



Safer Births Bundle of Care (SBBC)

1. Lead Organization(s) and Country/Region

Haydom Lutheran Hospital, Laerdal Global Health, Ministry of Health, Tanzania

2. Problem Statement (100–150 words) – What health or service gap does this address?

Every day, over 700 mothers and 6,800 newborns die from preventable causes related to pregnancy and childbirth, particularly in low-income regions, with Sub-Saharan Africa and South Asia disproportionately affected. Confident and well-trained healthcare workers can make the difference between life and death, but many working in resource-limited countries lack access to quality, hands-on training opportunities and suitable clinical tools. Health facilities can lack a culture of quality improvement and learning for their healthcare workers. Combined, these challenges, lead to repeated mistakes and inadequate care. Safer Births Bundle of Care aims to tackle these issues.

3. Innovation or Practice Description (200–300 words) – What was done, by whom, and how? Geographical scope.

The [Safer Births Bundle of Care](#) is an evidence-based program that has been shown to strengthen healthcare systems and to reduce maternal and newborn deaths in low-resource settings. Developed as a result of more than 10 years of research, it includes innovative training and clinical tools and a focus on continuous quality improvement for scalability and sustainability over time. The program uses low-dose, high-frequency training for individuals and teams. Digital tools capture data for reflective debriefing, shifting the culture from “blame and shame” to continuous quality improvement.

This cost-effective program was initially implemented in 30 hospitals, and is now implemented in over 150 health facilities, across 5 regions in Tanzania. It is now reaching over 280,000+ births annually, with plans for national expansion in 2025.

Leading implementing partners: Haydom Lutheran Hospital, Ministry of Health Tanzania, Laerdal Global Health.

Funding: Over USD 13m from the GFF to support scale up in Tanzania.



A map with the 5 regions highlighted where SBBC is adopted: Geita, Mwanza, Shinyanga, Manyara, Tabora

4. Results and Evidence of Impact (150–250 words) – Include quantitative or qualitative data, outcomes, or evaluation results

A proven lifesaving program

In February 2025, the New England Journal of Medicine published a large stepped-wedge cluster randomized controlled study from across the 5 regions with the highest maternal and newborn mortality in Tanzania.

The study showed a 40% reduction in early newborn deaths and a remarkable 75% reduction in maternal deaths after implementation of the Safer Births Bundle of Care program in 30 hospitals. The data was collected between March 2021 and December 2023, with approximately 300,000 mother-baby pairs recorded during the study period.

↓ 40%
reduction in
early newborn
deaths

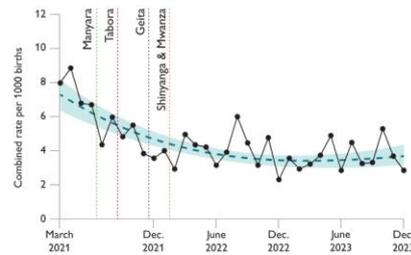


Figure 1 Monthly rates of death per 1000 births in all regions combined (C)
Neonatal death within the first 24 hours after birth.

↓ 75%
reduction
maternal
deaths

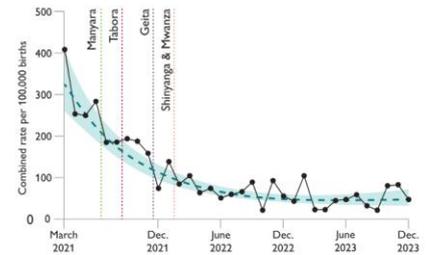


Figure S14 Monthly 7-day maternal death per 100,000 births combined for all regions over the study period.

Colored dotted lines mark start of implementation in the different sites.

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However, evidence is not just statistical. These are real lives saved. [Lives like Tabu's](#).

