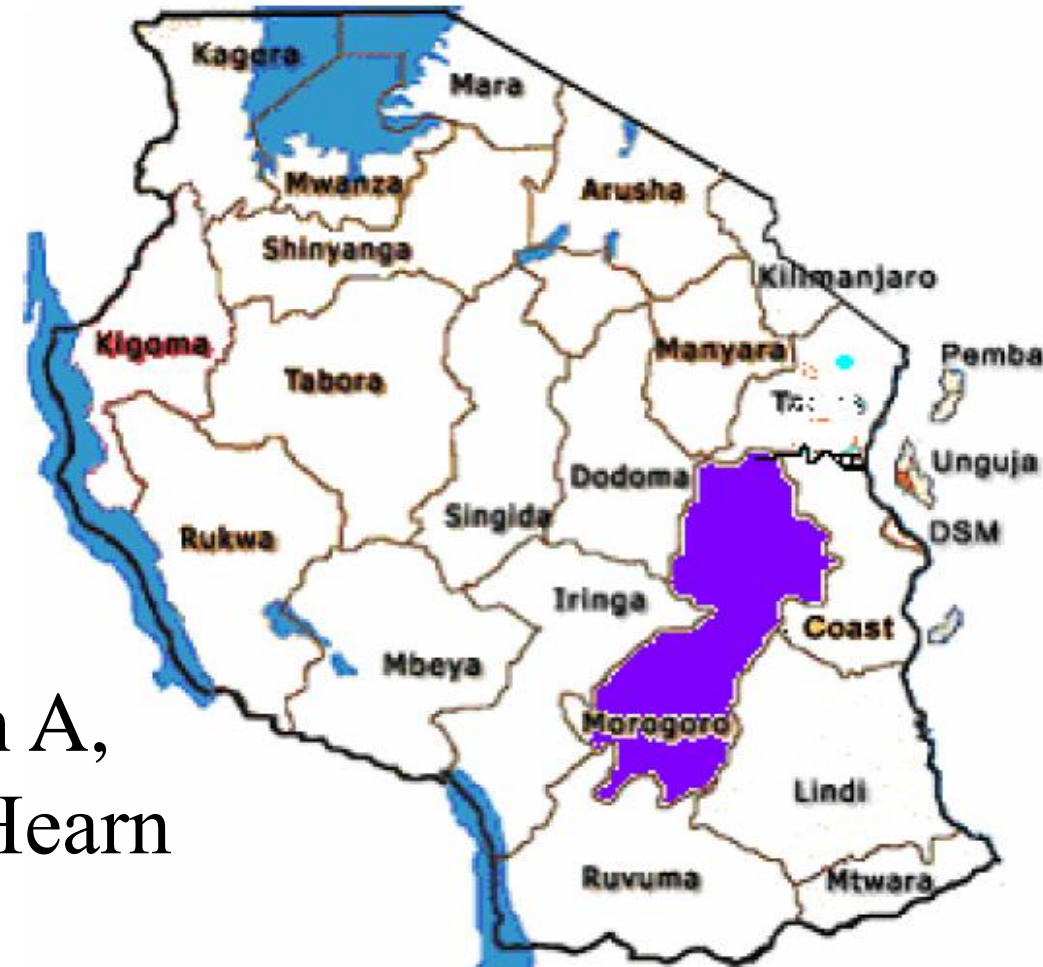


Increasing availability and quality of deliveries in rural areas: a Tanzanian model

Project Team

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OUR KEY STATEMENT

Mothers and newborns in Tanzania should not die of complications of pregnancy and childbirth for lack of access to safe delivery services.



THE PROBLEM

- Maternal deaths every year $\approx 8,000$
 - Every hour one woman dies from complications of pregnancy and childbirth.
- Neonatal mortality rate: 21 per 1,000 live births
- Stillbirth rate: 26 per 1,000 births



Hierarchy of health services in Tanzania



Only 64 (12%) of the 535 health centres currently provide delivery and surgical services

OUR INNOVATION

Introduction of maternal and newborn emergency care services including surgeries in health centres in Morogoro region by:

1. Training available health care providers in teams for 3 months.



Nurses, midwives and clinical officers were trained in anaesthesia

Assistant medical officers were trained in maternal and newborn emergency care including surgeries.



2. Quarterly supportive supervision and mentorship visits in all facilities

Clinical audit of maternal and newborns deaths and disabilities, safety of surgery and anaesthesia.



