



Signs of recovery?

Citizens' views on health service provision by the new government

1. Introduction

Tanzanians have been enjoying improving health outcomes in the past few decades. According to the World Health Organization (WHO) life expectancy in Tanzania has increased by 11 years between 2000 and 2012¹. Similarly, deaths due to malaria have dropped by one third, while HIV/AIDS death have halved². Billions of dollars of aid have been channelled to Tanzania to support prevention and treatment.

Challenges remain in the area of service provision. After President Magufuli's unannounced visit to Muhimbili National Hospital in November 2015, the President of the Medical Association of Tanzania, Dr

Bill Haonga, told media about challenges at lower level hospitals, where there is a severe shortage of equipment and supplies³. A 2013 *Sauti za Wananchi* brief found that on average health facilities employed about half the recommended level of staff, that an average of 30% of health facility staff were absent and that a third of patients wait for more than an hour before being seen⁴. A 2013 Sikika report showed that 94% of hospitals surveyed were out of stock of one or more essential medical supplies and 96% were lacking one or more essential medicines⁵. Additionally, a Yale Global Health Leadership Institute case study found that, "the average national fill-rate for [medicine] orders from

- 1 "United Republic of Tanzania: WHO Statistical Profile." *World Health Organization*. WHO and UN Partners, Jan. 2015. Web.
- 2 *ibid*
- 3 Mtulya, Athuman. "Stakeholders Urge Magufuli to Revamp the Health Sector." *The Citizen*. N.p., 12 Nov. 2015. Web.
- 4 *Sauti za Wananchi* Mobile Phone Survey – Round 4, first panel (June 2013)
- 5 *Report on Availability of Essential Medicines, Medical Supplies and Bed Capacity in Hospitals in Tanzania Mainland*. N.p.: Sikika, n.d. Mar. 2013. Web.

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Sauti za Wananchi



primary health facilities is only 60-65%.” This means that 35-40% of medicine orders are not filled⁶. The Sikika report also highlighted limited bed capacity, concluding that a lack of supplies, medicines, and equipment continues to hinder health provision in Tanzania.

What are ordinary citizens’ experiences in accessing health services in Tanzania? Where do they seek professional medical advice. How long do they wait to see a medical professional? Where do they obtain the medicines they require? And what do citizens see as the major challenges in the health sector today? This brief provides insight into the health sector based on citizens’ experiences.

Data for this brief come from Twaweza’s flagship *Sauti za Wananchi* survey. *Sauti za Wananchi* is a nationally-representative, high-frequency mobile phone panel survey. It is representative for Mainland Tanzania. Information on the overall methodology is available at www.twaweza.org/sauti. For this brief, data were collected from 1,836 respondents from the second *Sauti za Wananchi* panel. This was the tenth round of calls to the new panel, conducted between 2 and 17 May 2016.

The key findings are:

- 6 out of 10 citizens visit government health facilities when seeking treatment. This is 14 percentage points higher than in 2015.
- 7 out of 10 citizens wait one hour or less to see a medical professional.
- 7 out of 10 citizens report that they are able to obtain medicines from the health facility they visit, while 3 out of 10 have to visit an outside pharmacy.
- 4 out of 10 citizens who have been in a hospital in the past year state that patients had to share beds.
- 6 out of 10 citizens complain of a lack of medicine or other supplies during their last visit to a government health facility.
- There are substantial improvements in treatment from staff, cleanliness of facilities, and availability of health professionals, compared to citizen reports from May/June 2015.
- The policy of free care for pregnant women, children under 5, and the elderly is being implemented with mixed success.

