



THE WHITE
RIBBON
ALLIANCE

HEALTHY MOTHERS
HEALTHY WORLD

**THE PROCEEDING OF THE SEMINAR
FOR
ALL PARLIAMENTARIANS
AND
WHITE RIBBON ALLIANCE
ON
SAFE MOTHERHOOD TANZANIA
THAT TOOK PLACE
IN
DODOMA
ON
7TH FEBRUARY 2017**

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1. Introduction

This seminar was convened in the Parliament premises in Dodoma and involved among others all parliamentarians and members of White Ribbon Alliance Tanzania (WRATZ). The main purpose of convening this seminar was to bring everybody in the House including the Speaker of the Parliament, Hon. Ministers, Hon. Deputy Ministers, chairpersons and deputy chairpersons of the standing committees, Chairperson and members of the Parliamentarians Group for Safe Motherhood (PGSM), Hon. Members of Parliament, Members of WRATZ, ladies and gentlemen to discuss on the situation of maternal and newborn health services in Tanzania with the expectation of coming out with what can be done to reduce or eliminate the maternal related deaths. The list of Participants is attached as **Annex-1**.

It was reported earlier that based on the grand survey on the health situation in Tanzania that is conducted in every 5 years (Tanzania Demographic and Health Survey (TDHS) 2010 and 2015/16), show that the number of maternal death has increased from 8500(2010) to 11000(2015/16) per year and that to every single maternal death that occurs, there are 6 newborn deaths, making a total of 66,000 newborn deaths per year. In this case therefore, about 77,000 Tanzanians die in every year due to complications during birth; meaning that in every single day about 211 persons die mainly during birth.

A few presentations and contributions from various persons and members of Parliament were made. The list of persons and members of Parliament who presented/contributed during the seminar is attached as **Annex 2**. In this report more of their presentation and contributions will be highlighted. The seminar program started at 1, 00 pm and conclude at 5.25 pm. The seminar program is attached as Annex-3.



Opening of the Seminar

The seminar was opened by the chairperson of the seminar Hon. Peter Joseph Serukamba (MP), during the opening Hon. Serukamba invited all seminar participants to the conference and started the seminar as per the prepared program. See **Annex-3**.

A brief Speech from the National Coordinator for WRATZ

A brief speech was delivered by Ms. Rose Mlay a WRATZ National Coordinator, in her brief speech Ms. Mlay she extended heartfelt thanks to the Hon. Speaker for allowing this seminar for Safe Motherhood Tanzania to be conducted in the parliament by involving all Parliamentarians as well as assenting to be the Guest of Honour. She also extended her gratitude to all Parliamentarians for accepting the invitation to participate, without forgetting all directors, chairpersons and parliament officials for devoting their valuable time in preparing the seminar. She concluded her gratitude by extending her appreciation to UNICEF Tanzania and the White Ribbon Alliance Global for financing this seminar.

In her brief presentation Ms. Mlay said despite the fact that Government has done and still making effort in making sure that women and newborns survive during birth in Tanzania, still the situation is not satisfactory. She mentioned that based on the grand survey on the health

situation in Tanzania that is conducted in every 5 years (Tanzania Demographic and Health Survey (TDHS), the number of maternal deaths has increased from 8,000 deaths per year in 2010 to 11,000 deaths per year in 2015/16). The findings also indicate that to every single maternal death, there are 6 newborn deaths taking place, making a total of 66,000 newborn deaths per year. In this case therefore, a total of 77,000 Tanzanians die in every year due to complications during birth;



The statistics above shows that that in every single day about 211 persons die mainly during birth.

Ms. Rose Mlay described the number of deaths per day with the example of our national carrier vessel bombardier with carrying capacity of 70 passengers; the daily maternal and newborn deaths of about 211 is equivalent to having 3 bombardiers crashing on daily basis in the country and killing all passengers on board. She said THIS CANNOT BE TOLERABLE.

During her presentation, Ms. Mlay requested the members of Parliament to

- Make sure that the central Government and the district councils set aside enough money to ensure that all shortfalls regarding maternal and newborn services are arrested.
- Work together in educating the citizens that pregnant women in realising their labour pains should be taken/seek services from a health facility with qualified staff and capable of providing life saving services.
- The committee members in the budget committees should make sure that the Comprehensive Emergency Obstetric and Newborn Care (CEmONC) services, which is Basic Emergency Obstetric Services + ability to perform surgery and provide safe blood services; are included in every budget plan for the central Government and district Councils as well as making sure that the budget line is actually going to save the lives of mothers and newborns.

- During the budget debate in the House, budgets without CEmONC services should not be accepted
- Work together in educating women in their meetings that food and nutrition is essential without forgetting their responsibility to seek services from a facility with qualified staff and capable of providing life saving services.
- And lastly but not least she requested that they go through the 2017/2018 national budget and make sure a budget line specifically for CEmONC is included with adequate fund not only for the interest of White Ribbon Alliance or Parliamentarians Group for Safe motherhood, but for the sake of Tanzanians who need CEmONC services.

The full speech by Ms. Rose Mlay and WRATZ National Coordinator is attached as **Annex-4**

Opening Speech by the Speaker of the Parliament

A brief opening speech from the Hon. Speaker was presented on his behalf by Hon. Najma Murtaza Giga (MP). In his speech he congratulated the Parliamentarian Group for Safe motherhood (PGSM) together with the White Ribbon Alliance for Safe Motherhood Tanzania for coordinating this seminar. Hon Speaker in his speech also expressed thanks for inviting him as the Guest of Honor.

