

# CAM-TAMA Association Strengthening Twinning Project

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## Technical Report

Submitted by:

Canadian Association of Midwives (CAM) &  
Tanzania Registered Midwives Association (TAMA)

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## 1. EXECUTIVE SUMMARY

Midwives provide care to pregnant women, mothers and newborns in some of the world's most difficult conditions, but they often lack the support they need to save lives. A well-trained, and autonomous midwifery workforce supported by a **strong midwifery association** can help to create measurably better health outcomes for women and their babies, supporting the realization of MDGs 4 and 5<sup>1</sup>.

The Tanzanian Registered Midwives Association (TAMA) is the national organization representing midwives and the profession of midwifery in Tanzania. Together, TAMA and the Canadian Association of Midwives (CAM) actively participate in a Twinning Initiative, conceived by the International Confederation of Midwives (ICM) in 2011, which represents a two-way mutually beneficial exchange between our associations. It is envisaged that by strengthening the capacity of our respective organizations to provide improved advocacy, continuing education, and health profession leadership, midwives in Canada and Tanzania will be better supported to access relevant information, and to engage in best practices, resulting in higher quality maternal health services for women in both countries. To support this association strengthening work, CAM and TAMA participate in events, knowledge exchange activities, and ongoing dialogue about global MNCH issues, to the benefit of each association; their members; and the woman and newborns to whom they provide support.

Part of this 'association to association' initiative includes the facilitation of twinning relationships between our member midwives to promote those same aspects of capacity building at a **midwife to midwife** (peer-to-peer) level – to build individual skills, increase feelings of support and camaraderie, and promote opportunities for international research initiatives.

To further this objective, CAM requested funding from IDRC to bring three TAMA Executive and Twinning Steering Committee members from Tanzania to Canada to build awareness of the

<sup>1</sup> Reduce child mortality; Improve maternal health by 2015.

midwifery context in Tanzania; to promote peer-to-peer twinning; and to identify and support other innovative ways of working together through the following carefully planned activities:

1. TAMA presentation of research findings, and collaborative research discussions within targeted university settings; and
2. TAMA and CAM collaborative strategic project planning.

In this final report we are pleased to share very encouraging results. All planned<sup>2</sup> activities have been implemented and have laid the foundation for exciting next steps in the CAM-TAMA Twinning Initiative. Although this project was limited in duration, it has, and will continue to bring about very real and positive changes in the lives of both immediate and ultimate project beneficiaries.

### **Key Project Achievements:**

CAM is extremely grateful to the International Development Research Centre (IDRC) for the generous grant that allowed us to host our sister midwives from Tanzania, in January of this year.

1. During the visit, CAM organized a **presentation** by TAMA President, Sebalda Leshabari PhD, NM, at **Ryerson University** in Toronto, Ontario – one of Canada's seven universities offering direct entry Midwifery Education Programs (MEP). The presentation, *Meeting MDGs 5 & 6: Midwifery Practice from a Tanzanian Perspective* was delivered to a packed audience, made up of students, staff, and faculty from Ryerson's Midwifery Education Program, as well as representatives from the Association of Ontario Midwives (AOM), College of Midwives of Ontario (CMO); and interested non-governmental organizations from across the community.
2. CAM organized a **collaborative research meeting** held at **McMaster University** in Hamilton, Ontario, attended by the TAMA representatives and Canadian midwives who are engaged in research around issues related to maternal newborn and child health. The meeting acted as a platform for the exchange of information about what participants were each doing in the field of midwifery research; and a way to identify areas of mutual interest which might be incubated for future uptake.
3. The TAMA visit also afforded the opportunity to undertake a series of 'TAMA-CAM' initiatives such as drafting a **joint strategic plan** for the Twinning Project; working together to match up our international twinning pairs; and developing tools, and a guiding framework to support the twinning. Further, while in Canada, the TAMA midwives were able to visit a midwifery practice, and a level 3 hospital in Toronto, the Six Nations Birthing Center (maternity care services delivered to an indigenous population in a rural community), and two birthing centers in the Montreal area, as well as the CAM office.