3. eHealth strategies

3.1 eLearning platform: desktop and mobile

Goal: To maintain and upgrade knowledge and skills of care providers

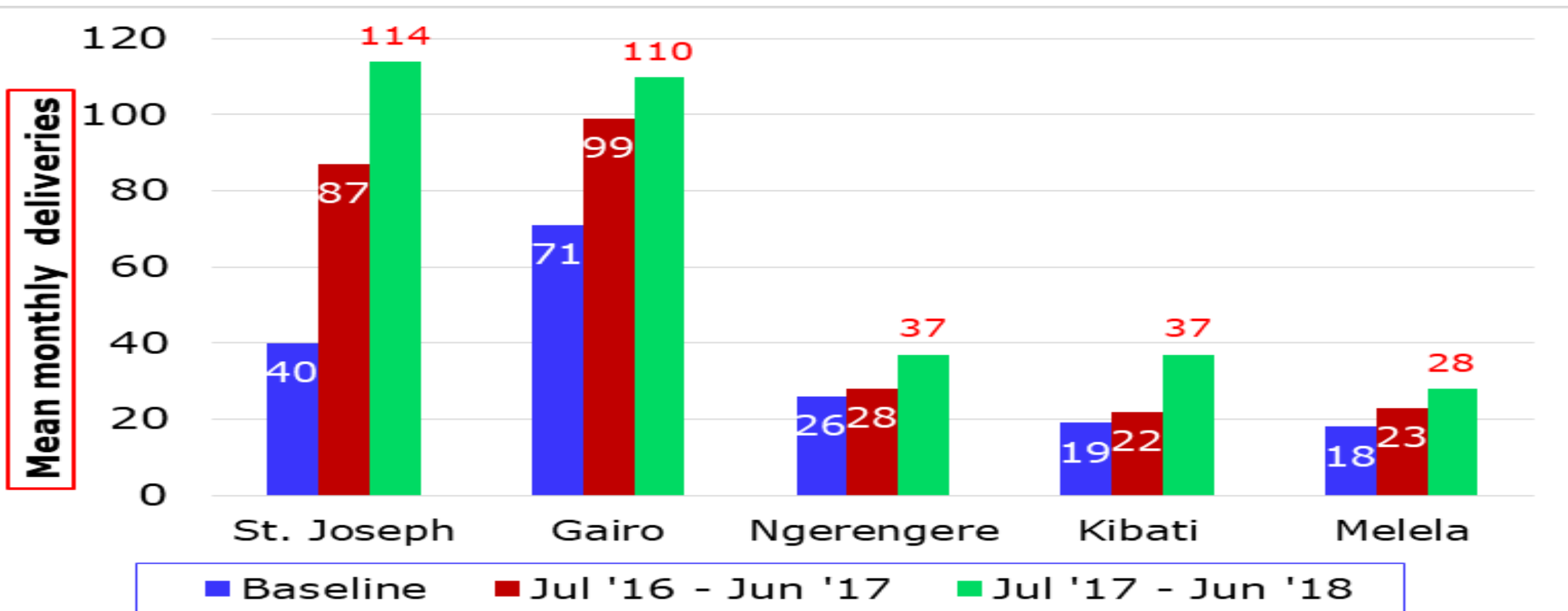
3.2 Teleconsultation services

- Consulting specialists using mobile phones.