In his opening speech, the Hon. Speaker said the Almighty God has given women the role of bringing new being to the world, in this respect we are supposed to express joy as opposed to worrying of losing their lives and their babies too. He said, if there is any nation where births are not taking place, then, that nation is dead. Therefore, women are supposed to continue giving birth and raise families so that they contribute to the national economy.

He said he was astonished by the reported number of maternal and newborn deaths, which he said is high enough to call it a national calamity. He insisted in his speech that we need to **stop doing business as usual**; we should get out of the box and conduct differently in a walk towards saving women and newborns lives.

Before concluding his opening speech, he called-upon all MPs to become more serious when they are passing the budget bill. The Speaker wanted them to be keen enough to see that the Ministry of Health Social development, Gender, Elderly and Children, the Ministry of Local Government and Regional Administration as well as the district councils have allocated enough funds aimed at saving lives during birth. He said we should all be responsible with and accountable to all these deaths. He said if MPs were keen enough during budget sessions in the district councils, in the standing committee and during debates in the house this calamity would not have increased to reach 11 thousand deaths this year from 8 thousands in the past years.

Hon. Speaker said he has been astounded to hear that 48 councils did not set any budget line in the 2016/2017 budget to finance Comprehensive Emergency Obstetric and Newborn Care (CEmONC) services, and for those who had budget line for this was not directly addressing life savings. He requested Hon. Members of Parliament to be responsible so that lives of mothers and newborns can be saved. The fully speech by the speaker is attached as **Annex-5**.

A brief speech by a Representative from UNICEF

A brief speech from UNICEF was delivered by Dr Asia Hussein who was representing UNICEF in this seminar. In Her speech, Dr. Asia started by I wishing everybody good afternoon. She also joined other previous presenters by congratulating the Honourable Speaker for providing this rare opportunity for making this seminar take place in the Parliament. She then passed on good wishes to the Parliamentarian Group for Safe Motherhood (PGSM) together with the White Ribbon Alliance for Safe Motherhood Tanzania for coordinating this seminar without forgetting to thank all parliamentarians for agreeing to come and participate in this seminar. Truly the attendance is big and in this way we can see how parliamentarians are concerned with the maternal and newborn health she concluded her appreciative note and thanked all of them on-behalf of UNICEF.

Dr. Asia in her presentation she told the Speaker that apart from the efforts played by the Government and development partners in the health sector, Tanzania is still faced with major challenge of reducing maternal deaths, that includes deaths during the pregnancy, deaths during birth, deaths that occurs within 42 days after birth and deaths that occurs to newborns under one months of age.

She said, early pregnancies contribute heavily to the number of deaths that could be avoided. The survey report on maternal and newborn health conditions and malaria indicators, Tanzania (2015/2016) which was recently released together by the National Bureau of Statistics and office of Government Statistician, Zanzibar indicate that more efforts are required in order to attain the national goal of reducing maternal and newborn deaths.

Dr. Asia said, surprisingly, maternal deaths have increased instead of going down. Tanzania has made a big stride in reducing under-five years' deaths to the extent of attaining the millennium development goal even before the time set. She said this was made possible and we are all happy for this. Nevertheless, she said, still more deaths are happening for children under-five years which could be avoided. She mentioned in her speech that these deaths are caused by newborn deaths, malaria, pneumonia, diarrhea, kwashiorkor etc.

Dr. Asia in her speech she said It is important that we all stand and work together in implementing the National Strategy as well as strengthening accountability in matters relating to maternal and newborn health services in all community levels and health facilities.

She then assured the Hon.Speaker that the UNICEF together with other UN organizations that are working in support of health sector they will continue working in collaboration with the United Republic of Tanzania in fighting to reduce maternal and newborn deaths as well as reducing under five years mortality. Likewise they are working towards strengthening the health sector so that it can provide good services to mothers, children and the youth.

Before concluding her speech, she requested the Hon. Members of Parliament to First, to make sure that the Government set aside enough money specifically for the health sector. And ensure that all the money set aside for the health sector strengthening is released and used for the intended purposes. He also asked the MPs to continue pushing the Ministry of Health **social development, gender, elderly and children** to continue providing report of the maternal, newborn, children and youth health situation in Tanzania (RMNCAH Score Card) on quarterly basis. The fully speech by Dr. Asia Hussein is attached as **Annex-6**.

Presentation by Dr. Ahmed Makuwani,

Dr. Ahmed who is a representative from the Ministry of Health, Communit Development, Gender, Elderly and Children started his contribution by referring to the previous speakers who to a large extent based their discussions on the available statistics. He said based on the mentioned statistics, one has to measure where one should put his money and get the right results. Dr. Ahmed said using such statistics you will definitely understand that we are faced with challenges of leadership and governance at the facilities and in different levels of implementation. Dr. Ahmed said we should invest in leadership and governance.

He asked the Hon. MPs, where should they put their coin?, Dr. Ahmed said where one should put his money and get results will include Family Planning (FP) and said that, it is possible to reduce maternal death by 40% if FP is used effectively. The second area that he mentioned was the availability of nurse midwives and medical doctors, he said we have enough doctors and nurse midwives in the country but they have not been effectively engaged. The third area that he mentioned as where one should put his money was the strengthening of maternal and newborn health services including CEmONC/BEmONC and lastly he mentioned political will of the leaders.

Dr. Ahmed told the MPs that if they decide to make follow-up in their areas it is likely that big changes will be seen. He said he has the example of Mkuranga district whereby the councilors decided to make sure that caesarian section is conducted in the district hospital and they did so.

