



Worldwide Initiative for Rh disease Eradication

WIRhE Report 2025

Worldwide Initiative for Rh Disease Eradication (WIRhE)

Annual Program & Impact Report

June – December 2025

WIRhE Report 2025	1
1. Executive Summary	3
2. Organizational Developments	4
2.1 WIRhE Foundation Established	4
2.2 Executive Director	4
2.3 Website, Communications & Visibility	5
2.4 International symposium on Rh disease, Leiden, May 28-29, 2026	6
3. Synergy with other programs and coalitions	6
3.1 ISBT- WHO & Ethiopia project	6
3.2 AFRICARhE Partnership	6
4. 2025 Global Overview	7
4.1 Kenya - Collaboration Blood Drive	8
4.2 Cameroon - Rh Disease Awareness Campaign	9
4.3 Liberia - Women's Health & Wellbeing Workshops	11
4.4 Ghana - Community Medical Outreach	13
4.5 Nigeria - Women's Blood Group & Rh Awareness Outreach	15
4.6 Sierra Leone - Health Education Pilot	17
4.7 Malawi - Jaundice Baby Study	19
4.8 Country-wide Data Collection: Healthy Mothers, Healthy Babies Survey	20
5. Global Advocacy, Policy, & Coalition Work in 2025	21
5.1 Coalition Meetings	21
5.2 Policy Snapshot & AFRICARhE Landscape Analysis	21
5.3 Communications & Outreach	22
6. Major Initiatives Currently Planned for 2026	22
6.1 Sierra Leone - Full 6-Month Health Promotion Project (Feb - Aug 2026)	22
6.2 Pakistan - Rh Screening & Anti-D Access Program	23
6.3 Colombia - Rh Clinical Toolkit	23
6.4 Rh Disease Medical Education: Learning Platform - Early 2026	23
6.5 Nairobi - International Maternal & Newborn Health Conference (March 2026)	24
6.6 Regional Meetings (Africa, LATAM, Asia, North America) - Early 2026	24
6.7 Multiple new outreach and projects planned with new and existing partners	24
7. Acknowledgements	25

1. Executive Summary

2025 marked a transformational year for the Worldwide Initiative for Rh Disease Eradication (WIRhE).

Until 2025, the main activities of WIRhE were awareness and educational activities at scientific meetings, including those involving obstetrics & gynecology, perinatal diagnosis and therapy, and blood transfusion and hematology. Educational and advocacy activities were also exemplified by multiple scientific/academic publications by WIRhE members.

In 2025, we expanded our activities in several directions:

- 1) We restructured the organization and incorporated the WIRhE Foundation in the Netherlands to establish a European footprint, strengthened the organizational structure of WIRhE by establishing continental/regional boards, and hired an Executive Director
- 2) We prioritized establishing partnerships with other NGO's with overlapping goals in 2025. Many of these NGOs are active in maternal and newborn health (e.g., For Mom and Baby Foundation, Help A Mother and Newborn Initiative, Talk To Your Midwife Global); in addition, we engaged with NGOs active in public health and the healthcare sector (Coalition of Blood for Africa, Equal Help Ghana).
- 3) We initiated and supported multiple local projects across Africa, Latin America, and Asia. Our partners **directly reached 2,804 women, men, and children** with lifesaving education regarding Rh disease, maternal health, and preventive care. Our impact was made possible by the dedication of community health teams, midwives, clinicians, and partners working in difficult conditions, ranging from rural Ghanaian villages to markets in Cameroon to low-literacy urban communities in Liberia. Together, we delivered accessible information, conducted screenings, built awareness, and empowered women and families with knowledge that can prevent stillbirths, neonatal deaths, and pregnancy complications.
- 4) We closely collaborated with the [AFRICARhE](#) research consortium based at Leiden University and with academic partners in Tanzania, Ethiopia, and Malawi. This initiative, which was originally supported by WIRhE, has subsequently obtained independent grants for their academic research.
- 5) We are involved in an initiative of the Global Safety working party of the International Society of Blood Transfusion with the goal of starting plasma collection from Ethiopian women with high titers of anti-D antibodies; this plasma will subsequently be fractionated to produce Rh immune globulin to be used for immunoprophylaxis in Ethiopia.