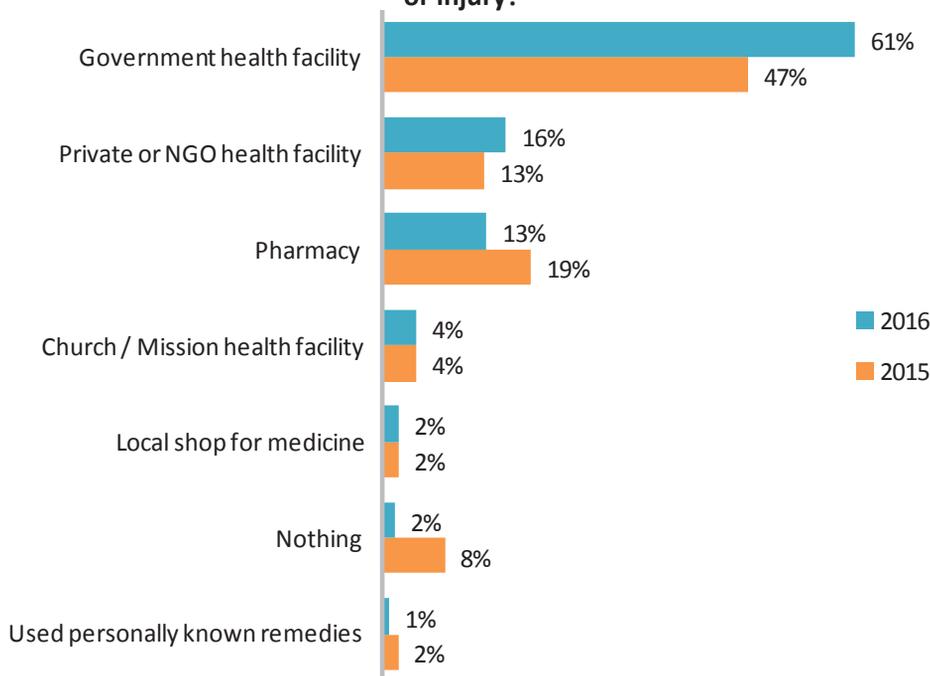
6 “The Medical Stores Department. An Innovative Public Private Partnership: Medical Supply Solutions in Tanzania.” *Yale School of Management*. Yale Global Health Leadership Institute, n.d. Web

2. Six facts about health services in Tanzania

Fact 1: 6 out of 10 citizens visit government health facilities when seeking treatment

The majority of citizens (61%) visit government health facilities when seeking treatment for illness or injury. In comparison, 16% of citizens went to a private or NGO health facility while 13% went to a pharmacy. In Tanzania, 70% of health facilities are owned by the government⁷. This is a shift from 2015, when 47% of citizens reported visiting a government health facility, while 19% reported going to a pharmacy. Citizens who did not visit a health facility reported that their main reasons were cost of treatment (43%) or the illness not being severe enough to need attention (35%)⁸.

Figure 1: What action did you/person in your household take to find relief for the illness or injury?



Source of data: *Sauti za Wananchi* Mobile Phone Survey – Round 10 (August 2016) and *Sauti za Wananchi* Mobile Phone Survey - Round 32 (May/June 2015). Some responses from 2015 not shown.

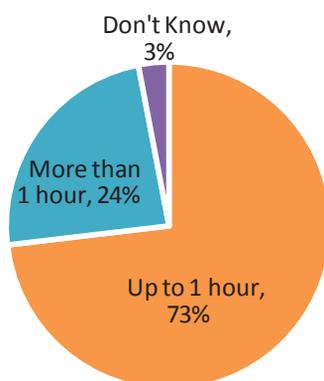
7 The Tanzania Service Provision Assessment Survey, 2014-15 (page 232) <https://dhsprogram.com/pubs/pdf/SPA22/SPA22.pdf>

8 *Sauti za Wananchi* Mobile Phone Survey – Round 10 (July 2016)

Fact 2: 7 out of 10 citizens wait one hour or less to see a medical professional

Most citizens (73%) who went to a health facility (private, government or religious) waited at most one hour before being seen by a professional. Once they were seen, the vast majority (92%) report that health professionals explained both their diagnosis and the medicines being prescribed (81%)⁹.

Figure 2: How long did you/household member have to wait to be attended to?

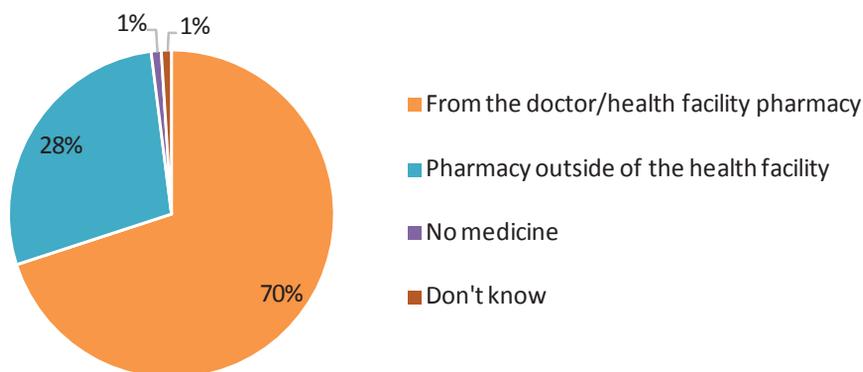


Source of data: *Sauti za Wananchi* Mobile Phone Survey – Round 10 (August 2016)

Fact 3: 7 out of 10 citizens obtained prescribed medicines from the health facility they visited

When they were prescribed medication, 7 out of 10 citizens (70%) report that they were able to obtain at least some of the medicine at the health facility they visited, while 3 out of 10 (28%) had to go to an outside pharmacy.