He said he is sure that most of the existing problems can be addressed from where they are happening. The existing gap of the human resource for health is about 42%. But still the existing team can arrest the situation if we work together. For example, eclampsia is a small problem that requires few procedures and simple equipment to examine and arrest the situation. Equipment such as vacuum extractor is simple and can only cost 435,000 from MSD shops, but it is

surprisingly that some of the regional hospitals are going without one and women are losing their lives in the same hospitals. Dr. Ahmed concluded his contribution by saying, **if we want we can.**

Hon. Dr. Faustine Ndugulile (MP) (CEmONC and Budget)

He started his contribution by saying the major problem facing health services in the country is the budget which is still dependant to a large extent. The existing statistics show that we still have challenges in all health related areas. The fertility rate is still too high, on average a Tanzanian women have 5 live births in her life time, and maternal deaths are also too high. The current statistics show that about 556 women out of 100,000 live births die in each year which is too high and statistics also show that the use of family planning by women of the reproductive age in the country is about 30%, and about 27% of young ladies of the age between 15-19 years have already given birth.

Dr. Ndugulile called his fellow MPs to increase effort in strengthening FP, maternal and newborn health services and introduction of youth friendly reproductive health education in the schools and in the facilities.

Hon. Dr. Faustine Ndugulile concluded his contribution by saying that the available budgets and release of funds for maternal and newborn services is too low and there is a need for the Hon. MPs to continue pushing the Government to allocate enough funds to rescue the lives of mothers and newborns.

Hon. Dr. Jasmine Tisekwa Bunga (MP)

Dr. Jasmine Tisekwa started her contribution by congratulating WRATZ and the Chairperson for PGSM Hon. Jenista Joackim Mhagama for making this seminar a reality. She then started her contribution by narrating the importance of investing in food and nutrition for pregnant women.

Dr. Jasmine said, if pregnant women fail to get nutritional food rich of necessary vitamins she is likely to be anaemic (run short of blood) which is so dangerous during delivery if she will not get the life saving services. To the side of the newborn, it becomes even severe if the pregnancy was not nutritive enough. Dr. Jasmine said there is a need of investing in supplements such as Iron and Folic acid which can be used by pregnant women throughout their pregnancy period to raise their blood level as well as raising their nutritive status.

Dr. Jasmine ended her contribution by asking Hon. MPs to see that the Ministry of Health **social development, gender, elderly and children** allocate enough money during the budget to purchase Iron and Folic Acid for all health facilities in the county.

Dr. Rashid Chuachua

Dr. Rashid started his contribution by saying that we have big challenge of making sure that our children under the age of five years remain safe. Statistics show that about 16% of the Tanzanian population is covered by children of the age below five years which indicates that the number of children is too high despite the fact that fertility rate is also high.

Hon. Dr. Rashid said there major challenge that we are facing is to see how we can reduce U5 mortality. Hon. Dr. Rashid said there are major causes of child mortality in this country and he mentioned that 9.3% are caused by HIV/AIDS, 22.7% malaria, 21.5% pneumonia, 16.8% diarrhoea and 35% malnutrition. We agree we have many challenges within and outside the health system, but as members of Parliament we should think of our position so that we can rescue the children that a dying. It is true that the Government is working under different initiatives to strengthen the health system but the problem is so big to the extent that we need different approaches. Hon. Dr. Rashid gave example by saying “in my constituent I decided to release a total of 6 million shillings to support full delivery package for every woman giving birth”.

Dr. Rashid urged his fellow members of Parliament to do the same in their area as a means of reducing child mortality.

Hon. Mwanne Nchemba (MP)

Hon. Nchemba in her contribution said Tanzania is leading with unsafe deliveries because we do not have a proper plan of educating the communities on the norms and practices as they contribute to not using family palming methods. Hon. Nchemba said it is time to educate the community that norms and harmful practices are not good for the human development. She also insisted that it is also time to start teaching on reproductive health lessons in the primary and secondary schools. She also insisted that it is now time to engage men in the Family Planning process because men are agents of change in this matter.

Hawa Chafu Chakoma (MP)

Hon. Hawa based her discussion on the teenage pregnancies by saying that early pregnancies are mainly caused by raping, early marriages and harmful practices. She said Government in its part last year they passed a law that prohibited the child from being married until she completes school. But, she said this is not enough, the Marriage Act, 1971, is still a problem because it encourages marriage at the age of 14 years. Hon. Hawa Chafu explained the consequences of early marriage as it affects these young girls psychologically because it denies them the right to play and do other childhood activities; it also denies them the opportunity for education as well as lack of body physic to handle marriage and pregnancy complications. As a result of all these young ladies remain at risk of their lives and the expectants too.

In concluding her contribution, Hon. Hawa called upon the Government to hasten the process of amending the Marriage Act, 1971, as a process of ending teenage pregnancies.

General contributions from the MPs

The first MP to contribute was **Hon. Richard Mganga Ndassa**, who in his contribution said the number of maternal and newborn deaths that was mentioned by the previous speakers is unacceptably high. He insisted that men should make it a habit to go to the clinic with their partners to fully realise what the pregnant woman faces and during pregnancy and delivery.

In his contribution **Hon. Constantine John Kanyasu** said there is a need of joining effort with the WRATZ and others because the problem is big; he said the problem is not only money but also implementation in the facilities. In the last two years we had a discipline of using scorecards in the councils and it real helped in strengthening implementation, it seem these days that culture is no longer there. He concluded by saying if we continue insisting on the use of score cards and maintaining discipline at the point of delivery/implementation, some of these deaths will be minimized.

Hon. Shally Josepha Raymond was concerned with the food and nutrition intake of the pregnant/mothers of this era. She said most of the young ladies right from the onset they start eating too little and most of the time they eat non nutritive foods for the sake of maintaining slim fit figures. Hon. Shally said this end up becoming a problem when they carry pregnancy and during delivery, these are the mothers who do not even have time to breastfeed their children with the fear of having untidy tits. In concluding she insisted that education on food and nutrition should be given at a wider scope to all cadre right from school.