With your support, WIRhE is now positioned for one of its most ambitious years yet in 2026, including a six-month community health promotion initiative reaching 16,000 people in Sierra Leone, a national-scale maternal Rh testing program in Pakistan, the launch of an open-access Rh toolkit in Colombia, South America to strengthen antenatal care across low- and middle-income countries, and the launch of an open-access web-based educational program to enhance the knowledge base of physicians, midwives, and, ultimately, village health workers and patients.

We are deeply grateful for the trust and support of our donors and sponsors as we improve maternal and newborn health worldwide,

The WIRhE Foundation Board

2. Organizational Developments

2.1 WIRhE Foundation Established

On July 17, 2025, we incorporated the WIRhE Foundation based in Amsterdam. This European footprint will enhance overall fundraising in Europe, and also enhance our ability to obtain charitable donations from European pharmaceutical and medical device companies that are subject to regulatory requirements from the European Union. In particular, the WIRhE Foundation received official legal registration as a Charity (locally called “ANBI status”) in the Netherlands, formally recognizing it as a public-benefit organization. This designation strengthens our credibility, facilitates donor engagement, and enhances our ability to operate transparently as an international NGO.

Key changes in 2025:

- Expansion of global governance
- [Completed the establishment of continental/regional boards](#) in Africa and North America, with the organization of the boards in Latin America and Asia well underway.
 - [Africa Board](#): Jeremia Pyuza, Tanzania (Chair); Angela Okolo, Nigeria; Ashu Martha Agbornyenty, Cameroon; Caroline Wangamati, Kenya; Minkoro Fomba, Mali.
 - [Latin America](#): Jesus Andres Benavides (Chair); *members in progress*
 - [Asia Board](#): Shanta Kumari, India; Rubina Sohail, Pakistan; Yanli Ji, China.
 - [North America Board](#): Steven Spitalnik (Chair), United States; Trina Fyfe, Canada; Brie Stotler, United States; Celina Montemayor, Canada; Hua Shan, United States; Kenneth Moise, United States.
 - [Europe Board](#): *in progress*
- The WIRhE Africa Board was the first to be installed and most of our outreach activities in 2025 were within this continent. We are close to completing the development of a strategy document, which will provide the vision and a timeline for the activities to be completed in 2026. By the end of 2026, we will have created a long-term strategy for the ensuing 5 years.

2.2 Executive Director

Ms. Gaia Mori was hired as the Executive Director, thereby providing stable, ongoing administrative leadership and strengthening operations, communications, and partner engagement.

Ms. Mori was hired because of her combined experience in the development sector, as well as in managing European Commission public health programs for the European Blood Alliance and Sanquin. She is an experienced project manager (10+ years) in international development, specializing in girls' and women's empowerment, sexual reproductive and health rights (SRHR), and global health. She has proven expertise in strategic planning, stakeholder management, and capacity building to drive impactful change. She “hit the ground running” and has already enthusiastically overseen multiple projects in addition to providing day-to-day organizational stability.

2.3 Website, Communications & Visibility

In 2025, the WIRhE website (www.wirhe.org) was completely redesigned, including a new structure, expanded project sections, a dedicated resource library, and updated navigation to showcase partner work more effectively. A secure donation portal (i.e., PayPal) was also integrated to support future fundraising and visibility. Specific improvements to WIRhE’s digital presence include:

- An interactive global activity map
- Updated project pages
- New educational materials
- An ongoing partner submission system
- Enhanced visibility on LinkedIn and across partner networks

Visibility & Media Engagement

Our Sierra Leone outreach program gained national attention when our local partner was interviewed by **Worldview Creative Media**, a prominent media outlet with >20,000 followers. The interview featured a discussion on maternal health with Mr. Alexandre M. Karim from the Sierra Leone Ministry of Health, highlighting the importance of Rh disease prevention and the work of our partners at Uman n pikin welbodi (UMPIWE), and WIRhE in Tonkolili District. The full interview can be found here: <https://wirhe.org/interview-sierra-leone-with-our-partners-at-umpiwe/>

Educational Program

In collaboration with our global partners, we created several educational materials, including videos and educational flyers, specifically created to provide important information to illiterate or low-literacy women. We had received feedback from our partners at AFRICARhE that there were no such resources about Rh disease for low literacy women, and that all of the available ones require higher education with specific knowledge about biology; thus, we filled this niche with our efforts.

