Combating Malaria in Tanzania

Challenge

Due to poor living conditions, the majority of Tanzanians suffer from malaria - a preventable disease that can have a serious negative impact on pregnant women and young children. Malaria is the number one killer among children in Tanzania. Mothers who contract malaria during pregnancy run the risk of having low birth weight babies, maternal anemia, impaired fetal growth, spontaneous abortions, stillbirths, and premature babies.



Photo: USAID/Tanzania John Dunlop

A child health nurse consults with a mother at a maternal Child Health Clinic in Iringa, Tanzania.

Results

The program quickly expanded beyond the initial three target regions. In just under two years, the guidelines have been adopted nationwide. According to the Tanzania National Malaria Control Program, the coverage of women receiving IPT using the anti-malarial drugs during clinic visits increased from 29% in 2001 to 65% in 2003.

This increase is due to multiple influences including the development of national FANC guidelines and the FANC package used for in-service training. USAID continues to encourage the use of FANC practices in health facilities to ensure that Tanzania reaches its targeted goal of 80% coverage by 2005.

Initiative

In 2001, USAID initiated a program to revise the national guidelines for treating malaria during pregnancy and to strengthen health services for pregnant women. Working in collaboration with the Ministry of Health, USAID assisted in developing new guidelines and implementing them in three initial target regions in Tanzania - Arusha, Manyara, and Iringa.

The program uses focused antenatal care (FANC), a comprehensive care approach for pregnant women that provides intermittent presumptive treatment (IPT) services in early detection and management of diseases such as malaria, and counseling on health promotion, birth preparedness, complication readiness, and individualized birth planning.

The new guidelines include the practice of using anti-malarial drugs that prevent and control the effects of malaria on mothers and their unborn children. This approach is helping to ensure that more women are protected from contracting the disease during pregnancy.

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Case Study

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