

Expanding Access to Family Planning in Tanzania Training Health Center Providers in IUD Services

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As in many other countries, providers at health centers in Tanzania have traditionally been equipped and trained to provide pills, condoms, and injectables and have referred clients to higher level facilities for long-acting and permanent methods (LAPMs) like the IUD. But, restricting the provision of the IUD to clients coming in to district hospitals limits the number of women who can get the IUD to those who can reach these facilities. As Dr. Wilfred Mongo, an EngenderHealth Field Service Delivery Officer, noted, “There is demand for family planning, but they can’t access the services, especially long-[acting] and permanent methods. They can access some at the dispensary, but if they want to choose above the short term, they are told to go to the district hospitals—sometimes 100 km or more away—and most of these clients don’t reach these hospitals. So the challenge is how to deliver these services to meet the demand.”

The ACQUIRE Project had been working in 10 focal regions of Tanzania to strengthen the delivery of family planning services, but recently expanded its activities on a national level, covering all 26 regions of Tanzania. One approach of the ACQUIRE Project is to increase access to methods like the IUD by bringing family planning services closer to people, through lower-level providers who have received the appropriate training. In December 2006, ACQUIRE held an IUD clinical workshop for providers from health centers in the Mwanza, Shinyanga, and Tabora regions.



Anna Mwalongo, workshop organizer, leading participants through a clinical session on IUD insertion.

The Shinyanga region has had recent success in raising its contraceptive prevalence rate and in increasing the use of LAPMs. Outreach services conducted by ACQUIRE, where providers from the district hospitals travel to rural areas and provide female sterilization and vasectomy, have been in high demand. The promotion of family planning, sensitization to the benefits of smaller families, and training of service providers from district hospitals seem to have had a positive effect. And ACQUIRE is further expanding access to methods like the IUD, by enabling lower level providers (who are often the only health care providers at health centers) to offer these services.

The two-week workshop in Shinyanga offered the participating providers clinical information and training and a practicum in which they were able to practice IUD counseling, insertion, and removal. After returning to their local health centers, the providers stated, they would now include the IUD in their educational health talks to potential clients. They also noted they were better prepared to advocate for the method. “Now clients can make an informed choice. Before, the main problem was just awareness of the IUD,” said Steria Joliga, Regional Reproductive and Child Health coordinator.



“Counseling is the most important.”
—Hadija Semanda, health center provider, at ACQUIRE IUD training

Photo credit: Nicole Rajani