WIRhE's new Executive Director (i.e., Ms. Mori) has extensive experience working with low-literacy women and in translating difficult concepts into easily digestible information. She created a video describing blood typing and its importance, as well as explaining the nature and prevention of Rh disease. This video in English was then translated into Nigerian Pidgin and Krio (for Sierra Leone); the French version is in progress. These [videos can be accessed on the WIRhE website in the Video section.](#)

In addition, Ms. Mori, together with the collaboration of our partners, created several paper-based flyers, which were used by these partners in all their community outreach programs. She created a basic flyer for young girls and another one more focused on reproductive health and women.

Our partners have shared their enthusiasm for these new resources, which have helped them immensely in communicating difficult concepts to the women and girls who attended their events. In particular, our partner in Nigeria, Rhesus Solution Initiative (Lagos, Nigeria), replaced their previous flyer with this one developed by WIRhE, because it received more positive feedback from the women who participated in their events. [The flyers can be found here.](#)

2.4 International symposium on Rh disease, Leiden, May 28-29, 2026

In collaboration with the Leiden University Medical Centre, Sanquin, and [AFRICARhE](#), we at WIRhE are organizing an international scientific symposium, which will be held on May 28-29, 2026 in Leiden, the Netherlands. The first day of this symposium is particularly relevant for WIRhE members, focusing on the global shortage of anti-D and on various proposed sustainable solutions. The second day focuses on the worldwide variations in the clinical practice in caring for patients with HDFN and how these can best be harmonized to optimize care. In addition, during 2025, we successfully obtained several grants (e.g., from the International Society of Blood



Transfusion) to support the travel costs of speakers and attendees from LMICs. At the time of the symposium, we will also have a small ceremony to formally install the Global Board of WIRhE, which will be composed of the Chairs of the continental/regional boards.

The program description for the meeting is available here: www.alloconference.com

3. Synergy with other programs and coalitions

3.1 ISBT- WHO & Ethiopia project

The ISBT Global Safety party, in conjunction with the WHO, supports the National Blood and Tissue Bank of Ethiopia in their development of a plasma collection program. Together with the obstetricians of AFRICARhE, the WIRhE board members, Steven Spitalnik M.D. and Ellen van der Schoot M.D., Ph.D., both active members of the ISBT, approached this ISBT Working party and proposed to start collecting anti-D hyperimmune plasma from previously sensitized women in Ethiopia. We envision that this will serve as a pilot project for plasma collection in Ethiopia, as it requires far less volume of plasma from fewer donors with very high-titer anti-D, as compared to collecting plasma for other products, such as albumin and intravenous gamma globulin (IVIg). After multiple in-person and online meetings, this has now resulted in an initiative, in which various stakeholders, including NBI South Africa (which will fractionate the plasma), Sanquin Blood Supply in the Netherlands (which will donate plasmapheresis equipment and will provide RBCs for additional hyperimmunization (if necessary)), and Ethiopian obstetricians (who will identify suitable donors), are now drafting a joint plan on how to produce this Ethiopian anti-D product for clinical use.

3.2 AFRICARhE Partnership

[AFRICARhE](#) is a clinical and research-focused initiative working on Rh disease prevention and management in Africa. Its work is rooted in medical expertise, laboratory capacity, and evidence generation, including clinical protocols, screening practices, and research on the burden and outcomes of Rh disease. AFRICARhE contributes the scientific data and technical knowledge that are essential for strengthening health systems and informing policy discussions on Rh disease in low-resource settings.

WIRhE actively collaborates with AFRICARhE in a complementary way, with each organization contributing distinct strengths and resources. While AFRICARhE provides clinical evidence and medical expertise, WIRhE brings grant preparation expertise, community-level insights, advocacy, and implementation perspectives, including women's experiences, barriers to care, and health system realities. This collaboration allows policy makers, Ministries of Health, and global stakeholders to access both scientific evidence and real-world context, supporting more equitable, feasible, and sustainable approaches to Rh disease prevention.

[More information on AFRICARhE can be found here.](#)

4. 2025 Global Overview

Total number of individuals reached in-person in 2025: **2,804 individuals**

These numbers reflect only **direct**, in-person participants, not including the many who have been reached digitally or via social media engagement.