During her contribution **Hon. Mariam Msabaha** told participants that if men become responsible in taking care of their families and having safe sex, the problem of street children will be quite reduced. Hon. Mariam said we have two groups of vulnerable women, one being the street children who a getting pregnancy and deliver in horrible situation and the mentally disabled ladies who are sometimes hanging out in the street. She said able men are the ones who are brutally making these vulnerable girls pregnant.

Hon. Msabaha called upon her fellow MPs to make sure that councils get enough funds to reduce the number of street children and mentally retarded women from the streets.

Hon. Martha Moses Mlata during her contribution said that problems are in the rural setting and we should find a way of working with councillors and other leaders in the village.

Hon. Amina Nassoro Makilagi congratulated the PGSM and its chairperson Hon. Mhagama for organizing this seminar to build an understanding of maternal health situation in Tanzania. She asked members of parliament to carry this agenda in our councils because constituent MPS are

also councillors in their councils. She asked MPs to be keen enough to make sure that all the money allocated for the purpose of saving lives during 2016/2017 is used accordingly. She continued by saying that all MPs should push the Government to allocate enough money in the coming national budgets especially for the life saving components, which is CEmONC near the majority of women.

Hon. Angella Mabula when contributing to this seminal, said in order to save the lives of mother and newborn there is a need of educating the community around these women. The community around the women need to be accountable when a pregnant mother is in need. She said things such a transport can be easily mobilised by the community members. She insisted that time for offering education at the facility should be increased so that even inexperienced ones can understand.

Hon. Sophia Hebron Mwakagenda in her contribution said the parliament normally pass budget for the Ministry of health **social development, gender, elderly and children** but the the problem lies with the Ministry of Finance who do not release money in time.

Hon. Mwakagenda said she cannot see the importance of police gender desk because women and children continue to be raped and harassed despite having those desks, she said the desk is more of political rather than protecting the vulnerable. Instead of investing on this why not investing of lifesaving services for women and new-borns during childbirth

She insisted that the maternal and newborn death can end if there is political will, because by having political will money will be available, follow up will be insisted and laws will be enforced and amended.

She said most of the health facilities in the villages are poor in many aspects, they lack even simple things such as cord tie, and electricity is almost not there. She suggested that these international organizations should think of spending money in supporting rural health.

Hon. Zuberi Mohamedi Kuchauka, when contributing to this seminar concentrated to the availability of nurse midwives as one of the major 5 areas that were mentioned as agents for change of maternal and newborn health services. He said he knows the health personnel especially nurse midwives are not enough and so we need to invest on nurse midwives

Hon. Mendard Lutengano Kigola

Hon Kigola started his contribution by congratulating the organizers for such a good seminar. He went ahead to what should be done in orders to reduce number of maternal and newborns by saying that Health Centres should be strategically built so that every pregnant woman can access quality maternal and newborn health services. He said the responsibility of building these facilities lies in the hands of community, leaders and the Government. He also noted that the FP

practices is been taken as having few children as opposed to having a planned family. So he insisted that education on FP should be given a required attention.

Hon. Hawa Subira Mwaifunga

Hon Hawa's contribution said Tabora is one of the leading regions where children give birth to their fellow children and she requested the Minister of Health to provide support in educating communities in Tabora on issues related to maternal and newborn health in particular ending teenage pregnancies.

Hon. Salome Wycliffe Makamba in her contribution said, youth friendly reproductive health education should be given to at least standard six and seven in primary schools and in all levels in secondary schools hold and she called upon the MPs make it a resolution that this education be provided in schools as provided.

During her contribution Hon. Salome was astonished by the fact that the Marriage Act of 1971 was contested in the high court and the ruling was in favour of the complainant, but the Attorney General is against the ruling showing that he wants early marriages to continue. In colcluding her remarks Hon. Salome Makamba requested Hon. MPS to make sure that the Marriage Act is amended accordingly. At the same time she argued hon. MPs to change the way they support community and start supporting live saving services.

Hon. Cecil David Mwambe in his contribution insisted that education with regard to maternal and newborn health should go down to the users who are in the village. But he also advised the Ministry of Health Community development, gender, elderly and children to allocate service providers who can actually handle the work with dignity. He said most of the midwives are young girls and boys whose despite having the required knowledge, still women do not feel comfortable under their care.

Hon. Mgeni Jadi Khadika, in her contribution mentioned one of the major complications of maternal death survivors is fistula, which leaves the survivors with psychological problems caused by stigma. Most men run away or stay far from their wives, relatives too seem to run away from victims of fistula. Hon. Khadika insisted that education showing that fistula has its cure should go down to the rural communities. Above all, this should be prevented by the availability of CEmONC by all women who happen to have complications. Fistula results from lack of caesarean section services

Hon. Hawa Abdulrahiman Ghasia, during her contribution to this seminar said education to the female children up to secondary level is something that will give them authority to handle other challenges in their way. She also added that in the past we had a certain program run by UNICEF for out of school children who were educated on youth friendly reproductive health. She proposed that if UNICEF has closed the program the Ministry of Health Community

development, gender, elderly and children and District Councils should start this program because it was so useful.

Hon. Raisa Abdallah Mussa requested Hon.Minister from health Hon. Ummu Ally Mwalimu (MP) to work on the disciplines of medical staff and especially nurse midwives on their habit of using abusive languages to the expectant women. She said many women prefer home delivery just to avoid abusive languages by the service providers.