Figure 3: Where did you/household member get the medicine that was required?



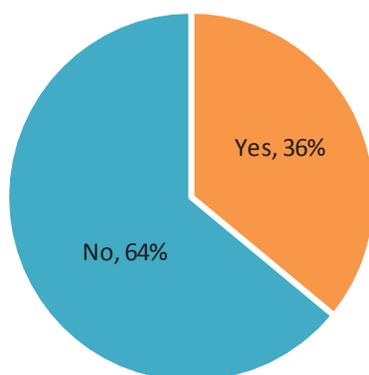
Source of data: *Sauti za Wananchi* Mobile Phone Survey – Round 10 (August 2016)

9 *ibid*

Fact 4: Almost 4 out of 10 citizens who have been to a hospital in the past year witnessed patients having to share beds.

Some 46% of citizens have been admitted or accompanied someone who was admitted to the hospital in the past one year¹⁰. Of those, 3 out of 10 said that there were not enough beds (31%), bed sheets (27%), or mosquito nets (29%) in the ward to which they were assigned¹¹. Similarly, 36% of these citizens witnessed patients having to share beds in hospitals, compared to 30% reporting the same in 2015. In 2016, of those who witnessed bed-sharing, 13% reported that there were three patients per bed.

Figure 4: Did the patients have to share a bed or mattress with another or other patients?



Source of data: *Sauti za Wananchi* Mobile Phone Survey – Round 10 (August 2016)

Fact 5: 6 out of 10 citizens complain about a lack of medicine or other supplies at government health facilities

Some 58% of citizens report visiting a government health facility in the past three months¹². When asked about the problems they encountered during their visit, 59% reported a lack of medicines/supplies, a similar level as in 2015.

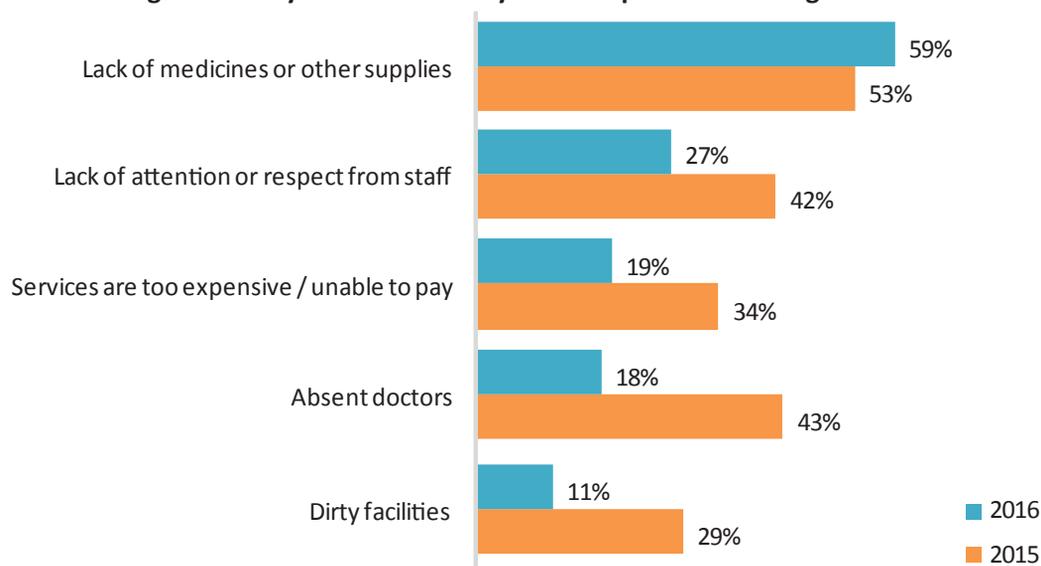
However, reports of almost all other problems decreased significantly. Lack of attention from staff dropped from 42% to 27%. Similarly, reports about absent doctors dropped by 25 percentage points and those about dirty facilities dropped by 18 percentage points.