Countries with Direct Outreach in 2025



Kenya: 100 people reached through a blood drive with the Coalition of Blood for Africa (CoBA) and the Coalition for Women’s Health in Africa (COWHA), supporting postpartum hemorrhage prevention and reinforcing the importance of safe, timely blood access for mothers.



Cameroon: 422 people reached during a Rh disease awareness campaign with the For Mom and Baby Foundation (FOMAB), significantly increasing knowledge among women - especially pregnant women - on Rh incompatibility and encouraging early testing and partner engagement.



Liberia: 153 people reached through women’s health and wellbeing workshops with the Mineke Foundation and the Help a Mother and Newborn Initiative (HMNI), strengthening understanding of safe pregnancy, genetics, and reproductive health through community-led learning.



Ghana: 200 people reached through a community medical outreach with Equal Help Ghana, delivering essential health services alongside blood group and Rh education, while strengthening local capacity for improved diagnostic practices.



Nigeria: 220 women and girls reached through blood group and Rh awareness outreach with the Rhesus Solution Initiative (RSI), closing critical knowledge gaps and promoting early antenatal care to prevent Rh-related pregnancy complications.



Sierra Leone: 839 people reached through a maternal and child health education pilot with Uman n pikin welbodi (UMPIWE), raising awareness on antenatal care, preventable diseases, and Rh disease while documenting barriers to care in rural communities.



Malawi: 870 women screened through the neonatal jaundice study with AFRICARhE and Queen Elizabeth Central Hospital, generating essential data to improve early detection, treatment, and prevention of severe newborn complications.

Regional Program Highlights

4.1 Kenya - Collaboration Blood Drive

Partners: Coalition of Blood for Africa (CoBA) and Coalition for Women's Health in Africa (COWHA)

Date: October 24, 2025

Participants: 100

We are proud to have collaborated with CoBA in their powerful outreach initiative at Pumwani Maternity Hospital in Kenya, which was held to recognize Postpartum Hemorrhage Awareness Month.

The event, organized by CoBA in partnership with COWHA, emphasized the critical importance of a safe and adequate blood supply to save mothers' lives. Postpartum hemorrhage remains one of the leading causes of maternal deaths across Africa, a tragedy that can often be prevented through timely access to blood transfusions.

WIRhE contributed by providing educational flyers that helped spread awareness on blood typing and Rh disease. Because clear, accessible information is key to empowering communities, we were grateful to be able to support this vital cause. This collaboration is a shining example of what is possible when organizations unite for a shared mission, ensuring that no woman loses her life while giving life.

Together with CoBA and COWHA, we reaffirmed our commitment to strengthening maternal health and promoting blood donation awareness across Africa.



4.2 Cameroon - Rh Disease Awareness Campaign

Partner: For Mom and Baby Foundation (FOMAB)

Dates: October 16-20, 2025

Participants: 422

Women & girls: 373 (66 pregnant women)

Men: 33

Health workers: 7

Activities Conducted

- Antenatal education at Mount Mary Hospital (70 participants, 43 pregnant women)
- Market outreach at Opportunities Industrialization Centre (OIC) Market in Buea (183 participants)
- Community outreach in Bolifamba Mile 16 (138 participants)
- Rh disease educational video watch party at Freemind Centre (31 participants)

Impact

- A total of **308** women (Target: 150), 66 of these were pregnant women (Target: 50), gained knowledge of Rh incompatibility.
- Participants pledged to check their Rh status and discuss it with their partners.
- Local health providers requested additional materials and support for future workshops.

Despite electricity shortages and regional security issues, participation exceeded our expected targets, doubling the expected reach.

A short mini-documentary was produced in collaboration with our partners, capturing the outreach activities, community engagement, and testimonies from women who participated in the Rh awareness campaign. This visual storytelling tool will support future advocacy, partner visibility, and resource mobilization.