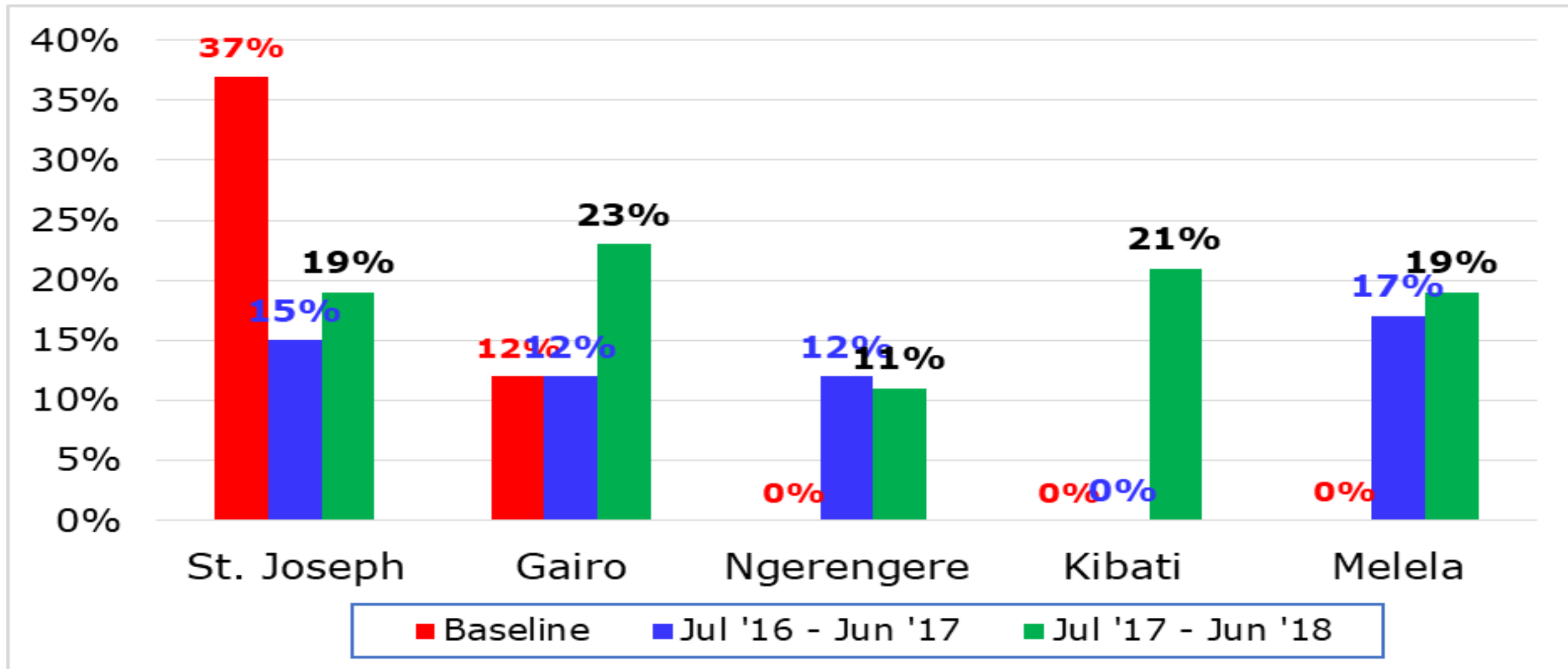


RESULTS

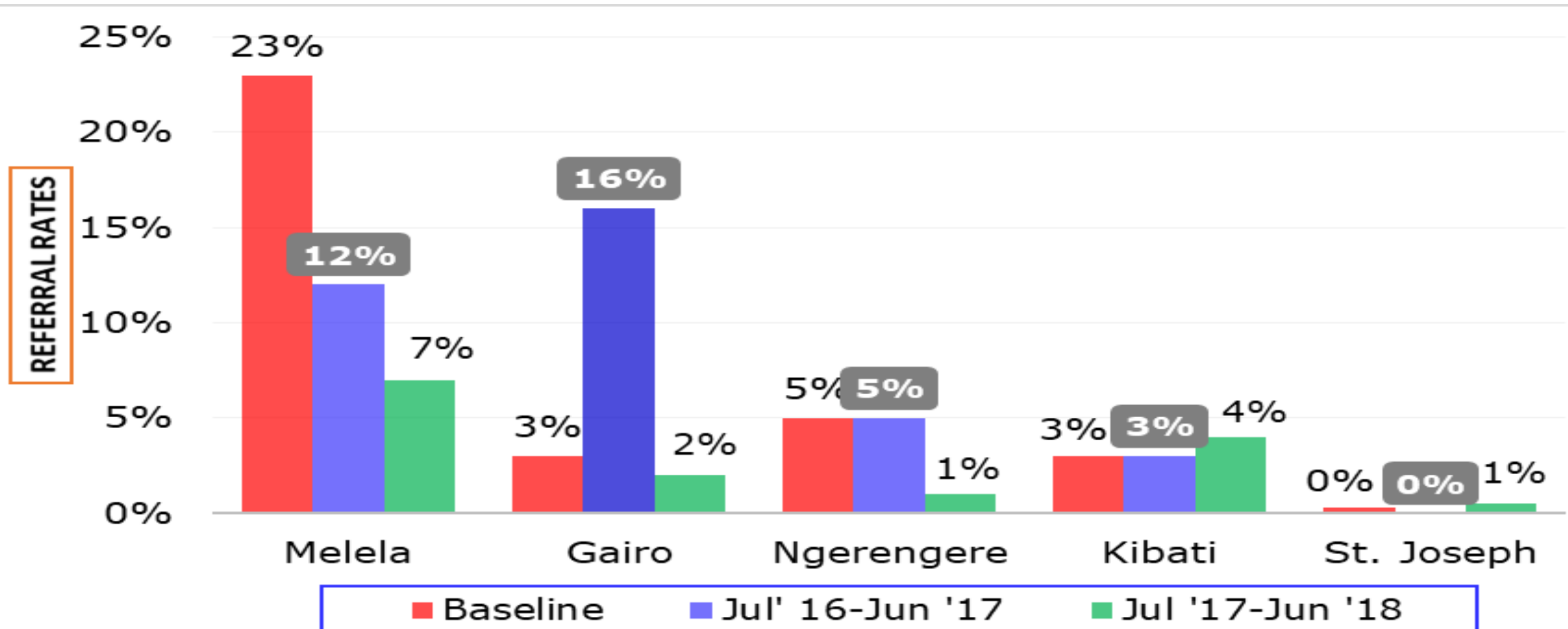
Trends in the average monthly health facility deliveries in the ASDIT project supported health centres.



