapel Hill’s Carolina Population Center, the evaluation arm of the Urban Reproductive Health Initiative in Kenya, Nigeria, Senegal and India. She has conducted nutrition research in Quetzaltenango, Guatemala, working on various projects, including infant and young child feeding practices, validation studies of non-invasive hemoglobin monitoring devices, and community nutrition environments. She has also worked domestically in Boston, MA with an obesity prevention study for immigrant mothers and children and a vitamin D supplementation RCT with elementary school children. Jeniece is an International Board Certified Lactation Consultant and earned a Master of Public Health in Maternal and Child Health from the University of North Carolina at Chapel Hill and a Bachelor of Science in Anthropology from the University of California, Los Angeles.

Jim Litch

Dr. Jim Litch MD, DTMH is director of the Global Alliance to Prevent Prematurity and Stillbirth (GAPPS) Perinatal Interventions Program (PIP), evidence, learning and research lead for the USAID-funded Every Preemie—SCALE program, and clinical assistant professor, Department of Global Health and Department of Epidemiology at the University of Washington, Seattle. Dr. Litch focuses on strategic planning, continuous performance improvement, critical assessments, and pragmatic innovation that create sustainable integrated solutions to bottlenecks in the global effort to reduce preventable maternal, fetal, and newborn mortality and morbidity. This includes translation, implementation, and evaluation of essential clinical interventions and appropriate technology approaches to low resource settings that strengthen health systems and improve the health of communities and families. Dr. Litch’s work in global health began nearly 25 years ago and has lived and worked in a number of settings in Asia and Africa. This includes 6 years in Nepal and India where his efforts ranged from a front-line physician, and then director of a rural hospital and clinic system integrated with a comprehensive community health program, to senior advisor to the Family Health Division of the Nepal Ministry of Health. He has held positions with PATH, Center for Disease Control and Prevention (CDC), University of Washington, and Johns Hopkins University/JHPIEGO. Dr. Litch serves on several interagency working groups and advisory groups, and convenes the PTB/LBW Global Technical Working Group on Implementation Challenges and Solutions.
Judith Robb-McCord

Judith Robb-McCord has more than twenty years of management and leadership experience in international public health. She has designed and managed health programs for USAID in Kenya, Eritrea, Côte d’Ivoire and Ethiopia. Her work has predominantly focused on reproductive, maternal, newborn and child health; and infectious diseases including HIV/AIDS and malaria. Judith was the Director of USAID/Washington’s global Maternal & Neonatal Health Program for three years, and led the startup of the Bill & Melinda Gates funded Malaria Control and Evaluation Partnership Learning Community (MACEPA—LC) in southern Africa. She was also a senior technical advisor in the PEPFAR Country Coordination office at the United States Embassy in Zambia. Prior to joining PCI as the Director of Every Preemie—SCALE Judith worked with a range of partners including Saving Newborn Lives, Jhpiego, and FHI360 as a senior health development consultant. She received her Masters in African Area Studies and Masters in Public Health from UCLA.

Larry Rand

Dr. Larry Rand, Dr. Larry Rand is the Principal Investigator and Director of the California Preterm Birth Initiative (PTBi) at UCSF. The PTBi is a multi-year, transdisciplinary and multi-sector research effort jointly funded by Marc and Lynne Benioff and the Bill & Melinda Gates Foundation that emphasizes an integrated cell-to-society, place-based approach to reduce the burden of prematurity. The Initiative has two parallel, place-based programs, the first focused in California, and the other in East Africa (PI: Dilys Walker). Dr. Rand also serves as PI of C3, a jointly funded collaboration of both programs which focuses on strengthening Communication, Collaboration and Capacity-building within the maternal and newborn health community and hosts a robust 2-year transdisciplinary post-doctoral fellowship focused on prematurity. A Perinatologist, Dr. Rand holds the Lynne and Marc Benioff endowed Chair in Maternal Fetal Medicine and serves as the Director of Perinatal Services at the UCSF Fetal Treatment Center. He is the PI of Smart Diaphragm, a Gates Grand Challenges Phase II supported effort of a self-placed vaginal device that detects imperceptible changes in cervical collagen density, leveraging Bluetooth and cloud server technology to create an alert system to identify women at high risk of preterm birth at an earlier diagnostic window. He leads a multi-site qualitative effort in Kenya and South Africa to characterize maternal attitudes and practices toward device-based interventions in pregnancy, together with a human-centered design program to co-create culturally responsive technology to reduce adverse pregnancy outcomes in Sub-saharan Africa. Influenced by his work and training as an Anthropologist prior to medicine, Dr. Rand continues to pursue a focus on the dynamics of patient/provider interaction, with an emphasis on counseling and decision-making processes through a culturally-informed lens. As one of the leaders of UCSF’s Precision Health efforts, Dr. Rand is committed to building collaborative research infrastructure inclusive of both biological and social determinants of health/disease, and cements longitudinal community-partnership.