[The video can be accessed here.](#)





4.3 Liberia - Women's Health & Wellbeing Workshops

Partners: Mineke Foundation + Help a Mother and Newborn Initiative (HMNI)

Dates: October 22 & 30, 2025

Participants: 153 (149 women, 4 men)

Focus Areas

- Blood type and Rh incompatibility
- Maternal health and safe pregnancy
- Nutrition and hygiene
- Environmental health
- Sexual and reproductive health
- Preventing sexually-transmitted infections
- Understanding genetics (albinism, sickle cell disease)

Impact

Women reported improving their understanding of:

- Why blood testing and Rh factor matter
- How to recognize danger signs in pregnancy
- How to support adolescent daughters in menstrual and reproductive health
- How genetics influences conditions, such as sickle cell disease

Many participants shared personal experiences with stillbirth, pregnancy loss, and limited access to antenatal care, thereby creating deep peer-learning moments.





4.4 Ghana - Community Medical Outreach

Partner: Equal Help Ghana

Date: November 6, 2025

Participants: 200 total (175 women, 25 men)

Objectives

- To bring essential healthcare services to underserved communities
- To educate women, men, and adolescents on blood groups, Rh factor, and Rh disease prevention
- To provide antenatal services and strengthen maternal health knowledge

Activities Provided

- Vital signs monitoring
- Clinical consultations
- Malaria testing & treatment
- Blood glucose and hemoglobin testing
- Hepatitis B surface antigen testing
- Medication distribution
- Antenatal care
- Launch of blood group & Rh typing
- Rh disease awareness campaign
- Health education
- Video describing Rh disease
- Distribution of reusable sanitary pads to adolescent girls

Medical Findings

- **195 clinical cases were treated**, including malaria, anemia, hypertension, urinary tract infections, and respiratory infections.
- **112 individuals received ABO blood grouping and Rh typing** (83 Rh-positive, 29 Rh-negative).
- **30 pregnant women** received antenatal support.

Community Response

Across the age groups, the largest cohort reached were adolescent girls and young women (ages 10–34), representing over half of all participants.

Traditional leaders expressed strong appreciation for the program and a desire for continued engagement, including community education, health screenings, and maternal health services.

Lessons Learned

During data review, Equal Help Ghana reported an unusually high proportion of Rh-negative women (26%), significantly above Ghana's expected population prevalence of 11–17%. Through joint discussions with our partners, we learned that blood typing during the outreach was conducted exclusively using the tile method, without confirmatory testing, which mirrors the approach used in several local health facilities.

This finding created an important opportunity for collaborative learning. WIRhE then shared updated guidance on in-field blood typing protocols, emphasizing the need for confirmatory testing and quality assurance in low-resource settings. This exchange strengthened local capacity and will inform improved diagnostic practices in future outreach activities.



4.5 Nigeria - Women's Blood Group & Rh Awareness Outreach

Partner: Rhesus Solution Initiative (RSI)

Date: December 9, 2025

Participants: 220 women and girls

Key Activities

- Education on blood group as part of personal health identity
- Free blood group testing
- Training of midwives on integrating Rh education into antenatal care
- Community survey on awareness of blood groups and the Rh factor

This outreach program filled a critical gap in a region where many adolescents and pregnant women had never been previously tested.

Outcomes

The healthcare presentation achieved significant positive impact, including:

- Increased awareness among women about the importance of knowing their ABO blood group and Rh factor before, or early in, pregnancy.
- Improved understanding of how to prevent neonatal complications through timely antenatal care.
- Increased foundational knowledge on blood group science, promoting long-term health-conscious behavior.
- Strengthened community trust in health education initiatives.
- Overall, women were well informed, and many expressed willingness to undergo testing and seek proper antenatal guidance.

Lessons Learned

Although the outreach was successful, a few challenges were noted:

- Some participants did not write down their names.
- Many participants arrived late because of a huge traffic jam in the area.
- More volunteers will be needed to manage crowd flow during demonstrations.
- Some participants had limited prior knowledge, requiring additional explanations and time.

Medical Findings

- **130 individuals received ABO blood typing and Rh typing (107 Rh-positive, 23 Rh-negative).**





4.6 Sierra Leone - Health Education Pilot

Partner: Uman n pikin welbodi (UMPIWE), which means “healthy woman and child” in Krio, Sierra Leone’s vernacular language.

Date: December 1-15, 2025

Participants: 207 women interviewed, 839 total

In November 2025, UMPIWE launched a maternal and child health promotion project in partnership with WIRhE.