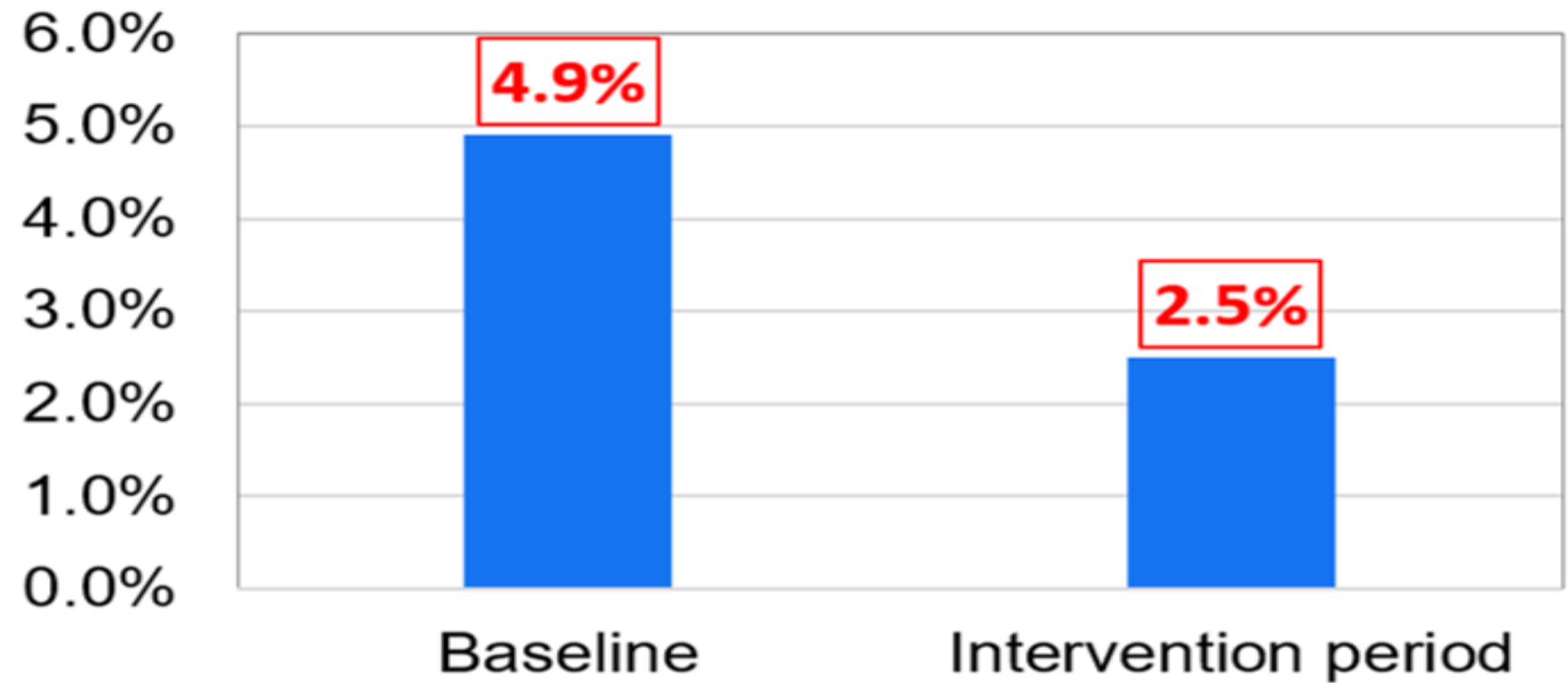
Caesarean section rates before and during the intervention period in the supported health centres



Trends in the referral rates in the health centres before and during the intervention period.

