# Helping Mothers & Babies Survive: Improving Health Infrastructure in Rural Tanzania

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# Background

Mwanza Region is one of the regions with the highest burden of maternal and childhood mortality and morbidity in Tanzania. High rates of poverty coconspire with inadequate health services. As a result, in 2016:

- Fewer than half (42%) of pregnant women in Mwanza region had attended ANC four+ times.1
- The percentage of births attended by a skilled attendant was 54%, meaning that only one in two mothers and newborns has potential access to emergency care.1
- Only 20% of women sought post-natal care within 48 hours of delivery.

The Mama na Mtoto aims to strengthen health systems, health facilities, and community engagement.

## Mbarika Context

Mbarika Health Centre (HC) stands in a remote part of Misungwi district, and is frequently cut off from the main road during the rainy season.

The HC serves a catchment population of 67,000 and also attracts patients from the next district. This area was responsible for a high percentage of the maternal & newborn deaths in the district.

The HC was designated as a Comprehensive Emergency Obstetric & Neonatal Care (CEmONC) site, but until the construction of an operating theatre (OT) by Mama na Mtoto in 2018, it functioned more like a large dispensary.

In addition to the OT, the project has also built a new maternity ward to accommodate increased demand.

Since the OT began functioning in March 2019, fifty Caesarean sections have been conducted2, with no maternal deaths, no sepsis, and no infant deaths apart from one macerated stillbirth.

#### Renovation and Equipment Support in Mbarika





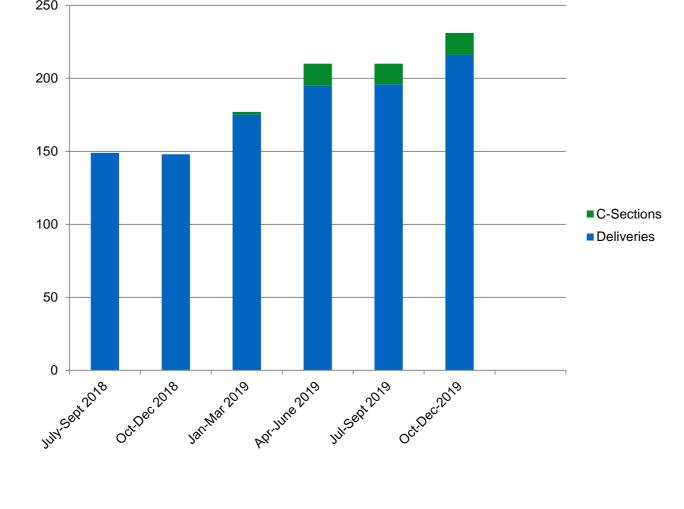
Left: Rear view, new OT. Above: Equipment for new OT

Below: Original Maternity Ward, and new Maternity Ward under construction

Right: Figures showing increased utilization of Mbarika HC for deliveries since opening of the OT in March 2019, demonstrating improved community confidence







## References

- 1. Tanzania Demographic and Health Survey and Malaria Indicator Survey 2015-2016. Dar es Salaam: MoHCDGEC, MoH, NBS, OCGS, and ICF; 2016.
- 2. Misungwi District DHIS figures, March 2019 to January 2020.

# Izizimba Context

Izizimba dispensary is one of the most remote and difficult to access facilities in Kwimba District, serving a population of 18,743.

The original building housed both outpatient and maternity services, but could not offer privacy or a hygienic environment for clients or staff, and the facility operated below capacity: in 2018 there were only 14 deliveries per month (average).

Pregnant women were opting either to use facilities that were further away, or to deliver at home. In addition a crumbling staff house created hardship for health staff.

Mama na Mtoto built a new building for Outpatient and child health services, new staff housing, and renovated the original building to become a dedicated maternity ward, dramatically improving the service delivery environment.

#### Renovation Work Izizimba

Below: Original Izizimba dispensary and double staff house buildings. Right: New OPD building.







# **Renovation Process and Success Factors**

At Mbarika, the OT construction was completed by Suma JKT using GoTz single-source procurement rules. For the remaining construction at Mbarika & Izizimba and other sites, the project used *force account* or "direct labour" contracting, using small local firms or "fundis". Success factors include:

- Full District engagement: District Engineers were responsible for all oversight and quality control, and District Procurement Officers for all purchases according to Government of Tanzania rules; AHT gave transport & subsistence support for frequent site visits by District
- External verification: AHT contracted a local engineering firm (Savanna) to provide third-party quality assurance
- Mentoring for OT operations: Mbarika HC staff had one week at Bugando Medical Center for OT orientation. On-site mentoring visits, walk-through simulations to practice correct procedures & communications, and work on infection prevention protocols also ensured success.

### **Overall Construction Investment**

In total, the project supported infrastructure improvements at four sites:

- Mbarika HC new OT & maternity buildings (TSH 342.9M / C \$196,500)
- Mwawile Dispensary renovations (TSH 12.5M / C \$ 7,200)
- Nyamayinza Dispensary renovations (TSH 54.1M / C \$31,000)
- Izizimba new OPD & staff housing +reno (TSH 227.8M / C \$130,550)

# Acknowledgements

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