They visited 23 villages, meeting with the communities and discussing key maternal and child health topics, including malaria, the importance of antenatal care, diarrhea, and malnutrition. They also raised awareness about Rh disease, which remains largely unknown and neglected in Sierra Leone.

For example, although anti-D immunoglobulin injections can prevent Rh disease, these immunoglobulins are only available in a few private hospitals in Freetown, the capital of Sierra Leone, and are very expensive (i.e., ~\$170 per injection). Thus, access to this crucial preventive treatment is nearly impossible for the vast majority of the population.

By partnering with WIRhE, UMPIWE is contributing to a study to document blood group and Rh disease awareness among women in rural Sierra Leone, as well as identifying barriers to accessing antenatal care. In particular, women attending their health promotion sessions are asked to voluntarily complete a short questionnaire lasting only a few minutes.

Key Themes

- Maternal and child health
- Malaria, diarrhea, and pneumonia prevention
- Nutrition and hygiene
- Family planning
- Rh disease awareness
- Importance of antenatal care
- Preventing gender-based violence

This pilot forms the foundation for a 6-month project, launching in 2026, that will reach ~**16,000** people in 23 villages.





4.7 Malawi - Jaundice Baby Study

Partner: AFRICARhE and Queen Elizabeth Central Hospital (QECH)

Date: December, 2025 - January, 2026

Participants: 870 women screened

- **Objective:** To investigate the prevalence and causes of neonatal jaundice at Queen Elizabeth Central Hospital (QECH) in Malawi.
- **Background:** Data on neonatal jaundice prevalence in Malawi is limited, screening is not standard practice at QECH, and the causes (including the contribution of Hemolytic Disease of the Fetus and Newborn, or HFDN/Rh disease) are often unknown. The study is crucial as severe neonatal jaundice complications are largely preventable with early diagnosis and treatment.
- **Methodology:** A six-month **cross-sectional observational study** screening all admitted neonates in the postnatal and newborn unit daily using transcutaneous bilirubin (TcB) measurements. Neonates requiring phototherapy will receive a full diagnostic work-up and daily clinical reviews until discharge.

Progress to Date

- **Team & Approval:** The QECH study team was formed, and ethical approval was granted by the College of Medicine Research and Ethics Committee.
- **Data Collection:** Data collection fully started in early January 2026, following a period of gaining experience in early December 2025.
- **Enrollment:** So far, **870 patients** have been screened. **45 patients** required phototherapy, and **33 consented** to be part of the study (28 from postnatal wards, 5 from pediatric wards).
- **Next Steps:** An **interim analysis** is planned for March/April 2026.

Challenges

- **Anti-D Prophylaxis:** Polyclonal Anti-D prophylaxis for women at risk of HDFN is **not available** in Malawi and had to be imported from the Netherlands for the study.
- **IT Infrastructure:** The unstable IT infrastructure in Malawi requires the use of paper-based data collection as a backup.
- **Recruitment:** Patient recruitment has been **slower than expected** due to a competing study evaluating a low-cost hyperbilirubinemia diagnostic device, causing parents to be hesitant about double-enrolment. The team is exploring joined recruitment possibilities.

Patient enrollment is expected to finalize within **6 to 8 months** from the study's start date.



4.8 Country-wide Data Collection: Healthy Mothers, Healthy Babies Survey

In 2025, WIRhE piloted and expanded the *Healthy Mothers, Healthy Babies* survey across 5 African countries, creating the organization's first multi-country dataset on maternal health knowledge, blood type awareness, and barriers to antenatal care. The survey was adapted for low-literacy settings and implemented through trained local interviewers. It explores women's experiences with pregnancy, newborn health, access to care, and understanding of blood grouping and Rh type.

Survey Objectives

- **Primary Objective:** Determine the proportion of women who know their blood type and identify how they learned it.
- **Secondary Objectives:**
 - Document care-seeking behaviors during pregnancy and childbirth
 - Identify perceived barriers to healthcare access
 - Gather observations on newborn illness
 - Understand preferred channels for maternal health education
 - Establish baseline knowledge of Rh disease across communities

Countries & Sample Sizes (2025 Pilot Study)

501 women completed the survey:

- **Liberia:** 60 women
- **Cameroon:** 108 women
- **Ghana:** 35 women
- **Nigeria:** 120 women
- **Sierra Leone:** 178

Sierra Leone Ethical Approval

The expanded Sierra Leone survey received **full ethical approval** from the Sierra Leone National Ethics Committee, enabling rigorous, ethically compliant data collection ahead of the six-month outreach program planned for 2026.