## **2. DEVELOPMENT CONTEXT**

It is estimated that 536,000 women worldwide die of maternal causes, along with 11,000,000 children under five, of which 4.4 million are newborns. The majority of these deaths occur in Sub Saharan Africa. Tanzania is one of the ten countries contributing to 61% and 66% of the global total of maternal and newborn deaths, respectively.<sup>3</sup> The estimated annual number of maternal deaths in Tanzania is 14,000, the direct causes of which can include obstetric hemorrhage, obstructed labor, pregnancy induced hypertension, sepsis and abortion complications. Almost all are preventable with adequate care. That said there is a critical shortage of skilled professionals to provide adequate care - there are some 2,720 midwives (or nurse-midwives) in Tanzania and

<sup>2</sup>The project originally proposed bringing the three TAMA representatives to the 2012 CAM Annual Conference in St. John's, Newfoundland. CAM obtained approval from IDRC to amend these activities to reflect those we have reported on here.

<sup>3</sup> National Roadmap Strategic Plan, 2008-2015

140 obstetricians, representing a combined density of only .2 maternity health providers per 1000 population.<sup>4</sup>

Indirect causes of maternal deaths include Malaria, anemia, and HIV/AIDS. Tanzania's neonatal mortality rate is 34 per 1,000 live births.<sup>5</sup> Up to 50% of these deaths occur in the first 24 hours of life, over 75% arising in the first week after delivery. The estimate for under-five deaths is 157,000 per year,<sup>6</sup> but it is important to note the enormous disparity in under-five mortality rates across different regions of Tanzania. For example, the probability of a child dying before her fifth birthday was 3 to 4 times higher in Mtwara or Lindi than in Kilimanjaro or Arusha<sup>7</sup>. Reaching National targets therefore, requires targeted interventions to reduce infant and child mortality in the worst affected parts of the country.

In summary, maternal and newborn health care in Tanzania faces many challenges including a critical shortage of adequately skilled maternal health service providers; and constraints around uptake of, and access to these health services. Increasing the skills and capacity of practicing midwives and providing advocacy and health profession leadership to support the needs of midwives are two key ways in which professional associations can support improved maternal and newborn health outcomes around the world. Through this project, CAM and its development partner TAMA have increased our mutual capacity to provide critical support to our member midwives, ultimately supporting improved health outcomes for women and newborns in both countries.

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<sup>4</sup> UNFPA, State of the World's Midwifery Report, 2011. Pages 144-145

<sup>5</sup> UNFPA, State of the World's Midwifery Report, 2011, Page 144.

<sup>6</sup> National Roadmap Strategic Plan, 2008-2015

<sup>7</sup> *Children and Vulnerability in Tanzania: A Brief Overview*. Research on Poverty Alleviation (REPOA), 2008

### 3. PROJECT IMPLEMENTATION AND RESULTS

#### 3.1 Activities

Planned Activities	Actual Activities
Twinning Steering Committee Meeting	<b>Delivered.</b> This meeting was an opportunity for TAMA and CAM Steering Committee members to meet face-to-face, promoting increased ownership, team building, and trust, as well as strengthened capacity on both sides to deliver the Twinning project. Strategic and operational work planning were undertaken.
Presentation at CAM's 2012 Conference in Newfoundland & Labrador	<b>Delivered.</b> While the arrival of the TAMA representatives occurred later in the project period than we had planned, Canadian Project Steering Committee members made a presentation for CAM Conference attendees, providing an overview of the project, key highlights, successes, and challenges to date. Post Conference surveys, and feedback in general indicated a strong interest in the project and in international collaboration in general. Shortly after the Conference in fact, CAM and TAMA reached out to our respective memberships to gauge interest in taking part in international 'midwife to midwife' twinning, and we were overwhelmed by the positive feedback and enthusiasm. Twenty-six midwife pairs have now been chosen, but the swell of applications made the decision-making process a difficult one. We have been delighted by this show of interest and support.
Workshop on the proposed peer-to-peer Twinning Project *Amended with IDRC approval.	<b>Amended activities delivered.</b> <ol style="list-style-type: none"> <li>1. Research presentation - TAMA President, Sebalda Leshabari delivered her research presentation, <i>Meeting MDGs 5 &amp; 6: Midwifery Practice from a Tanzanian Perspective</i> at <b>Ryerson University</b> in Toronto, Ontario in January 2013. The presentation engaged Ryerson staff, faculty, students, practicing midwives, and interested NGO representatives.</li> <li>2. Collaborative research meeting – was hosted by the <b>McMaster University</b> Midwifery Education Program, in Hamilton, Ontario in January 2013. Participants included the three TAMA representatives and Canadian midwives from across the region that are engaged in, or interested to participate in research related to maternal newborn and child health, particularly within the context of midwifery. Please see attached meeting minutes, Appendix A.</li> </ol>