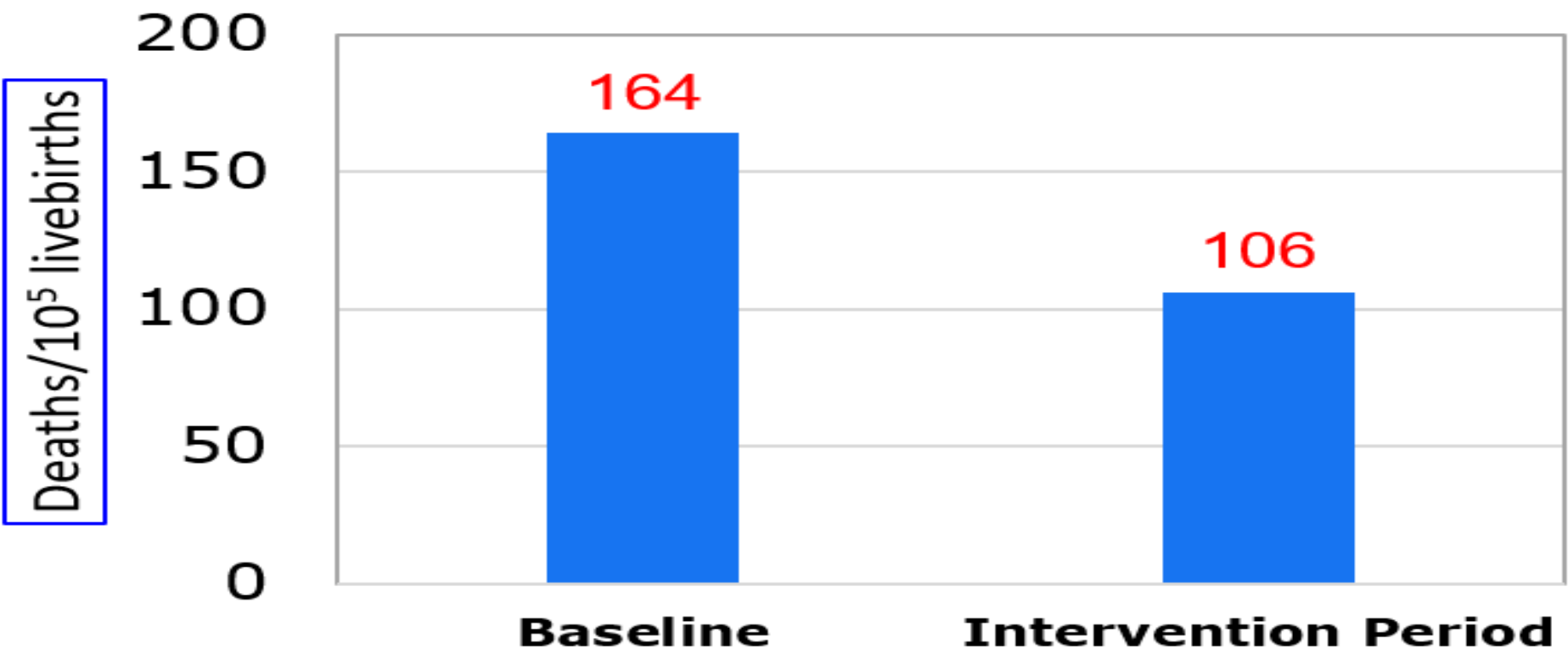


Proportions of women with severe complications of pregnancy and child birth (morbidity) who died before and during the intervention period



	Jul' 14 – Jun '16	Jul' 16 – Jun '18
Maternal deaths	7	7
Maternal morbidities	142	277

Proportions of maternal deaths per 100,000 live births before and during the intervention period.



	Baseline	Intervention Period
	Jul' 14 – Jun '16	Jul' 16 – Jun '18
Maternal mortality ratio	164	106
Maternal deaths	7	7
Live births	4,266	6,698

Conclusion

- The 3 month training program in maternal and newborn emergency care (including surgery and anaesthesia) is a **safe, effective, and an immediate solution** that is currently saving lives of mothers and babies in rural Tanzania.
- This education program can be used to meet the demand for maternal and newborn emergency services in rural areas in Africa.