



### Supporting the Tanzania MoHSW to Scale Up Focused Antenatal Care Nationwide



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10 June 2008

Jhpiego in partnership with Save the Children, Constella Futures, The Academy for Educational Development, The American College of Nurse-Midwives and Interchurch Medical Assistance

### Session Objectives

- To describe the antenatal care (ANC) situation in Tanzania
- To explain how the focused antenatal care (FANC) approach has been implemented and scaled up to improve uptake of malaria in pregnancy (MIP) services and overall ANC service quality
- To review challenges and lessons learned in bringing a national program to scale



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### Key Tanzania Statistics

- Population of **40.2 million**, (CIA World Factbook, May 2008)
- **26 regions** (21 mainland, 5 Zanzibar), with **121 districts** (GoT website)
- **MMR**: 578/100,000 (TDHS 2004/05)
- **IMR**: 68/1,000 (TDHS 2004/05)
- **HIV prevalence**: 7% among adults 15-49 (THIS 2003/04)



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### Selected ANC Statistics from TDHS 2003/04

- **Attendance:**
  - 94% attend at least one ANC visit
  - 62% make four or more ANC visits
  - Only 14% make their first visit in the first trimester
- **Services:**
  - 22% take at least 2 doses of sulfadoxine pyrimethamine (SP) for intermittent preventive treatment of malaria during pregnancy (IPTp)
  - 16% use insecticide treated nets (ITNs)
  - 54% tested for hemoglobin and syphilis status
  - 47% informed of danger signs in pregnancy



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### Program Background

- Selected accomplishments under USAID-funded MNH program:
  - Developed national cadre of focused antenatal care (FANC) trainers
  - Strengthened capacity of zonal training centers in Arusha and Iringa to manage and implement FANC training
  - Developed FANC preservice curriculum
  - Strengthened clinical and teaching skills of faculty from certificate midwifery schools
- ACCESS began in Tanzania in 2004.



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### Attention Check!

- According to the 2003/04 TDHS, what is the IPTp 2 uptake percentage?



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## ACCESS/Tanzania Program Objectives

- To assist the MOHSW in achieving the Abuja and PMI targets for IPTp coverage, through the FANC approach:
  - Prevention of MIP through use of IPTp and counseling on ITNs
  - Testing and treatment for syphilis in pregnancy (SIP)
  - Linkages with PMTCT services



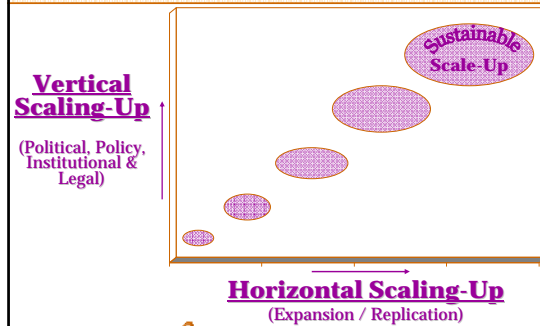
## ACCESS/Tanzania Program Interventions

- ACCESS/Tanzania uses FANC/MIP/SIP as a platform for strengthening service delivery through:
  - Policy/advocacy interventions: working with policy makers at all levels
  - Clinical and quality improvement interventions: building the capacity of trainers, providers and facilities (pre- & in-service)
  - Community interventions (particularly through the White Ribbon Alliance (WRA) of Tanzania)

## Partners

- **Implementation:**
  - MoHSW (RCH Services, National Malaria Control Program, Human Resources Development Directorate and Health Services Inspectorate Unit)
  - IMA World Health/Christian Social Services Commission
  - WRA of Tanzania
  - T-MARC
  - JSI/DELIVER
- **Funding:**
  - USAID Child Survival, PMI and PEPFAR funds
  - ADB (through MoHSW)

## Defining Scale Up



## Scale Up for Sustainability (1)

- **Advocacy:**
  - National guidelines
  - Budget allocations
  - Drug supply and distribution
- **Capacity Building:**
  - Development of training materials
  - Development of local training capacity
  - Strengthening of preservice education