The Minister for Health Social development, Gender, Elderly and

Children, Hon. Ummu Ally Mwalimu (MP) during her contribution summed up some of the requests and discussions that were directed to the Ministry of Health community development, gender, elderly and children through the following remarks. She started by congratulating the PGSM and WRATZ for organizing such a good seminar. She also said many fruitful discussions and proposals around maternal and newborn health strengthening were made and the Ministry has taken a note. But the fact remains that maternal and newborn death cannot be tolerable. She said some initiatives have been made in both central and local government. She went on that the Government is building health centres, blood collection satellites in 8 regions and expect to cover all 26 regions by the end of 2017.

Hon. Ummu Mwalimu came up with a challenge to the Councils' Finance Committee of which Hon. MPs are member by asking them, if they have 70 million shillings, what will they do first, would they build a market or theatre? Why build a market and leaving out a theatre, while one can trade even under a tree, she asked. Hon.Ummu said some of the decisions do not need the Minister for Health to intervene, if the maternal and new-borns deaths pains you; you will build theatre, not a market. She said most of the simple equipment such as urine test costs only 9,000/= for 50 persons, but you will find a health centre going without one for ages.



Hon. Ummu insisted by saying, as it was mentioned by Rose Mlay, check the budget for the councils; if there is no enough money set aside for CEmONC, which is lifesaving services do not pass it., that is all.

Hon. Ummu told the seminar that the score card was implemented

during the last regime but almost all district directors/commissioners and regional commissioners are new, the ministry is planning to organize a training that will equip them with the knowledge of monitoring the score card exercise.

She ended her contribution by saying that even at the Ministerial level there are challenges of dealing with donor who have their priorities which are not always priorities of the country and they are not willing to change and adopt the Government priorities.

Closing Remarks by Hon. Jenista Joackim Mhagama

Hon. Jenista is the chairperson of the Parliamentarian Group for Safe Motherhood, who was the key person in the coordination of this seminar. In her closing remarks, she said MPs are very crucial especially the constituent (those elected by people) MPs who sit in the Planning and finance committee of their respective councils. Effort should be made to make MPs from the special seat to be member of this committee as well.

Hon. Mhagama promised that PGSM will continue working on all that have been discussed in this seminar and beyond. She ended her remarks by congratulating all men who participated in this seminar and requested them to become good ambassadors for the rest of the men in the country.

Resolution by MPs on what should be done

Before closing the workshop, the chairperson of the seminar Hon. Serukamba asked the participants to make commitment on the issues that were brought on the table and discussed. These are the requirements that would complete quality lifesaving (CEmONC) services at strategically selected health centres and hospitals so no woman dies needlessly because of the lack of any of the requirements. Hon. MPs agreed to commit to follow-up and ensure the availability of:

- A functioning theatre with all equipment that are in good condition
- Maternity wards for women before and after delivery
- Labour ward
- Oxygen Concentrator and machine to resuscitate a new-



born with asphyxia

- Competent health care staff (MOs, AMOs, COs, Midwives, Anaesthetists, Laboratory technicians
- Safe blood transfusion
- Clean toilets in good condition at the labor-wards
- Functioning Laboratories
- Reliable electricity
- Safe tap water
- Autoclave
- Reliable Referral system
- Laundry services
- Standby generator in case of electricity failure
- Incinerator
- Vacuum extractor
- Vacuum aspirator
- Long gloves
- Oxytocin injection
- Magnesium sulphate
- Antibiotics
- Ambu bag
- Oxygen

All MPs agreed by vowing **YES** to every item as it was mentioned by the chairman.

Closing Remarks by the Chair-person of the Seminar

The closing remarks were given by the Chairman of the Seminar Hon. Peter Joseph Serukamba. In his remarks he congratulated everyone for effective participation in this important seminar. He reminded the parliamentarians to ponder the **metaphor** given by Rose Mlay that if our 3 Air

Tanzania planes were crashing everyday killing all passengers, a serious action should have been taken urgently. We do not see the 210 (30 women and 180 new-borns) lives lost every-day, but it is true. Let's bring this to an end, by ensuring CEmONC is adequately funded. He also reminded the participants to see the issue of free education from primary to secondary school as a health issue, since this will keep more children in school.

ANNEX-1: LIST OF PARTICIPANTS

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ANNEX-2: LIST OF PERSONS PRESENTED/CONTRIBUTED IN THIS SEMINAR

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1. The meeting was chaired by Hon. Serukamba (MP)
2. Ms. Rose Mlay (Highlight on the Safe Motherhood situation in Tanzania and what should be done)
3. Hon. Najma Murtaza Giga (MP) (Representing the Hon. Speaker)
4. Dr. Asia Hussein(representative from UNICEF)
5. Dr. Ahmed Makuwani, representative from Ministry of Health, Community Development, Gender, Elderly and Children

MPs Contributed in this seminar

1. Hon. Dr. Faustine Ndungulile (MP) (CEmONC and Budget)
2. Hon. Dr. Jasmine Tisekwa Bunga (MP) (food and Nutrition)
3. Dr. Rashid Chuachua (Under five years mortality)
4. Hon. Mwanne Nchemba (MP)(Family Planning)
5. Hawa Mchafu Chakoma (MP) (Teenager pregnancies)
6. Hon. Richard Mganga Ndassa
7. Hon. Amina Nassoro Makilagi
8. Hon. Salome Wycliffe Makamba
9. Hon. Hawa Abdulrahiman Ghasia
10. Hon. Mgeni Jadi Khadika
11. Hon. Mariam Msabaha
12. Hon. Sophia Hebron Mwakagenda
13. Hon. Cecil David Mwambe
14. Hon. Raisa Abdallah Mussa
15. Hon. Mendard Lutengano Kigola
16. Hon. Zuberi Mohamedi Kuchauka
17. Hon. Martha Moses Mlata
18. Hon. Constantine John Kanyasu
19. Hon. Shally Josepha Raymond
20. Hon. Angella Mabula
21. Hon. Jenista Joackim Mhagama
22. Hon. Ummy Ally Mwalimu

