

Jessica Jeffrey - Tanzania

Summary of Tanzania Project

The Bixby Program in Population, Family Planning and Maternal Health made it possible for me to travel to Kigoma , Tanzania to research the issues of family planning and maternal mortality in the region. Kigoma is located in Western Tanzania along the shores of Lake Tanganyika , and is estimated to be one of the poorest regions within Tanzania . The annual per capita income in Kigoma is approximately US \$140. This region has one of the lowest rates of contraceptive prevalence, reported to be 14%, and is also among those with the four highest maternal mortality rates in Tanzania , with an estimated rate of 300/100,000. The Kigoma region has a population of 1.6 million individuals, of which 25% are women of childbearing age. Maweni Regional Hospital is the sole public hospital for the entire region and is located in the urban district of Kigoma. There are an additional four health centers and fifty-four village dispensaries scattered throughout Kigoma's rural region.

While in Kigoma I worked with the Community Based Distribution (CBD) program of the Lake Tanganyika Catchment Reforestation and Education Project (TACARE), a division of the Jane Goodall Institute. This program involves villagers in family planning education and distribution of contraceptives within their own communities. CBD agents are the leading providers of modern family planning services in rural Kigoma. In order to help secure future funds for this program, I gathered data and wrote a case study of the program. I conducted focus groups with CBD agents and supervisors to obtain qualitative data about program operations and agents impressions of the program. The CBD agents and supervisors were eager to share their experiences with me. They also shared several suggestions for making the program operate more effectively. In addition to learning about the CBD program, I learned many things about the hardships associated with living in rural villages in Tanzania , such as having little access to health care, electricity and running water.

In addition to working with TACARE's CBD program, I also had the opportunity to work with Maweni Regional Hospital and Kigoma's District Medical Office. I worked with these institutions to collect data on the trends of maternal mortality in the Kigoma region. With the direction of the Regional Medical Officer, Dr. Godfrey Mbaruku, I wrote a paper to highlight the improvements and setbacks to the reduction of maternal mortality in the region over the last twenty years. The paper highlights the finding that an influx of refugees to the Kigoma region in 1993 was associated with a subsequent increase in maternal mortality in the region.

I was also fortunate to have the opportunity to gather data and write a report detailing the low cost, effective interventions which have been implemented in rural villages to reduce maternal mortality. This paper reports on the replication of successful interventions conducted at Maweni Regional Hospital in order to reduce maternal mortality in the Kigoma rural district through the involvement of auxiliary health workers in delivering

maternal health services and community participation. In writing this paper I learned that interventions do not have to be high in cost in order to be successful.

I am grateful to the Bixby Program in Population, Family Planning and Maternal Health for the opportunity to work in Tanzania . I have learned many valuable lessons about healthcare in developing countries. I was even able to pick up a little Kiswahili during my travels. I encourage others to become involved in the rewarding field of international health.