Purpose & Future Use

The combined survey data will:

- Inform WIRhE's 2026 regional advocacy brief, collecting data in locations where women are usually not reached
- Support national partners in policy dialogue
- Pinpoint gaps in barriers women have in accessing to care, specifically reproductive and maternal care
- Strengthen evidence on Rh disease awareness in LMICs, specifically in rural communities
- Guide community education materials and antenatal care strategies
- Provide baseline indicators for monitoring maternal health interventions

This multi-country dataset represents an important step toward building locally led evidence that can accelerate equitable access to Rh disease prevention worldwide.

5. Global Advocacy, Policy, & Coalition Work in 2025

5.1 Coalition Meetings

In 2025, WIRhE successfully completed its coalition commitments, including the following:

- Held two Africa WIRhE Board meetings
- Created 3 subgroups within the Board, and have invited other WIRhE members to join:
Advocacy, Education, Communications
 - An advocacy planning call is scheduled for January 2026
 - An educational materials meeting is scheduled for January 2026

These meetings are designed to align priorities, strengthen partner communication, and support inter-country collaborations.

5.2 Policy Snapshot & AFRICARhE Landscape Analysis

WIRhE supported and contributed to AFRICARhE's continent-wide survey of Rh disease prevention and management practices.

These included:

- Engaging professional societies across obstetrics, pediatrics, midwifery, laboratory medicine, blood transfusion, and public health
- Helping identify gaps, including missing data from Morocco
- Sharing REDCap questionnaires and supporting partner responses
- Ensuring alignment between WIRhE's advocacy plan and AFRICARhE's findings

This information will serve as a core evidence base for WIRhE's 2026 advocacy brief.

5.3 Communications & Outreach

- A WIRhE newsletter was published in December 2025, posted on the WIRhE website, and shared with all WIRhE members
- Partners shared WIRhE Rh disease videos on social platforms
- Flyers and educational materials were designed with partners and distributed widely
- The WIRhE website was updated, including a project map, resource library, and partner pages

6. Major Initiatives Currently Planned for 2026

2026 will be an important year for WIRhE, marked by:

- Multi-continent expansion
- Stronger coalition collaborations
- Scaling models of care and education
- Increased visibility at global conferences
- The launch of major implementation projects in Sierra Leone, Pakistan, and Colombia

WIRhE will use the momentum of 2025 to deepen its presence in LMIC regions, strengthen evidence-based advocacy, and bring lifesaving Rh prevention closer to women who need it most.

6.1 Sierra Leone - Full 6-Month Health Promotion Project (Feb - Aug 2026)

Target Population: 16,000

Communities: 23 rural communities

Partner: UMPIWE

Activities will include:

- Maternal and child health education
- Rh disease awareness
- Family planning
- Nutrition and hygiene
- Immunization promotion
- Gender-based violence prevention
- Antenatal care (ANC) attendance promotion
- “Healthy Mothers, Healthy Babies” survey as well as blood typing of women in rural communities and interviews with Rh-negative mothers
- Capacity-building for health workers in six public health facilities
- One-on-one interviews for women who are Rh-negative, collecting unique qualitative data on the indirect effects of being Rh-negative on their sense of well-being.

Expected Outcomes

- Increased antenatal care (ANC) attendance
- Reduced under-five year-old morbidity
- Improved maternal outcomes
- Higher ABO and Rh blood type awareness
- Better community-level knowledge of pregnancy and newborn care

6.2 Pakistan - Rh Screening & Anti-D Access Program

Our project with our partners in Pakistan, together with SickKids in Canada, aims to scale up a program in Pakistan to use a rapid, point-of-care blood test (i.e., the EldonCard) to determine the Rh blood type of pregnant women. The goal is to ensure that all tested Rh-negative women receive an anti-D immunoglobulin injection soon after delivery to prevent sensitization to RhD and future Rh disease. The current program operates in health facilities, but WIRhE is supporting this project to extend this approach to in-home testing for better coverage.