**ANNEX-3: THE PROGRAM FOR THE SEMINAR OF MEMBERS OF
PARLIAMENT AND WRA FOR SAFE MOTHERHOOD TANZANIA, IN DODOMA ON
7TH FEBRUARY 2017**

S/N	TIME	ACTIVITY	RESPONSIBLE
1	01.00-02.00	Lunch	All
2	02.00-02.20	registration	All
3	02.20-02.25	Brief speech from WRATZ	National Coordinator
4	02.25-02.30	Brief speech from the Chairperson of the PGSM	Hon. Jenista Mhagama
5	02.30-02.40	Opening Remarks	Hon. Speaker
6	02.40-02.45	Brief speech from UNICEF	UNICEF Representative
7	02.45-04.35	Discussion on what should be done to make sure that women and newborn are getting basic and comprehensive Emergency Obstetric Neonatal Care (BEmONC and CEmONC)	All
8	4.35-05.15	Commitment from the MPs	all
9	11.15-11.25	Closing of the Seminar	Chairperson of the PGSM

**ANNEX-4: A BRIEF SPEECH BY THE WRATZ FOR SAFE
MOTHERHOOD NATIONAL COORDINATOR IN THE SEMINAR
THAT BROUGHT TOGETHER ALL PARLIAMENTARIANS,
ON 7TH FEBRUARY 2017 IN DODOMA**

Hon Speaker of the Parliament of Tanzania

Hon. Chairperson of the Parliamentary Group for Safe motherhood

Hon. Chairman of the Social Services and Community Development Committee and the
Chairman of this seminar

Hon. Ministers

Hon. Deputy Ministers

Resident Representative UNICEF Tanzania

Hon. Chairpersons and deputy chair persons of the Standing Committees.

Hon. Members of Parliament

The media team present,

Ladies and gentlemen

First and foremost, I would like to thank the Almighty God for giving all of us enough health and time to participate in this seminar today. Also I would like to thank you, the Hon. Speaker for allowing this seminar for Safe Motherhood Tanzania to be conducted here by involving all Parliamentarians as well as assenting to be the Guest of Honour. I extend my gratitude to all Parliamentarians for accepting the invitation to participate, without forgetting all directors, chairpersons and parliament officials for devoting their valuable time in preparing this seminar.

I would also like to extend my gratitude to UNICEF Tanzania and the White Ribbon Alliance Global for financing this seminar.

Hon. Guest of Honour

Today we are here to discuss and share about the situation of our responsibility to the maternal, newborn, under five years, and adolescent's health. Our Government has done and still making

effort in making sure that women and newborns survive during birth, though the situation is still not satisfactory.

There is a Problem

- Based on the grand survey on the health situation in Tanzania that is conducted in every 5 years (Tanzania Demographic and Health Survey (TDHS) 2010 and 2015/16), the number of maternal death has increased from 8500(2010) to 11000(2015/16) per year.
- To every single maternal death, there are 6 newborn deaths, making a total of 66,000 newborn deaths per year.
- In this case therefore, a total of 77,000 Tanzanians die in every year due to complications during birth; meaning that in every single day about 211 persons die mainly during birth. **Taking example of our national carrier vessel bombardier with carrying capacity of 70 passengers, the daily maternal death of about 211 is equivalent to having 3 bombardiers crashing everyday in the country and killing all passengers on board.** HON. MEMBERS OF PARLIAMENT, THIS CANNOT BE TOLERABLE.
- To every single maternal death, 30 others are subject to complications such as fistula. In this case therefore, a total of 33000 women survive with detrimental effects of pregnancy related complications in every year.
- These women who die or survive with detrimental effects of pregnancy are between 15-49 years of age which to a large extent is a required workforce for the National development.

Hon. MPs, up to this juncture, you must have seen the reasons why we requested a talk with you.

The direct causes of all these deaths are known and its cure is available. It should be noted that almost 15% of pregnant women are faced with complications that are likely to lead into deaths. This number is quite hefty. It should also be noted that these problems are not predictable, they can occur to any woman even if she attends all routine clinic, eats well, educated, urban/rural resident, affluent/poor etc. It should also be noted that we cannot prevent a problem not to occur completely but it can be prevented or treated if directed early by the skilled birth attendant by receiving Basic or Comprehensive Emergency Obstetric and Newborn Care (BEmONC or CEmONC) services.

Let us look into problems one after the other, its cure and the requirements

No.	Problem	Cure within 2-12 hours	Requirements beyond qualified and competent health workers
1	Excessive bleeding after birth	Safe blood transfusion and caesarean section/laparotomy for removal of placenta, sometimes the uterus within 2 hours	Laboratory, refrigerator for safe blood storage, enough safe blood, theatre with all facilities, rest room, oxytocin injection, clinical gloves
2	Obstructive prolonged labour, whereby it becomes impossible for the child to get of the womb.	Operation to remove the child, safe blood	theatre with all facilities, rest room, safe blood,
3	Eclampsia	Injectable drugs, and caesarean section	Magnesium sulphate, theatre with all facilities, rest room, safe blood,
4	Infections	Injectable drugs	Antibiotics, safe blood
5	Abortion	To remove retained products	Special machine for cleaning the womb, theatre with all facilities
6	Asphyxia: Failure for a newborn to inhale/exhale immediately after birth	Perform suction of mucous to clear airways and provision of oxygen	Suction machines, oxygen machine concentrator, ambu bag
7	Pre-mature baby	Provide warmth	Kangaroo mother care, incubators
8	Newborn Infections	Injection drugs	antibiotics

Hon. Guest of Honour

The services mentioned above are quite expensive but we cannot compare life with any other thing because we all work for human lives. Women and newborns have the right to enjoy life like any other persons.