Laura A. Magee

Laura Magee is a general internist with Royal College of Canada Certification in Internal Medicine and Clinical Pharmacology. She has her MSc in Community Health (University of Toronto) and undertook a second clinical research fellowship (University of Oxford). Recently, Laura joined St. George’s, University of London, UK as a Professor of Maternal Medicine. She was formerly appointed at the Universities of Toronto (1996-2000) and British Columbia, Canada (2000-2015) in the Departments of Medicine and Obstetrics and Gynaecology (Division of Maternal-Fetal Medicine) and as a Senior Clinician Scientist at the Child and Family Research Institute, University of British Columbia. Laura is focussed on medical complications of pregnancy, particularly the hypertensive disorders of pregnancy, with an emphasis on antihypertensive therapy. She has experience in writing clinical practice guidelines and conducting international collaborative work, including the CHIPS Trial (Control of Hypertension In Pregnancy Study). Laura is the President-Elect of the International Society for the Study of Hypertension in Pregnancy (ISSHP, 2016-18) and ISOM (2018-22). Her number one collaborator in life and research is Peter von Dadelszen, Professor of Obstetrics and Gynaecology (now also at SGUL), whom Laura met in Oxford during her research fellowship. They have three children whose names are familiar to patients (the ‘EMMA’ clinic), clinical colleagues (the ‘PIERS’ project), and research staff (the planned ‘WILL’ trial).
Maureen Norton

Maureen Norton is a senior Technical Adviser in the Office of Population and Reproductive Health, in the Bureau for Global Health, at USAID in Washington. Over her career, she has participated in designs and evaluations of family planning, reproductive health, and maternal and child health programs in over twenty developing countries and managed several global family planning and reproductive health projects in Asia, Africa, and Latin America. She earned a master's degree in International Public Policy and a Ph.D. in Middle East Studies, with a concentration in International Public Policy, from Johns Hopkins University, The Paul H. Nitze School of Advanced International Studies. She is an advocate for Healthy Timing and Spacing of Pregnancy.

Melanie Boyd

Melanie Boyd has had a life-long commitment to international development and human rights. During her career with Global Affairs Canada, Ms. Boyd served in program management and senior policy roles. She has led program teams based in Canada, Egypt, Afghanistan and Kenya where she served as the Head of Cooperation for Canada’s $120 M program in East Africa. She has also driven key policy initiatives including the development of a new democratic governance policy, a cross-agency working group on human rights-based approaches and, most recently, Canada’s $3.5 B commitment to maternal, newborn and child health. During her tenure as the Director of Policy and Partnerships for the Aga Khan Foundation in Afghanistan, Ms. Boyd led the organization-wide participatory development of a new Rural Development Strategy. She also served as Interim CEO, overseeing a staff of 2000 and an annual budget of $90 M. Ms. Boyd has a Masters from the Norman Patterson School of International Affairs and is currently completing a second Masters in Philanthropy and Non-profit Leadership. She is delighted to have recently joined World Vision Canada in the role of Program Director for Born on Time, a bold new public-private partnership which is seeking to reduce neonatal mortality in Bangladesh, Ethiopia and Mali by contributing to the reduction of preterm birth rates.

Rahat Ara Nur

Rahat Ara Nur is a medical doctor (MBBS) and holds a Master in Public Health (MPH in Reproductive and Child Health) and currently studying Executive MBA. She has been practicing in the clinical and public health areas since 1993. Since July 2015 she worked for Population Council as Senior Program Office in Ending Eclampsia Project, and her responsibilities are to develop proposal and protocol, overall strategic planning and program management, research design and data analysis, technical assistance and capacity building, coordination and networking, supervision and monitoring, report writing, communication, dissemination of research finding, financial management and etc. She worked for CARE Bangladesh as a Team Leader of a $3 million maternal health project. She received training from CDC, Atlanta, USA on Vaccine Preventable Disease (VPD) Surveillance and then worked for WHO in Uganda to support and strengthen the VPD Surveillance and EPI. Worked as a Legal Executive in Singapore to support the Bangladeshi workers to get proper treatment and insurance claim when they get work injury. Rahat served for World Health Organization, Obstetric and Gynaecological Society of Bangladesh (OGSB) and JSI Bangladesh.
Sheena Currie

Sheena Currie, a British midwife educator and maternal and newborn health expert, has over 15 years’ experience working in low resource settings providing technical guidance in the development, management and evaluation of maternal and newborn health programs including support for skilled birth attendants, especially midwives. Sheena currently supports programs in Afghanistan, Burma, Ethiopia, South Sudan and Tanzania.

Tabassum Firoz

Tabassum Firoz is a clinician-researcher from the University of British Columbia, Canada. Her clinical focus is medical complications of pregnancy. She is a member of the WHO Maternal Morbidity Working Group, the UN Commission for Life Saving Commodities and co-chairs the joint ISOM-ISSHP Global Health Committee. Her research focus includes postpartum maternal health following pre-eclampsia and global maternal health policy.