Project Brief

Tabora Maternal Newborn Health Initiative: Improving Reproductive, Maternal & Newborn Health in Tabora, Tanzania

The Tabora Maternal Newborn Health Initiative (TAMANI) project aims to improve the quality of reproductive, maternal, and newborn health services available, and to address the existing barriers women and girls face in accessing care. It is expected to directly support 56 health planners, 270 health care workers and 1000 community health workers, and to indirectly support 298,900 women and girls of reproductive age, 660,500 men and boys, and 68,600 newborns.

Background

While Tanzania has made great strides in reducing preventable deaths of children under the age of 5, progress in reducing maternal and newborn mortality has been limited. Maternal mortality rates remain high at 556 deaths per 100,000 live births due to challenges such as inadequate quality of services, lack of access to emergency obstetric care, and limited ability of women to independently access health services. Neonatal deaths, which continue to comprise a significant proportion of under-five deaths, highlight the importance of responding to major causes such as infection and birth asphyxia, and the need for skilled care to manage labour and delivery to ensure healthy outcomes for both mothers and newborns.

In Tabora the health of women, girls and newborns is further compounded by high levels of poverty, which impacts access to education and health services. In the Tabora region:

- nearly half of the population (45.8%) falls in the lowest wealth quintile in the country;
- only 21.9% of women use contraception;
- nearly half (44.5%) of women deliver at home, without a skilled birth attendant;
- 38% of teenage girls are becoming mothers, which often means they must leave school;
- 37.8% of women and 32.7% of men have never been to school.

The TABORA MATERNAL NEWBORN HEALTH INITIATIVE (TAMANI) is a $12.5 million CAD project to improve the quality and utilization of reproductive, maternal, and newborn health care. TAMANI is a partnership between CARE, the Society of Obstetricians and Gynaecologists of Canada (SOGC), the Association of Gynaecologists and Obstetricians of Tanzania (AGOTA), the Canadian Society for International Health (CSIH), McGill University’s Institute for Health & Social Policy, and the Tanzanian Government. The project is funded by the Government of Canada and CARE. TAMANI is a five year project from January 2017 to December 2021.
1,028,000

CARE aims to reach over 1,028,000 beneficiaries in Tabora through TAMANI, including health planners, health care workers, community health workers, women, girls, men, boys, and newborns.

**Project Outcomes**

The *ultimate outcome* of the project TAMANI project is to contribute to the reduction of maternal and newborn mortality in Tabora.

The *intermediate outcomes* focus on:

- **Improved availability of quality reproductive, maternal and newborn health services across Tabora.** For example, the project will: improve the skills of health care workers to effectively manage labour and provide quality emergency obstetric and newborn care; rehabilitate and equip health facilities; promote respectful maternity care; and improve access to family planning, especially for young men and women.

- **Improved utilization of reproductive maternal and newborn health services by women and their families across Tabora.** For example, the project will: support an emergency transportation system to help women reach health facilities when in labour; scale up a community health care worker program; support community score cards to evaluate health service provision at the local level; and support community dialogues to explore how local gender and power dynamics influence access to reproductive health services.

“A woman’s relationship with maternity care providers during pregnancy and childbirth is vitally important. Not only are these encounters the vehicle for essential and potentially lifesaving health services, women’s experiences with caregivers at this time have the impact to empower and comfort or to inflict lasting damage and emotional trauma, adding to or detracting from women’s confidence and self-esteem.” (White Ribbon Alliance: The Universal Rights of Childbearing Women). TAMANI will promote Respectful Maternity Care (RMC) through training and mentoring of health care workers and planners, and will also engage with women and girls on their experiences of receiving care.
Key Project Interventions & Activities

*CARE knows that investing in well supported and trained Community Health Workers can effectively increase health service coverage, especially for hard to reach and isolated communities. According to the WHO, investment in CHWs in Sub-Saharan Africa can result in an economic return of up to 10:1.*

- **Train and Mentor Health Care Workers**
  - Train and mentor health care workers to provide basic and comprehensive emergency obstetric and newborn care, and respectful maternity care.
  - Provide training in the provision of comprehensive sexual and reproductive health services to women, men and adolescent boys and girls.
  - Train Community Health Workers to deliver community-based health care, surveillance and health promotion at the community level.

- **Improve Health Facility Infrastructure**
  - Rehabilitate selected maternity wards that are currently in disrepair.
  - Equip health facilities to effectively deliver emergency obstetric and newborn care.
  - Distribute ambulances to ensure women and girls in rural/isolated communities can access health facilities.

- **Support Youth-Friendly Reproductive Health Services**
  - Support health care workers to implement adolescent friendly health sexual and reproductive health service standards.
  - Assign youth-friendly focal points.
  - Provide safe spaces and community dialogues for young women and men to discuss sexual and reproductive health information and services.

- **Improve District & Regional Capacity to Deliver Health Services**
  - Train and mentor health planners in budgeting and planning for inclusive reproductive and maternal newborn health services.
  - Improve Health Management Information System (HMIS) data quality and analysis to monitor health service provision.
  - Conduct regular, supportive, quality supervision visits of health facility staff.
  - Audit maternal death review process and improve learning and information-sharing to avert future deaths.

- **Promote Gender Equality & Community Engagement**
  - Conduct formative research to understand gender inequalities as they relate to the health and rights of women and girls.
  - Conduct Social Analysis and Action (SAA) dialogues to reflect on gender dynamics within the local context that impact health outcomes for women and girls.
  - Promote Respectful Maternity Care (RMC) through training and mentoring of health care workers and planners, and also by engaging with women and girls about their experience of receiving care.
### The TAMANI Project at a glance...

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<tr>
<th><strong>PROJECT NAME:</strong></th>
<th>Tabora Maternal Newborn Health Initiative (TAMANI)</th>
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<tr>
<td><strong>PROJECT DONOR:</strong></td>
<td>Government of Canada</td>
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<td><strong>PROJECT LIFESPAN:</strong></td>
<td>January 2017 – December 2021</td>
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| **PROJECT PARTNERS:** | CARE  
Association of Gynecologists & Obstetricians of Tanzania (AGOTA)  
Canadian Society for International Health (CSIH)  
McGill University Institute for Health Policy & Social Research  
Society of Obstetricians & Gynecologists of Canada (SOGC) |
| **GOVERNMENT OF TANZANIA PARTNERS:** | Tabora Regional Health Management Team  
Ministry of Health, Community Development, Gender, Elderly & Children |
| **PROJECT ULTIMATE OUTCOME:** | Reduced maternal/newborn mortality and morbidity in underserved districts in Tanzania. |
| **INTERMEDIATE OUTCOMES:** | • Improved availability of quality reproductive, maternal, and newborn health services in underserved districts in Tanzania.  
• Increased utilization of reproductive, maternal, and newborn health services by women and their families in targeted districts in Tanzania. |
| **COMMUNITIES TARGETED:** | All 8 districts in Tabora Region: Igunga, Kaliua, Nzega, Sikonge, Tabora, Tabora Municipal, Urambo, and Uyui. |
| **NUMBER OF BENEFICIARIES:** | Directly:  
• 56 health planners  
• 270 health care workers  
• 1000 community health workers  
Indirectly:  
• 298,995 women and girls of reproductive age  
• 660,510 men and boys  
• 68,695 newborns |