

## **TO REDUCE MATERNAL AND NEONATAL MORBIDITY AND MORTALITY BY IMPROVING MOTHER AND CHILD HEALTH CARE IN TANZANIA.**

Maternal mortality rate is referred to the death of a woman while pregnant or within 42 days of termination of pregnancy irrespective of the duration and site of the pregnancy from any cause related to or aggravated by the pregnancy or its management but not from accidental or incidental causes. Perinatal death is referred to the death of a fetus from 28 weeks of gestation to seven completed days of life including still births.

Globally, maternal mortality ratio has declined by 47% from 380 in 1990 to 210 deaths per 100,000 live births in 2018. However, this decline has not been reflected in low-income countries especially in sub-Saharan Africa where majority (over 62%) of the maternal deaths occurs with preventable causes. Previous investigators have reported that there is a difference in mortality ratio between developing and developed countries, with the highest rate in developing countries. In 2019, maternal mortality ratio in developing countries was 239 per 100 000 live births compared with 12 per 100, 000 live births in developed countries.

Causes of maternal deaths are divided into two major groups; namely direct causes which account for greater proportion of all maternal death and indirect causes. Reduction of maternal and child mortality rate is main goals in Tanzania and it's included in Millennium Development Goals of 2025.

Generally, In Tanzania, the major causes of maternal deaths are hemorrhage (34%), Infection (10%), pre-eclampsia (9%) obstructed labor (4%), while hemorrhage accounts for only 13% of maternal deaths in developed countries.

The cause of perinatal deaths can also be directly (infection, asphyxia, prematurity, anemia, birth injuries and malformations) or indirectly (poor maternal health, inappropriate management during labor).



Reproductive Health rights and behavior positive adoption, early indulgence in sexual intercourse that led too early pregnancy, unsafe abortion, religious opposition to modern contraception, Community being less empowered to demand quality RCH Services.

Finally, the objective of this concept is to reduce maternal and Neonatal mortality morbidity by 50%. Ensuring there is an improvement of maternal and child care within Tanzania mainland and health workers on the contents of the MPDSR guideline

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