

## Access to Essential Maternal Health Commodities Key to Improving Quality and Adherence to Maternal Healthcare Regimes: Experience from a MomCare Project in Northern Tanzania

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### ABSTRACT

Access to Essential Maternal Health Commodities Key to Improving Quality and Adherence to Maternal Healthcare Regimes: Experience from a MomCare Project in Northern Tanzania Introduction Access to quality maternal health services is one factor been attributed to the high maternal morbidities and mortalities in Tanzania. Geographical and financial access influence the observed low uptake of antenatal services and health facility delivery. Pregnant women located in rural areas, especially the peripheral suffer most from this impediment. The low availability of medications and supplies, including laboratory reagents, has hampered consistent and full maternal service provision. MomCare project is being implemented in Northern Tanzania and tracks pregnant women's journey to ensure consistent quality services. Methodology In February 2019, PharmAccess established a digital project named MomCare. The project captures women's journeys and incentivizes service delivery. Health facilities are financed to procure essential commodities and rewarded for key achievements they attain in delivering maternal services. Clients are rewarded for achieving key milestones in their pregnancy journey. The project is implemented in 15 facilities in Kilimanjaro and Manyara regions.

**Results:** Up to August 2020, a total of 6,179 pregnant women have been enrolled. Sixteen percent (16%) started ANC at less than 12 weeks of pregnancy which is a greater percentage than 13% at the start of the project. Compliance with the guideline has occurred; as of August 2020, 93% of women received full profile ANC test at first visit against 45% in the beginning. Women making 4 ANC visits have increased from 17% to 40%. Moreover, delivery at the facility improved to 67% compared to 52% at the start of the project, and 25% attended PNC within 3 -7 days after delivery. Conclusion The digital platform has enhanced a well-guided care provision. Availability of sufficient supplies motivates the demand side to use the services. Access to data has help health providers to learn and make informed decisions timely and used the top-up funds to improve MNCH related services.