Dear members of parliament, if we invest in saving the lives of newborns we will be sure of benefiting from their services for quite a long period, let us say 100 years. This will be a high paying investment in our country.

- In order for the health centre to be able to provide basic and comprehensive emergency obstetric care, it requires about 1 (one) Billion Tanzania Shillings. We have many health centres and hospitals that need to be improved.
- Enough money need to be set out to make sure that health centres and hospital that are close to people and probably away from other fully function hospitals are providing these services.
- Surprisingly, when we were assessing Comprehensive Council Health Plan (CCHP) for the year 2016/2017 some of the councils did not allocate anything relating to BEmONC/CEmONC and few of those who allocated some money, you will see the fund was not directed to bring any impact in this regard.

Our request to the Parliamentarians

- Make sure that the central Government and the district councils set aside enough money to ensure that all shortfalls regarding maternal and newborn services are arrested.
- Let us work together in educating the citizens to ensure pregnant women in labour pains should be taken/seek services from a health facility with qualified staff and capable of providing lifesaving services.
- Members of Parliament in the budget committees should make sure that the CEmONC services are included in every budget plan in the central Government and district Councils as well as making sure that the budget line has adequate fund and is actually going to save the lives of mothers and newborns.
- During the budget debate in the House, budgets without CEmONC service's should not be accepted

- Let us work together in educating women in our meetings that food and nutrition is essential without forgetting their responsibility to seek services from a facility with qualified staff and capable of providing life saving services.

Hon. Members of parliament, I request that you go through the 2017/2018 national budget and make sure a budget line specifically for CEmONC with adequate fund is included not only for the interest of White Ribbon Alliance or Parliamentarians Group for Safe motherhood, but for the sake of Tanzanians who need CEmONC services.

ZERO TOLERANCE FOR MATERNAL AND NEWBORN DEATHS, LET US BE ACCOUNTABLE. THERE SHOULD NOT BE A SINGLE WOMAN LOOSING LIFE FOR MATERNAL PROBLEMS THAT CAN BE AVOIDED.

**ANNEX-5: A BRIEF SPEECH BY HON. SPEAKER OF THE
PARLIAMENT OF TANZANIA IN THE SEMINAR THAT BROUGHT
TOGETHER ALL PARLIAMENTARIANS,
ON 7TH FEBRUARY 2017 IN DODOMA**

Hon. Chairperson of the Parliamentary Group for Safe motherhood

Hon. Ministers

Hon. Deputy Ministers

Hon. Members of Parliament

Hon. Chairpersons and deputy chair persons of the Standing Committees.

Ms. Rose Mlay and National Coordinator for White Ribbon Alliance for Safe Motherhood
Tanzania

The media team present,

Ladies and gentlemen

I would like to start by congratulating the Parliamentarian Group for Safe motherhood together with the White Ribbon Alliance for Safe Motherhood Tanzania for coordinating this seminar. I would also wish to thank you for inviting me as the Guest of Honor.

Hon. Members of Parliament,

The almighty God has given women the role of bringing new being to the world, in this respect we are supposed to express joy as opposed to worrying of maternal and newborn death. If there is any nation where births are not taking place, then, that nation is dead. Therefore, women are supposed to continue giving birth and we need these women to raise families so that they contribute to the national economy. The reported number of maternal and newborn deaths is high enough to call it a national calamity. We need to stop doing business as usual; we should get out of the box and conduct differently in a walk towards saving women and newborns lives.

Hon. Members of Parliament,

As a Tanzanian and a leader I know that the Government has been extending different levels of efforts as regards to maternal and newborn health. For example the 2008 strategy which was named roadmap -One Plan was planned to strengthen the speed of reducing maternal and newborn deaths. There is also one important strategy of 2011 which was named every woman every child This is an international strategy which was ratified by the Government. During the millenniums Development Goals Tanzania was part of the goals in making sure that from 2000 and 2015, maternal deaths are reduced by 75% from 578 to 193 in every 100,000 live births. Also in the ongoing Sustainable Development Goals (SDG 2015-2030) Tanzania we are part, likewise, we have strategy One Plan II (2016/2020) for the same purpose of reducing maternal deaths. During 2000 we had 529 maternal deaths for every 100,000 live births while in the 2010 we had reached 454 deaths per 100,000 live births. During 2015/2016 we reached 556 deaths per 100,000 live births. In this you can see that our commitment to these women has not been attained.

We have tried to include the health sector in the Big Result Now (BRN) strategy. These strategies and guidelines recognize the importance of having in place Basic and Comprehensive Emergency Obstetric and Newborn Care (BEmONC and CEmONC) services in the health centers. The Government in consideration of the situation in the country has decided that 50 percent of all Health Centers and 100 percent of all hospitals in the country will provide Comprehensive Emergency Obstetric Newborn Care (CEmONC) services by 2017.

Hon. Members of Parliament,

It is unfortunately that we could strengthen the hospitals and health centers to reach the goals set, except a few regions including Rukwa region of which based on the White Ribbon Alliance and safe motherhood members campaigns together with political will from the Prime Minister the region was able to make sure that 50% of its health centers are providing Comprehensive Emergency Obstetric and Newborn Care (CEmONC) services by 2015 Rukwa region is a role model and if every region decide to do as Rukwa , Tanzania will attain its goal of making sure that 50% of its HCs are providing CEmONC.