	Designed to promote dialogue, and knowledge sharing between midwifery researchers and practitioners in Tanzania and Canada, these events also served to engage practicing midwives and Canadian midwifery students in a conversation about the benefits of cross cultural learning and collaboration. The feedback from participants has been extremely positive, with many asking how they can become increasingly involved in research activities.
Additional activity – Twinning Workshops	<p><b>Delivered.</b></p> <p>The CAM-TAMA Preparatory Twinning Workshop for Canadian Twins has now been successfully delivered. TAMA will be delivering theirs for Tanzanian Twins this month. CAM and TAMA collaborated around the content for the workshops, and agreed the messaging and modes of delivery, to support consistency and streamline the twinning process. Topics such as inter-cultural communication, and the ethics of participation were explored.</p> <p>Follow up will now include systematic communication with the entire Twinning group (participants in Tanzania and Canada) by the Twinning Project Coordinator (currently working on a voluntary basis). She will provide tools and support to Twinning participants, conduct one-to-one and twinning pair interviews to identify expectations, trouble shoot, and act as a liaison between twins and the Project Steering Committee.</p>
<b>Material Products</b>	
Article in the CAM Newsletter	<p><b>Delivered.</b></p> <p>An article was published in the April 2013 CAM newsletter (see attached), reaching approximately 1,200 association members. This was forwarded to TAMA and ICM newsletters for international publication. ICM provided extremely positive feedback about the article and the Twinning Project, and they will in fact be working with TAMA and CAM to publish an additional follow up article for distribution to over 100 autonomous international member midwifery associations. Please see the following link: <a href="http://www.canadianmidwives.org/DATA/DOCUMENT/ACSF_Newslette EN.pdf">http://www.canadianmidwives.org/DATA/DOCUMENT/ACSF_Newslette EN.pdf</a></p>
Article in the Canadian Journal of Midwifery Research & Practice	<p><b>Underway.</b></p> <p>An article is currently being developed for publishing in the CJMRP's fall edition. This article will focus on the outcomes, and untapped areas of research identified during the collaborative research meeting in January 2013, against the backdrop of the larger twinning project.</p>
Video documentation to be posted on CAM & ICM websites	<b>Delivered.</b>

	Extensive footage was gathered during the Research Presentation at Ryerson University, and during the CAM Conference in Newfoundland & Labrador, which has now been edited for posting on the CAM and ICM websites in July, 2013.
On-line exchange forum for twinning participants	<p><b>Underway.</b> Currently, <i>Go-To Meeting</i> format is providing a way for twinning participants to engage in online, real-time communication, allowing them to share perspectives, and offer support.</p> <p>It is hoped that additional funding in the future will support hiring an expert to set up and initially maintain an online forum once the peer-to-peer twinning is in full swing. This will be monitored and maintained in the long-term by the Twinning Project Coordinator.</p>

