

# USAID Impact in Tanzania



## Reducing Maternal Mortality through Contraceptive Access

A high maternal mortality rate of 454 per 100,000 women in Tanzania represents 18 percent of all deaths of women of reproductive age. Although the Ministry of Health and Social Welfare recognizes contraception as a key maternal health intervention and acknowledgment of its economic benefits is gaining traction, only 27 percent of married Tanzanian women use a modern method of contraception. Significant scale up of services, particularly in remote areas, is required to reach women who want to use contraception and currently are not.

Marie Stopes Tanzania implemented a multipronged approach to expanding contraceptive access and reducing maternal morbidity and mortality. To reduce maternal mortality, Marie Stopes Tanzania promoted greater access to a full range of voluntary contraceptive services. Through a partnership between the U.S. Agency for International Development (USAID) and Department for International Development (DFID) between August 2011 and January 2015, Marie Stopes Tanzania implemented a program to reach the most underserved rural and periurban women with short-term, long-term, and permanent contraceptive services. In 2014, Marie Stopes Tanzania succeeded in serving more than a half million clients, around 350,000 of whom chose contraception services; those services equaled approximately 33 percent of the total use of modern contraceptive methods in Tanzania.\*

## Reaching Rural Women through Outreach Services

Approximately 70 percent of Tanzanians live in rural areas. The unmet need for contraception among rural women is 27 percent compared with 19.5 percent among urban women. Marie Stopes Tanzania outreach teams (comprising a surgeon, three nurses, and driver) set up 1- to 2-day mobile units in rural government health facilities and offered contraceptive counseling and a full range of short-term, long-term, and permanent voluntary contraceptive services free of charge. Mobile unit personnel spent at least 3 weeks each month visiting all identified sites in a district, working to reach each community up to four times per year. The DFID-USAID partnership enabled the expansion of outreach teams from 17 to 21, giving the program national coverage throughout every region.

## Expanded Services to Periurban Areas with Rickshaws

Urban and periurban areas in Tanzania are experiencing exceptionally rapid population growth of almost 5 percent per year. Most of this growth is due to migrants from rural areas who often arrive without means of income or knowledge of where and how to obtain basic health services. In low-income periurban areas, the DFID-USAID partnership supported a nurse who delivered voluntary contraceptive services using a three-wheeled auto-rickshaw, known as a bajaji.

**“We have managed to reduce maternal deaths by 60 percent thanks to contraceptive use, and we appreciate the partnership we have been enjoying from Marie Stopes International among other partners to reach the target.”**

**Dr. Neema Rusibamayila,  
Director of Preventive  
Services, Ministry of Health  
and Social Welfare**



**Bajaji outreach nurse**

The nurse traveled with a driver who doubled as a community mobilizer and site assistant, supporting site set-up and breakdown and material distribution. This outreach model allowed women to receive short- and long-term contraceptive services, whereas those who sought a permanent method were referred for free services at a Marie Stopes Tanzania center, outreach site, or appropriate government facility. The DFID-USAID partnership supported Marie Stopes Tanzania to reach underresourced periurban areas with 15 bajajis serving an average of 4,000 women per month. More than half of these clients were not previously using contraception, and 70 percent live on less than \$1.25/day.

## Engaging Young People to Address Unmet Need

Young people age 25 and younger account for 63 percent of the population in Tanzania. With this generation entering their economically active years, there is unprecedented opportunity for economic growth that will require supporting young people if they are to realize their potential. More than half of all women aged 15–24 are married, and women under 20 have the lowest uptake of contraception with only 9 percent using a modern method, and 44 percent of women experiencing pregnancy by age 19. Access to contraception is key to enabling young people to plan and attain their education and career aspirations. Low voluntary contraceptive uptake among sexually active adolescents leaves them at significant risk for unintended pregnancy and interrupted education and career objectives.

**“We go to where they are – so we’re able to reach a lot of women that otherwise would have no access to healthcare”**

Shida, outreach nurse

## Partnering with Local Government to Build Capacity

The DFID-USAID partnership allowed Marie Stopes Tanzania to deliver contraceptive services to low-income communities in close collaboration with local government authorities. When Marie Stopes Tanzania teams provided rural outreach services, they went to public facilities that have status in the community, but often lack trained providers, equipment, or stock to provide a full range of services. The public facilities are permanent places that women can return to for any necessary follow-up care.

Gender-based violence is a significant problem in Tanzania with 39 percent of women reporting experiences of physical violence and 20 percent reporting sexual violence. With funding from USAID, Marie Stopes Tanzania assisted the Tanzanian Police Force to establish one-stop service delivery and referral centers for survivors at police health facilities in two regions. By integrating legal justice and sexual and reproductive healthcare into a cohesive support system, Marie Stopes Tanzania helped ensure that women were able to receive help from different sectors where and when they needed it.

Young people face unique barriers to receiving contraceptive information and accessing discrete and voluntary contraceptive counseling and services. Marie Stopes Tanzania promoted awareness and understanding among young people, including how they could access free services and visit clinic centers. With USAID funding, Marie Stopes Tanzania implemented two projects. The first project linked community based organizations to Marie Stopes Tanzania’s youth-friendly services in targeted districts with high teenage pregnancy rates. Through the second project, Marie Stopes Tanzania provided contraceptive counseling and services to young people through the auto rickshaw model at institutions of higher learning and public facilities in periurban and urban areas. USAID support also enabled Marie Stopes Tanzania to continue exploring cost barriers and new ways to refer young people to service delivery points free of charge. One proposed model was to adapt Marie Stopes Tanzania’s traditional outreach services to young people. Marie Stopes Tanzania also sought innovative ways to reach young people such as using peer educators to provide information and service referrals.



Marie Stopes Tanzania staff delivering contraceptive services at a public health facility



Marie Stopes Tanzania launched *Chagua Maisha* (Good Life campaign) to reach young people with information and services. The campaign recruited youth ambassadors from the Miss Tanzania beauty queen competition, radio DJs, pop stars, and other influential young people.

\* Excludes condoms

Data source: Tanzania Demographic and Health Survey 2010.

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