## Scale Up for Sustainability (2)

- **Quality improvement:**
  - Performance improvement
  - Supervision
  - Data recording/reporting

## Achievements to Date (1)

### Advocacy:

- Development/updating of national guidelines
- Estimated 23% of targeted districts including funds for FANC training in their health plans
- Improved availability of SP for IPTp
  - Jan – Dec 07: **53%** of sentinel sites had a stockout
  - Jan – Mar 08: **21%** of sentinel sites had a stockout
- Support to the WRA for safe motherhood activities, including advocacy efforts



## Achievements to Date (2)

### Capacity building:

- Development of in-service FANC training materials
- Training of 577 in-service clinical trainers in FANC – primarily from 16 regions
- Training of an additional 2,247 providers in FANC (estimated 47% of all ANC providers)
- FANC integrated into curriculum of all 51 nursing/midwifery schools
- Anticipated 1,600 nurse/midwives to graduate this year with updated knowledge/skills in FANC



## Achievements to Date (3)

### Quality improvement:

- Development of FANC standards as part of a national ANC quality improvement (QI) initiative
- Training of zonal, regional and district RH coordinators and incharges of larger health facilities in facilitative supervision (started end-May 08)
- Establishment of 30 sentinel sites to monitor program trends



## Coverage to Date

- Total of 1,258 facilities with a FANC trained provider - estimated ANC facility coverage rate of 26%

ACCESS-TANZANIA Program  
ANC Training Coverage Between Oct 2005 and May 2008



## Attention Check!

- About how many nurse/midwives will graduate from certificate and diploma nursing/midwifery schools this year with updated skills in FANC/MIP/SIP?

## Latest Service Delivery Statistics (July 07 – March 08)

Service	July – Sept 07		Oct – Dec 07		Jan – Mar 08	
	# ANC Clients	% ANC Clients	# ANC Clients	% ANC Clients	# ANC Clients	% ANC Clients
IPTp 1	4,281	62%	4,540	62%	7,639	72%
IPTp 2	2,960	43%	3,320	37%	8,812	62%
ITN vouchers	7,161	86%	8,441	90%	9,267	66%

Source: ACCESS FANC service statistics database

## Challenges

- Human resource shortages, lack of appropriately skilled providers at lower level facilities
- Inconsistent supply of necessary equipment, supplies and drugs
- Delay in/continued ANC attendance
- Ensuring quality during a relatively rapid expansion/scale up effort
- Inability of national HMIS to capture and report data for regular monitoring of program progress and effectiveness



## Lessons Learned

- Importance of advocacy at all levels
- Capacity building through cascade approach
- Effective/efficient systems for monitoring program progress
- Visibility of malaria, leveraging this focus to address a broader ANC package



## Next Steps/Continued Programming (1)

- Establishing the FANC program in Zanzibar
- Focus on QI initiatives, while scale-up continues
- Development of training resources at national level, as well as in remaining regions
- Supporting training of providers, through trained trainers
- Continued work with sentinel sites to monitor overall program trends, while working with MoHSW to update HMIS
  - Introduction of ANC client exit interviews, to triangulate data by IPTp1 and 2 as well as bed net use

## Next Steps/Continued Programming (2)

- Tracking of preservice graduates and assessment of FANC competencies post-placement
- Introduction of community health worker component (?)
- Transition of ACCESS support for FANC to quality improvement and monitoring, versus implementation of training
- Strengthening linkages with labor/delivery services and newborn care

## Anticipated Results by September 2008

- Total of 6,967 providers and supervisors updated in FANC
- Total of 3,489 facilities with providers updated in FANC (estimated 73% coverage on mainland)
- 45 national trainers developed to conduct FANC TOTs

ACCESS-TANZANIA Program  
FANC Training Coverage By Sep 2008



## Attention Check!

- What was the IPT2 coverage rate for January – March 2008 for the ACCESS/Tanzania program, as per the ACCESS/Tanzania “sentinel sites”?

Ahsanteni  
Sana!



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