### 3.2 Immediate Outcomes

Planned	Performance Indicators	Actual
Increased technical skills and cross-cultural understanding on the part of Tanzanian and Canadian midwifery professionals as a result of peer-to-peer learning and knowledge exchange	<ul style="list-style-type: none"> <li>• numbers of midwives reporting professional skills enhancement and increased understanding of midwifery practice within other contexts</li> <li>• percentage increase in number of midwives participating in collaborative initiatives to foster information sharing or research opportunities locally or internationally</li> <li>• number of midwives reporting positive changes within their respective midwifery association in terms of ongoing support, opportunities, etc.</li> <li>• numbers of midwives reporting increased recognition of the value of cross-cultural interconnectedness with other midwifery professionals</li> </ul>	<ol style="list-style-type: none"> <li>1. 100% of Panel Presentation participants at the CAM Conference reported increased cross-cultural understanding, and recognition of the context of midwifery in Tanzania.</li> <li>2. 100% of Research Presentation participants reported a broader understanding of midwifery in other contexts (i.e. Tanzania).</li> <li>3. 26 Canadian and 26 Tanzanian midwives have demonstrated increased commitment to international collaboration and skills sharing by agreeing to participate in the twinning project.</li> <li>4. 52 midwives (Canada &amp; Tanzania) have reported increased cross-cultural understanding, and awareness of productive intercultural communication as a result of attending CAM and TAMA Twinning Project Preparatory Workshops.</li> </ol>
Increased awareness and capacity of participating midwifery professionals to identify knowledge gaps, and to pursue opportunities for collaboration with other stakeholders around information sharing, and research initiatives		<ol style="list-style-type: none"> <li>1. Increased numbers of Canadian midwives, midwifery researchers, and Faculty from Ryerson and McMaster Universities' Midwifery Education Programs have indicated strong interest in collaborating on international research around maternal, newborn, and child health where</li> </ol>

		<p>knowledge gaps were collectively identified - as a result of the Collaborative Research meeting at McMaster University.</p> <p>2. International discussions around two particular pieces of research are already being actively pursued by Canadian and Tanzanian midwives:  a) <b>Prevention of Vertical Transmission of HIV with a focus on infant feeding practices</b>; and b) <b>Group Prenatal Care</b>, as a direct result of the Research Presentation by Sebalda Leshabari at Ryerson, and the Collaborative Research meeting at McMaster.</p>
Increased feelings of support and solidarity on the part of Tanzanian and Canadian midwives as a result of collaboration within and between international Midwifery Associations		<p>1. 100% of Canadian Twinning participants have expressed their happiness and satisfaction with CAM at having been given the opportunity to participate in this international project.</p> <p>2. The commitment shown by the 26 Tanzanian midwives in agreeing to participate in the Twinning Project and the enthusiasm that has been continually expressed demonstrates increased feelings of support and solidarity.</p>
Increased motivation and support on the part of association members for association-to-association and peer-to-peer twinning between international Midwifery Associations		<p>1. 100% of Twinning Participants indicated feelings of increased motivation and support for association-to-association and peer-to-peer twinning between international Midwifery Associations.</p> <p>2. Some 75% of Conference attendees indicated their support for association-to-association and peer-to-peer twinning between international Midwifery Associations. The remaining 25% did not indicate any preference. No attendees indicated a negative response.</p>

### 3.3 Intermediate Outcomes

Planned Outcomes	Indicators	Actual Outcomes
Strengthened capacity of Tanzanian and Canadian Midwifery Associations to support member midwifery professionals and their continuous learning	<ul style="list-style-type: none"> <li>Percentage of midwives reporting improved opportunities for continuous learning</li> <li>Percentage of midwives reporting increased career satisfaction attributable to improved support from their association</li> <li>Midwifery Associations reporting improved confidence in terms of engaging with other stakeholders</li> <li>Numbers of new organizations engaged by respective associations</li> <li>Numbers of new initiatives / collaborations with other associations / organizations embarked upon</li> </ul>	<ol style="list-style-type: none"> <li>100% of Canadian Twinning participants have expressed their happiness and satisfaction with CAM at having been given the opportunity to participate in this opportunity for professional development and continuous learning.</li> <li>McMaster and Ryerson University Faculty members and midwifery researchers have expressed excitement and increased career motivation as a result of the international research opportunities facilitated by CAM.</li> <li>Tanzanian midwifery and MNCH researchers involved in this project have expressed a significant increase in their awareness around opportunities for international collaboration, and their overall career satisfaction.</li> <li>The commitment shown by the 26 Tanzanian midwives in agreeing to participate in the Twinning Project and the enthusiasm that has been continually expressed speaks to these opportunities for continuous learning.</li> </ol>
<p>Strengthened linkages between Midwifery Associations in Tanzania and Canada, as well as between respective government, non-government, and informal primary health care providers</p> <p>Improved capacity of Midwifery Associations in Tanzania and Canada to successfully engage other Midwifery Associations, governments, NGOs, and other key stakeholders for the purpose of knowledge exchange, collaborative research, advocacy, and promotion of best practice</p>		<ol style="list-style-type: none"> <li>TAMA have reported significant improved capacity to engage with the Ministry of Health and Social Welfare (MoHSW), NGOs, and other key stakeholders for the purpose of knowledge exchange, collaborative research, and promotion of best practices. For example, as a result of the CAM-TAMA Twinning work, TAMA now has an established relationship with NGO, VSO Tanzania, and has been invited as a collaborator on the assessment and strengthening of the Nurse-Midwifery curriculum in Tanzania (pending funding).</li> </ol>