Activities:

- ABO and Rh testing using EldonCards
- Anti-D Immunoglobulin administration within 72 hours postpartum to Rh-negative mothers
- Monitoring: testing uptake, Rh-negative cases, anti-D administration rates
- Pilot for home testing in hard-to-reach areas

6.3 Colombia - Rh Clinical Toolkit

A project to create an open-access clinical toolkit for healthcare providers featuring:

- A 10-page clinical pathway
- Anti-D dosing cards
- A patient-friendly information leaflet
- An editable implementation package
- WhatsApp micro-learning capsules
- Field validation in local hospitals (Pereira, Colombia)
- A virtual launch and adoption dashboard to document efficacy

Expected impact: at least 150 downloads and 20 hospitals adopting the pathway

6.4 Rh Disease Medical Education: Learning Platform - Early 2026

A study aiming to create and disseminate an online curriculum for healthcare professionals to improve education and awareness of Rh Disease both locally and internationally. The initial phase involves a pilot with 16 Toronto-based pediatrics residents, which has recently received REB approval and is planned to begin this month.

The foundation for expansion is already built into the research team, which includes collaborators from the **USA** (Dr. Brie Stotler in New York), **Pakistan** (Dr. Rubina Sohail in Lahore), and **Australia** (Dr. Melanie Jackson in Brisbane). The overall study is designed to be multi-center, with the letter noting that "multi-center data is not yet available," implying these international sites are the intended locations for the full-scale study following the initial Toronto pilot. The plan is to have the curriculum "go live" on the WIRhE website by the late May/early June 2026 WIRhE meeting in the Netherlands.

6.5 Nairobi - International Maternal & Newborn Health Conference (March 2026)

WIRhE will host its first independent booth at an international meeting, enabling:

- The distribution of educational materials
- Partner engagement & networking
- Advocacy for LMIC access to Rh prevention
- Visibility among global maternal health stakeholders

6.6 Regional Meetings (Africa, LATAM, Asia, North America) - Early 2026

WIRhE Board members will participate to strengthen global cohesion and messaging:

- Third Africa Board meeting planned in February
- Planned Latin America and Asia Board meetings
- Advocacy alignment with the AFRICARhE consortium landscape analysis
- Advocacy meetings planned with different local representatives and strong focus on networking to find local advocacy partners.

6.7 Multiple new outreach and projects planned with new and existing partners

2025 was a year of establishing and solidifying our partnerships globally. Moving forward, we have begun new initiatives and continue to learn together with our partners. Therefore, we expect 2026 to be very fruitful regarding outreach and local projects.

Furthermore, **because of the added publicity we created, we are receiving regular requests from foundations and initiatives to partner with WIRhE and collaborate to enhance the awareness of Rh disease in their communities.** We believe this interest by local partners and community-based groups shows the importance and impact of the work that WIRhE is pursuing. Potential partners are not seeking financial sponsorship from WIRhE, but rather are interested in partnering with, and

collaborating on, education and awareness activities to support their communities on a topic which has historically been neglected.

We expect further projects in Cameroon (rural women outreach), Ghana (community market ANC project), Nigeria with new and existing partners, and Mali (research and outreach), along with larger-scale projects focusing on Advocacy and Education for midwives/nurses/traditional birth attendants and healers.

7. Acknowledgements

WIRhE thanks its partners across Africa, Asia, Latin America, and beyond, including:

- Equal Help Ghana, Ghana
- Mineke Foundation, Liberia
- Help a Mother and Newborn Initiative (HMNI), Liberia
- For Mom and Baby Foundation (FOMAB), Cameroon
- Rhesus Solution Initiative (RSI), Nigeria
- UMPIWE, Sierra Leone
- AFRICARhE
- Coalition of Blood for Africa
- The clinicians, midwives, laboratory staff, health educators, and volunteers who made this work possible
- AABB Global Transfusion Forum committee, via our North America Chair
- International Society Blood Transfusion (ISBT), Ellen van der Schoot and Steven Spitalnik as members
- The WIRhE members and Board representatives

The partnership and support of our sponsors and donors made every aspect of this work, and its impact, possible.

Thank you very much for believing in our mission to end preventable Rh disease worldwide.