¹ Kamala, B.A. and Ersdal, H. L. et al. (2025) Outcomes of a Program to Reduce Birth-Related Mortality in Tanzania. Available at: <https://www.nejm.org/doi/full/10.1056/NEJMoa2406295> (Accessed: 27 February 2025)

The perspective of healthcare workers has also been studied, highlighting the value they get from the Safer Births Bundle of Care, deeming it as effective in saving lives and improving healthcare provision.²

"After taking part in this program, we have the knowledge and confidence to act quickly and save lives. I have personally seen mothers and babies survive situations that would have been fatal before, thanks to the training and teamwork we've developed."

- **Ghai Abuya, Midwife, Tabora Regional Hospital, Tanzania.**

5. Scalability & Sustainability (100–150 words) – Is it adaptable for other contexts? What resources or policies support it?

The Safer Births Bundle of Care program is adaptable for resource-limited contexts aiming to reduce maternal and newborn mortality. In January 2025, it [expanded to northeastern Nigeria](#), which has the highest maternal death rate globally. It is also part of a UNICEF-led initiative in Nepal, and Ethiopia plans to incorporate it into their national programs. The program utilizes the globally recognized [Helping Mothers and Babies Survive materials](#) and simulation-based education to strengthen healthcare systems. For successful scalability and sustainability, strong national and local ownership is essential, as demonstrated by Tanzania's Ministry of Health.

6. Lessons Learned and Key Insights for Successful Implementation

- **Local ownership**

Engaging local stakeholders and national government from early planning to ensure ownership is taken throughout implementation – and that commitment sustains beyond implementation.

- **Local well-trained facilitators and champions**

Empowered local facilitators can drive vital in-situ, team simulations. They — along with local champions — can also ensure the positive culture change that allows for continuous quality improvement.

- **Data-driven continuous quality improvement**

Always guided by the local training and clinical data, regular training sessions target skills and knowledge gaps.

- **Ongoing mentorship and supportive supervision**

Strong mentorship focussed on developing skills, uplifting confidence, supporting continuous improvement, role modelling best practices and fostering a peer-learning culture with consistent support.

- **Strong systems for equipment maintenance and reprocessing**

² Mdoe, P., Mduma, E., Rivenes Lafontan, S., Ersdal, H., Massay, C., Daudi, V., Kayera, D., Mwashemela, S., Moshiro, R., & Kamala, B. (2023). Healthcare Workers' Perceptions on the "SaferBirths Bundle of Care": A Qualitative Study. *Healthcare*, 11(11), 1589. <https://doi.org/10.3390/healthcare11111589>

Accessible user information for all who encounter equipment, alongside maintenance schedules and clear processes for reporting equipment issues.

7. Partner Quotes or Community Voice

“Safer Births Bundle of Care in Tanzania shows the transformative advances that can be made to crash maternal and neonatal mortality if such highly cost-effective, and relatively simple innovations are taken to scale.”

- Luc Laviolette, Head of the GFF Secretariat (A division of the World Bank)

“I am proud that Tanzania was the first country to adopt and scale up the Safer Births Bundle of Care – and we are seeing the results. Thousands of lives are being saved, annually.”

- Jenista Mhagama (Mb) Minister of Health, Tanzania

“This program has brought to us what is called low-dose, high-frequency training. This has helped us to adopt skills and the knowledge to help the mother and child. SBBC has brought us to a no blaming culture. Instead, we help each other improve on where we have failed.”

- Semweli Alex, Midwife

Further words from the healthcare workers using the tools adopted as part of the program, can be found here: [Safer Births Project - Haydom, Tanzania - YouTube](#)

A powerful story of a newborn’s life saved, can be seen here: [Veronica's baby - Safer Births](#)

Partners: Safer Births Bundle of Care, Tanzania



United Republic of Tanzania
Ministry of Health



Haydom
Lutheran
Hospital
ELCT Mbulu Diocese



Laerdal
helping save lives



WORLD BANK GROUP



Review the latest [Safer Births Bundle of Care report](#).

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