Hon. Members of Parliament

Joint effort between ministries and various organizations is required to reduce maternal deaths because we need good environment such as electricity, tap water, telephone communication, road infrastructure to reach the health facilities to mention a few; in order for women to safely deliver their babies. When these services are missing possibility of losing lives of mothers and newborns are high.

Hon. Members of Parliament

Comprehensive Emergency Obstetric and Newborn Care (CEmONC) services which include caesarian section, safe blood transfusion, injectable drugs, medical equipment, infrastructure and qualified personnel in the area of midwifery is very critical especially when pregnant woman register symptoms of pregnancy complications. There will be no other means of rescuing mother and the newborn lives without all these services above.

Hon. Members of Parliament

I request that we become more serious when we are passing the budget bill, we should be keen enough to see that the Ministry of Health, Local Government and Regional Administration and District Councils have allocated enough funds aimed at saving lives during birth. Let us be accountable to all these deaths. If we were keen enough during budget planning in our district councils, in our standing committee and during debates in the house in the past years; this calamity would not have increased to reach the current 11 thousand maternal deaths per year from 8 thousands in the past years. I was astounded to hear that 48 councils did not set any budget line in the 2016/2017 budget to finance Comprehensive Emergency Obstetric and Newborn Care (CEmONC) services, and for those who had budget line for this was not directly addressing life savings. Hon. Members of Parliament let us be accountable so that we can save lives.

Hon. Members of Parliament

This seminar today is for the purpose of discussing together the possibilities of working together, the strategies that will make us reduce or eliminate maternal and newborn deaths. This problem is ours in the entire nation, and I say one ministry, or White Ribbon Alliance or development partners alone cannot solve the problem.

Hon. Members of Parliament

I request that you members of parliament representing citizens to discuss how we can make sure that we do not have a woman or newborn losing a life during birth for the problem that can be avoided.

After all these, I declare this seminar officially opened.

THANK YOU FOR LISTENING

**ANNEX-6: A BRIEF SPEECH BY THE REPRESENTATIVE
UNICEF TANZANIA IN THE SEMINAR THAT BROUGHT TOGETHER
ALL PARLIAMENTARIANS,
ON 7TH FEBRUARY 2017 IN DODOMA**

Hon Speaker of the Parliament of Tanzania

Hon. Ministers

Hon. Deputy Ministers

Hon. Chairman of the Social Services and Community Development Committee and the
Chairman of this seminar

Hon. Chairperson of the Parliamentary Group for Safe motherhood

Ms. Rose Mlay and National Coordinator for White Ribbon Alliance for Safe Motherhood
Tanzania

Hon. Members of Parliament

Hon. Chairpersons and deputy chair persons of the Standing Committees.

The media team present,

Ladies and gentlemen

I would like to start by wishing you all good afternoon. Second, I would like to join the previous speakers by congratulating the Honourable speaker for providing this rare opportunity for making this seminar take place today. Third, I pass on good wishes to the Parliamentary Group for Safe motherhood together with the White Ribbon Alliance for Safe Motherhood Tanzania for coordinating this seminar. I would also wish to thank all parliamentarians for agreeing to come and participate in this seminar. Truly the attendance is big and in this way we can see how parliamentarians are concerned with the maternal and newborn health. I thank you all on behalf of UNICEF

Hon. Speaker,

Apart from the efforts played by the Government and development partners in the health sector, Tanzania is still faced with major challenge of reducing maternal deaths, that includes deaths during the pregnancy, deaths during birth, deaths that occurs within 42 days after birth and

deaths that occurs to newborns under one months of age. Early pregnancies contribute heavily to the number of deaths that could be avoided. The survey report on maternal and newborn health conditions and malaria indicators, Tanzania (2015/2016) which was recently released together by the National Bureau of Statistics and office of Government Statistician, Zanzibar indicate that more efforts are required in order to attain the national goal of reducing maternal and newborn deaths. Surprisingly, maternal deaths have increased instead of going down. Tanzania has made a big stride in reducing under-five years' deaths to the extent of attaining the millennium development goal even before the time set, this was made possible and we are all happy for this. Nevertheless, still more deaths are happening for children under-five years which could be avoided. These deaths are caused by newborn deaths, malaria, pneumonia, diarrhea and kwashiorkor etc.

The time has come for the Government, law makers, leaders, stakeholders and implementers to wage the war towards reducing maternal and newborn deaths. How to go about reducing these deaths have been stipulated in the National Strategy "One Plan II"

It is important that we all stand and work together in implementing the National Strategy as well as strengthening accountability in matters relating to maternal and newborn health services in all community levels and health facilities.

Hon. Speaker,

I would like to assure you that the UNICEF together with other UN organizations that are working in support of health sector. We are working in collaboration with the United Republic of Tanzania in fighting to reduce maternal and newborn deaths as well as reducing under five years mortality. Likewise we are working towards strengthening the health sector so that it can provide good services to mothers, children and youth.

Last, I would like to call upon honorable members of parliament

First, to make sure that the Government set aside enough money specifically for the health sector. Second to make sure that all the money set aside for the health sector strengthening is released and used for the intended purposes. Third, to push the Ministry of Health to continue providing report of the maternal, newborn, children and youth health situation in Tanzania (RMNCAH Score Card) on quarterly basis.

It is possible to reduce maternal and newborn deaths.

WE ALL HAVE TO BE ACCOUNTABLE

TOGETHER WE CAN

Thank you Very Much

