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**E2A** EVIDENCE TO ACTION  
for Strengthened Reproductive Health

**Pathfinder**  
INTERNATIONAL  
A GLOBAL LEADER IN SEXUAL  
AND REPRODUCTIVE HEALTH



**About the program:**

Evidence to Action (E2A) is an advocacy project that aims to address gaps in current Family Planning (FP) and Maternal New Born and Child Health (MNCH) policy and advocacy efforts in Tanzania through evidence based Interventions, funded by the United States Department for International Development (USAID) and Department for International Development (DFID), Pathfinder through E2A project carried out a Knowledge, Attitude and Practice (KAPs) Survey to a sample of influential Religious leaders in order to get their Knowledge, attitude and Practices in Family planning/MNCH for informed FP/MNCH advocacy interventions as religious followers tend to listen/do what their leaders say.

# DEPLOYING RELIGIOUS LEADERS' SUPPORT TO ADVANCE CONTRACEPTIVE USE IN TANZANIA

## Family Planning in Tanzania

### 1. Background

The role of family planning and reproductive health (FP/RH) is central to Tanzania's national development goals, as it is in many sub-Saharan African countries. The existing population and reproductive health conditions, characterized by high total fertility rate (TFR) at 5.4 births per woman in 2010, which result in a high population growth rate at 2.7 percent per annum in 2012 constitute the key barriers to the success of many of Tanzania's social and economic development goals, including to reduce maternal, infant, and child deaths as well as improving access to key social services like educational attainment, healthcare, environmental protection, employment, food security and reduction of poverty incidence in general. This is because, at that TFR, the population is growing more quickly than the economic capability needed to sufficiently supply the needed services. Therefore this calls for a reinvigoration of efforts to reduce unintended pregnancies and enabling appropriate timing and spacing of pregnancies by scaling up access to contraception, one of the most cost-effective ways to achieve many of the set development goals.

However, the level of availability and access to FP services in Tanzania is not yet reflective of the critical need for scaling up FP services. Today, 25 percent of currently married women have an unmet need for family planning; 16 percent have an unmet need for spacing; and 10 percent have an unmet need for limiting childbearing. Only 25 percent of currently married women use any modern contraceptive method in rural areas, compared to 34 percent in urban areas. In Tanzania, poverty is a particularly rural phenomenon and some attributes of TFR suggest its relationship with poverty incidence. For example, TFR is higher in rural areas at 6.1 children per woman compared to only 3.7 children in urban areas (2010 TDHS). TFR decreases as women are more educated, while women with no education have more than twice as many children as those who have attended at least some secondary school. TFR also decreases with wealth as women who live in the poorest households have more than twice as many children as those living in the richest households (2004/5 TDHS).

One of the main factors slowing down efforts to expand access and use of FP services in Tanzania is the prevailing social cultural attitudes and religious beliefs possessed by community members, including policy makers. To some religious believers, contraception is against their respective teachings and this prevents them from supporting positive actions around FP, including policy actions. This makes it critical to win the support of religious leaders as they are likely to influence the perceptions of their followers, including for health related issues like the use of FP services. There are several documented cases from other countries where the involvement and support of religious leaders facilitated acceptance of FP. Often the support from religious leaders goes hand-in-hand with building capacity to enhance religious leaders knowledge on FP/RH issues.

## 2. Project Interventions

Pathfinder International in Tanzania, through its Evidence to Action (E2A) project, supported by the United States Agency for International Development (USAID) conducted a knowledge, attitude and practice (KAP) survey involving 10 religious leaders on specific FP issues during the month of November, 2013. Participants were religious leaders selected from 8 denominations/faith based organizations, including the Pentecostal Church, Wapo Mission, the Anglican Church of Tanzania, the Tanzania Assemblies of God, the Presbyterian

Church of Tanzania, the Muslim Council of Tanzania (Baraza Kuu la Waislam Tanzania - BAKWATA), the Evangelical Lutheran Church of Tanzania, and the Tanzania Episcopal Council (TEC). The aim of the survey was to generate evidence that could help in developing more effective advocacy interventions involving religious leaders by demonstrating their interest, knowledge, attitude, and practices regarding FP issues as well as leveraging their position as religious leaders and the roles they can play in increasing FP uptake in their respective communities.

The E2A project for strengthened FP and RH services for women and girls, implemented by Pathfinder International and other partners, seeks to reduce the unmet need for FP by scaling-up best practices and compiling evidence for FP use to ensure that women and girls receive quality services. The project conducts research and turns rigorous evidence into programmatic actions that strengthen FP/RH services and help underserved communities around the world, including engaging religious leaders who can be regarded as trusted and reliable sources of FP related information and inspire utilization amongst their community members which can in turn lead to an increase in FP uptake.

In the planning and execution of the survey, the project involved the following local partners: the Tanzania Midwives Association (TAMA), Advocacy Network against AIDS in Tanzania (ANAT), and the Association of Journalists Against AIDS in Tanzania (AJAAT), Human Development Trust (HDT) and Chama Cha Uzazi na Malezi Bora Tanzania (UMATI).

## 3. Key Findings

The results of the survey revealed a number of interesting findings, including the following:

Just like in the general population, a significant proportion of religious leaders support sustained population growth on the grounds that a larger population is an important element for achieving economic growth through provision of human resources and a bigger domestic market for produced goods and services. This view does not take into account the particular demographic dynamics and structure for Tanzania, nor does it consider how this view hinders the realization of economic benefits.

Generally, nearly all religious leaders are aware of FP, they support its use, and know the benefits FP provides to families, communities and the country in general; and they would recommend allocation of public resources to ensure provision of FP services. In fact, the religious leaders themselves indicated a willingness to take part in various forms of campaigns to promote FP in Tanzania.

There is a somewhat strong conservative inclination towards application of natural FP methods over modern methods among the religious leaders.

#### 4. Recommended Policy Actions

In order to benefit from the support of religious leaders in the efforts to advance FP in Tanzania, managers of FP/RH and development advocacy programs, both from the Government and civil society organizations, will need to engage religious leaders in effective ways. A number of practical interventions should be considered, including the following:

- 4.1: Develop Materials and Orient a Select Group(s) of Respected and Influential Religious Leaders:
  - (i) A select group of respected and influential religious leaders should be oriented on:
  - (ii) Population dynamics and social economic development specifically for Tanzania. This should include the Tanzania population structure and its implications, key indicators of Tanzania economic growth measurements, when and how population dynamics and structure can support or hinder economic growth, etc; Family planning methods approved by the Government and available in Tanzania. The focus should be on clarifying the methods and comparing and contrasting modern from traditional methods; as well as explaining why modern methods are recommended over traditional ones; and
  - (iii) Basic strategic communication skills.
- 4.2: Organize Electronic Media Communication Programs that Involve the Oriented Religious Leaders: Without a follow-up communication strategy, positive statements made by the religious leaders who went through the

orientation and support FP would probably be made in limited public settings like from the pulpit inside a few churches or mosques where only those people attending as the congregation benefit. To optimize the voice and weight of religious leaders, supportive statements need to be followed by a rigorous and consistent communication program to spread (by repeating the statements, clarifying issues, drawing in critics, relating the statements to existing policies, practices, and scriptures of respective religions, highlighting the gaps in the actual situation, etc) the messages beyond the churches and mosques. Hopefully, the advancement of these positive messages will lead to a countrywide opinion shift and compel policy makers to act positively.

- 4.3: Organize Other Forms of Advocacy Activities: Additional forms of advocacy could be organized such as meetings involving key policy makers from the Government or Members of Parliament and the oriented religious leaders where the latter can clarify FP issues on respective religious grounds.

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