		<ol style="list-style-type: none"> <li>2. CAM's capacity to engage with other association, interdisciplinary partners, NGOs, and potential funders has also increased significantly as a direct result of this project.</li> </ol>
<p>Increased opportunities to support the ongoing exchange of knowledge and learning between key stakeholders; and further collaboration on midwifery research and education, thereby improving mutual effectiveness; and efficiency of the best-practice replication process.</p>		<ol style="list-style-type: none"> <li>1. Increased opportunities have been identified to support the ongoing exchange of knowledge between stakeholders, and further collaboration on midwifery research as a direct result of the activities delivered through this project.</li> <li>2. Increased numbers of midwives, midwifery researchers, and Faculty from Ryerson and McMaster Universities' Midwifery Education Programs as well as Muhimbili University (Dar es Salaam) have indicated strong interest in collaborating on international research around maternal, newborn, and child health where knowledge gaps have been identified.</li> <li>3. A minimum of two new pieces of research have been taken up, and a minimum of three others have been incubated for future uptake.</li> <li>4. TAMA and CAM have submitted three major collaborative proposals to new funders.</li> <li>5. TAMA has developed an in-country relationship with one new INGO.</li> <li>6. CAM is moving a new Program Partnership forward with one new Canadian NGO.</li> <li>7. CAM and TAMA have received increased recognition by the International Confederation of Midwives (ICM); and increased visibility among its 100 international, autonomous member associations around the success, learning, and outcomes of the Twinning Project to date.</li> </ol>

### **3. LESSONS LEARNED**

TAMA representatives encountered problems securing their travel visas in time for their autumn trip to Canada, which called for the rescheduling of planned project activities. While they were originally scheduled to attend and present at the Annual CAM Conference in Newfoundland & Labrador in October 2012, the amended activities<sup>8</sup> had them arriving in Toronto, in January 2013. Because of Toronto's proximity to various Canadian universities with Midwifery Education Programs, (Ryerson, McMaster) and because TAMA's research presentations were delivered to Faculty, students, and researchers affiliated with these Programs, CAM feels that the change actually brought about better results (than participation in the conference would have) due to the increased size, and nature of the new audience. Further, the university settings directly facilitated important connections between midwifery educators and researchers, and provided the space for compelling discussion around research needs in common.

That said the learning from this experience is to: 1) allow increased lead time to secure necessary travel documents; and 2) institute improved project management checks and balances to avoid similar mishaps in the future.

### **4. IN CLOSING**

Having completed the preparatory Twinning Start-Up workshops (June 2013), twenty-six international midwife pairs will now begin to establish their unique relationships, identifying areas of need, interest, or concern, such as respective knowledge gaps; ideas for collaboration and /or future research; as well as notable experience for further exploration. The process of engaging our respective members, and subsequently identifying these pairs was facilitated by the activities within this project. Furthermore, new research is now being conducted where knowledge gaps have been collaboratively identified; and awareness around the value of international collaboration and the benefits of shared experience has been strengthened, as a direct result of this knowledge exchange and association strengthening work.

CAM and TAMA are confident that the results of this phase, as supported by IDRC, will be of significant interest to the International Confederation of Midwives (ICM), and its member associations globally; helping to inform the way international midwifery associations work together to support their respective members.

We are extremely grateful to IDRC for providing the funding which facilitated these important outcomes. We are also very grateful for the opportunity to learn from the experience of engaging with IDRC - as far as monitoring our current work, and using those lessons to plan and identify where we can improve our approach to best support improved maternal, newborn, and child health outcomes in the future.

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<sup>8</sup> As confirmed by IDRC, December 11, 2012