CARE’s Approach:
Improving sexual and reproductive health, including addressing the unmet need for family planning and resulting high rates of unplanned pregnancy, is central to CARE’s commitment to gender equality and the reduction of poverty and social injustice. Access to sexual, reproductive and maternal health is both a fundamental human right and a critical development issue. It is essential to women being able to take their equal place in society, leading to healthier, wealthier and better educated families.

What is Family Planning?: Family planning is a comprehensive multi-step approach that allows women and their husbands to access voluntary tools and education to help them determine when and if they will have children. More than 200 million women wish to delay or prevent a pregnancy but do not have access to voluntary family planning services. To put that into perspective, one woman dies nearly every 90 seconds during pregnancy or childbirth—and millions more are left with life-altering disabilities. Many of these are girls 19 or under; in fact, pregnancy is the leading cause of death for young women aged 15 to 19 worldwide. By using voluntary family planning many of these deaths can be prevented.

Impact: Family planning significantly reduces infant, child and maternal mortality and improves health. Including family planning into maternal and child health interventions provides greater impact and is more effective and less costly than focusing on either intervention independently.

Engaging Men and Boys: Improving maternal and child health and increasing access to sexual and reproductive health services means addressing social and cultural barriers in communities. CARE is leading the way to help communities shift the cultural norms that devalue women and girls and limit men's role as caring husbands and fathers. Women’s empowerment is not solely about women and girls. Engaging men and boys and mobilizing communities to take action are critical strategies to overcoming entrenched attitudes and achieving better maternal and reproductive health outcomes.

CARE’s Work in Tanzania
CARE Tanzania began work in 1994 in response to the plight of Rwandan refugees in the country. By 2012, CARE Tanzania operated in 22 regions and 77 districts across the country, reaching over 1.6 million people.

Tanzania suffers from one of the highest rates of maternal mortality in Africa as well as a lack of access to sexual and reproductive health services. Approximately 13,000 women in Tanzania die every year due to labor and pregnancy.
related complications and maternal death accounts for 27% of all deaths in women ages 15-49. In addition, Tanzanian women have an average of over 5 children and the average age for women to have their first child is close to 19 years old. Having children so young is associated with a higher risk of pregnancy complications that can lead to obstetric fistula or maternal death.

CARE Tanzania has responded to the need for improved access to maternal and reproductive health care in addition to implementing long-term poverty-eradication initiatives in girl’s education and leadership, women’s empowerment, emergencies and humanitarian response, as well as natural resources management and climate change.

Tabora Adolescent and Safe Motherhood Project
Tabora Adolescent and Safe Motherhood (TABASAM) Project is a three-year initiative that began in April 2012 in the Tabora region of Tanzania. The project is designed to improve the maternal and reproductive health of women and girls in the region by increasing access and improving the quality of maternal and reproductive health services.

In the region where the TABASAM program is being implemented, most health facilities lack basic services such as access to a clean water source, basic emergency obstetric and neonatal resources, poor infrastructure, and insufficient medical staff. In addition, many women in the region lack reliable transportation to these health facilities, making it difficult for them to access the services available.

In addition to training health workers and improving the quality of care at health centers across the region, CARE has set up over 45 Village Savings and Loans (VSLA) groups through the TABASAM program, which empower vulnerable women and adolescent girls with the financial resources necessary to pay for health services or transportation to health facilities. These groups have also provided the unique opportunity for women and other community members to learn more about the benefits of family planning as well as information on best practices for maternal and reproductive health.

What Can We Do?
Promoting gender equality and women’s empowerment is central to improving maternal and child health and increasing access to family planning and sexual and reproductive health services. With strong political will and adequate resources we can change the attitudes and institutions that limit women’s ability to care for themselves and their children.

CARE advocates for the U.S. Government to support policies and allocate robust resources to increase the quality, access, and availability of international family planning services as part of a comprehensive approach to sexual, reproductive and maternal health. CARE knows that U.S. policies and resources must target barriers to accessing health services, such as: inequitable gender and social norms, poor governance, and meeting the needs of the most vulnerable populations.

We Must:
• Support funding for international family planning in the U.S. International Affairs Budget.
• Support bipartisan, comprehensive legislation to support maternal health and family planning.
• Make long-term commitments to empower women and girls. The U.S. government and other donors must be willing to support flexible and innovative programs that work to tackle the root causes of poor health, such as gender inequality.

(Endnotes)