

Maternal and Child Health

Project Sites

Dar Es Salaam, Tanga Region



1. Background of Project

Tanzania has one of the highest infant mortality rate in the East African region, and due to the lack of doctors, nurses and medical equipment, health and medical services cannot be readily expanded. To address the situation, the Government of Tanzania set the objectives of reducing infant and maternal mortality and requested Project-type Technical Cooperation from the Government of Japan in order to achieve them.

2. Project Overview

(1) Period of Cooperation

1 December 1994-30 November 1999

(2) Type of Cooperation

Project-type Technical Cooperation

(3) Partner Country's Implementing Organizations

Directorate of Preventive Services, Ministry of Health
Department of Paediatrics Muhimbili Medical Center (MMC)
Department of Microbiology, Muhimbili University
College of Health Sciences
Tanga Regional Health Management Team (RHMT-Tanga)

(4) Narrative Summary

- 1) Overall Goal
To attain the national maternal health and child survival goals by the year 2000.
- 2) Project Purpose
To reduce maternal and child morbidity and mortality.
- 3) Outputs
 - a) Improve maternal and child health services in Tanga and the Korogwe Districts as model areas are improved
 - b) Virology diagnostic capacities in EPI diseases at MMC is improved
 - c) The capability of activities directed towards the reduction of maternal, infant and child mortality rates at MMC is strengthened.

4) Inputs

Japanese Side

Long-term experts	13
Short-term experts	13
Trainees received	16
Equipment	204 million yen
Local cost	96 million yen

Tanzanian Side

Counterparts	27
Land and facilities	
Local cost	

3. Members of Evaluation Team

Team Leader:

Hiroshi SHIKU, Dean & Professor of the Faculty of Medicine, Mie University

Pediatrics:

Minoru SAKURAI, Director of Ueno City Hospital

Public Health:

Yasuo CHINZELI, Professor of the Department of Zoology, the Faculty of Medicine, Mie University

Virology:

Takao YOSHII, Senior Researcher, Department of Anti-virus Products, National Institute of Infectious Diseases

Laboratory Administration:

Katsuhito NISHIOKA, Director, Educational Affairs Division, Faculty of Medicine, Mie University

Evaluation Planning:

Akira SUZUKI, Second Medical Cooperation Division, Medical Cooperation Department, JICA

4. Period of Evaluation

9 June 1999-24 June 1999

5. Results of Evaluation

Because it was recognized that the project includes three different components (MCH activity in Tanga region, enhancement of virological diagnosing capacity,

and enhancement of pediatric capacity), a separate evaluation was carried out for each of the three.

(1) Efficiency

The inputs for the MCH in Tanga Region and Pediatrics at MMC, were all provided as planned. The construction of the virological laboratory at MMC was delayed on the Tanzanian side, but a full-functioning laboratory was eventually completed, so it was perceived that the main output was achieved with minimum inputs.

(2) Effectiveness

For MCH in Tanga Region, 227 trained traditional birth attendants (TBAs), approximately one-third of all TBAs in the project area, could provide safer delivery service as a result of using sterilized delivery kits. However, the maternal mortality and infant mortality rates were not clear in the five-year period of the project.

Regarding virology at MMC, a polio laboratory was newly established, and the virological laboratory work was initiated by the Tanzanians themselves. The surveillance achievement of Acute Flaccid Paralysis (AFP) was eight cases in 1997, 128 in 1998, and 64 as of June 1999; therefore, this result was evaluated highly.

Regarding pediatrics at MMC, the purpose of enhancement of examination and diagnosing capacities was mostly achieved in terms of technologies. Although the mortality rate in the pediatric ward has remained at the same level over the past three years, the capacity of the laboratory and quality of diagnostics were enhanced and medical services were improved. Therefore, it was judged that the project purpose was generally achieved.

(3) Impact

Regarding MCH in Tanga Region, cost recovery for delivery was introduced, and 85 percent of the community women in the study areas desired assistance from TBAs who were trained by JICA. Thus, it was considered that the project had a high impact on raising the awareness of health issues among community people.

Regarding virology at MMC, if the performance of polio diagnosis in Tanzania is considered (polio was eliminated), it is expected that accurate and timely virological diagnosis will be achieved at the laboratory in the near future.

Regarding pediatrics at MMC, the introduction of the idea of Laboratory Based Medicine was a major achievement.

(4) Relevance

The activities of MCH in Tanga Region, Virology at MMC, and Pediatrics at MMC will contribute to safe delivery, eliminate polio and reduce the morbidity and mortality rate of children and infants. Therefore, these were consistent with the improvement of MCH services in the National Policy of Tanzania.

(5) Sustainability

Regarding the MCH activity in Tanga Region, it was expected that the activities of TBAs could ensure safer



Examination room of pediatrics in Muhimbili Medical Center

delivery if the TBA kits (hygienic and safer delivery kits, among which the consumable items are paid for by the beneficiaries) in trial use were permanently established.

Regarding virology at MMC, if the Center can strengthen cooperation with other related organizations such as WHO and continue to secure reagents and other consumable goods, sustainability would be very high.

Regarding pediatrics at MMC, technical sustainability was expected in terms of laboratory and diagnostic capacities, but securing the funds for reagents and consumable goods in the laboratory and maintenance of equipment was a major issue. If income is increased through cost recovery for the laboratory services being introduced, and operation of the laboratory is assured, higher sustainability would be possible.

6. Lessons Learned and Recommendations

(1) Lessons Learned

As this project simultaneously implemented three different areas of cooperation, various difficulties arose in project management. Thus, when one project includes three different components that must be implemented separately, it is necessary for the two countries to discuss and coordinate more closely than usual when the project is being planned.

(2) Recommendations

It was felt that MCH services would be further improved by the strengthening of TBAs in Tanga Region, and self-operation of the laboratory and medical teamwork system at the pediatrics of MMC could be sustained by additional cooperation. Therefore, Follow-up cooperation in this area was recommended.

7. Follow-up Situation

In view of the foregoing, after the cooperation period ended, a two-year Follow-up cooperation program was implemented to run from 1 December 1999 to 30 November 2001.