10 *ibid*

11 *ibid*

12 *ibid*

Figure 5: Did you encounter any of these problems during the visit:

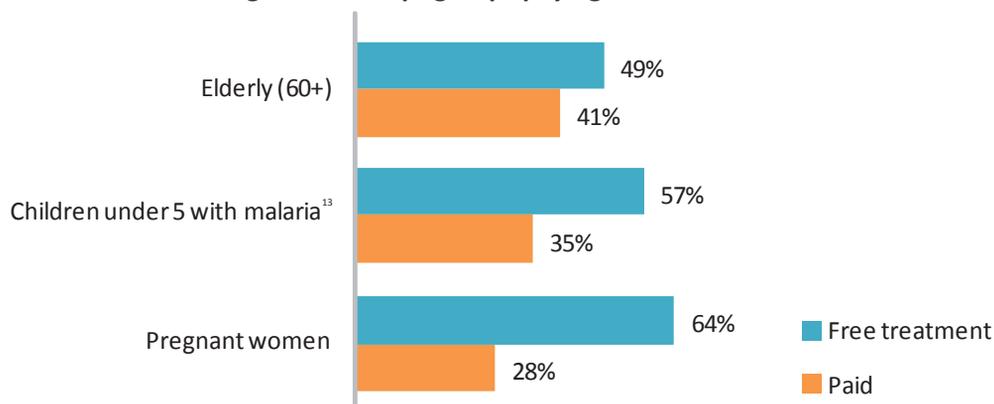


Source of data: *Sauti za Wananchi* Mobile Phone Survey – Round 10 (August 2016) and *Sauti za Wananchi* Mobile Phone Survey - Round 32 (May/June 2015).

Fact 6: 4 out of 10 citizens report knowing of elderly citizens who paid for treatment at government facilities

Tanzanian policy dictates that certain segments of society are exempt from paying for medical services at government health facilities. This includes the elderly (60+), pregnant women, and children under 5. However, when citizens were asked about people in these categories who they know, there was a mixed response. Some 4 out of 10 citizens report knowing of elderly citizens who paid for treatment at government facilities. Similarly, 35% of citizens report knowing of a case when malaria medication for a child under 5 had to be paid for. And 28% report knowing pregnant women who had to pay for their treatment. The responses are all based on the last time the respondent or someone they know went to a government health facility.

Figure 6: Exempt groups paying for treatment



Source of data: *Sauti za Wananchi* Mobile Phone Survey – Round 10 (August 2016)

3. Conclusion

This brief presents powerful new insight into citizens' most recent experiences and opinions on the provision of health services in Tanzania. It is a very positive report. There are improvements in some headline indicators, and citizens report better health worker presence, manner and attention to detail since 2015.

However, complaints about poor facilities, lack of equipment and shortages of medicine remain significant. There is a certain logic to this: strong rhetoric can make health workers perform better in the short term but it is not going to immediately stock the hospital shelves with medicine. The systems for procuring and delivering equipment and medicines are not working as they should: funds are insufficient and there is limited accountability. To reform this dimension of the health service provision requires careful review and understanding of current constraints and a clear strategy to deal with them.

A 2013 Overseas Development Institute (ODI) and Twaweza brief on the causes of medicine stock outs identified a number of critical issues in the health sector overall¹⁴. In particular:

- A strong focus on 'visible' reforms in health such as building health centres rather than more systematic issues like ordering and delivering medicine
- A lack of staff, over-concentration of staff in urban areas and lack of critical skills among staff
- A lack of clear information on medicine stocks and requirements both for citizens and authorities. Forecasting medicine needs, understanding demand and how

¹³ Although the policy provides for free care and treatment for all conditions for children under 5, *Sauti za Wananchi* respondents were only asked about malaria treatment.

¹⁴ What role can citizens play in reducing stock outs, Twaweza, May 2014 <http://www.twaweza.org/uploads/files/CitizensStockOuts-ODI+Twaweza-EN-FINAL.pdf>

orders are filled or not are all critical aspects of the data collection infrastructure required.

- A lack of resources
- A complete lack of an accountability culture; corruption goes unreported and uninvestigated, performance management systems are inadequate and there are skewed incentives in terms of delivering services.

In the long run, these issues will all need to be addressed. Despite the improvements that have been made so far, budgetary considerations will ultimately come into play, particularly in addressing the real shortages of healthcare hardware such as medicines. Twaweza's large scale randomized control trial in education, KiuFunza, has shown similar findings; when increases in resources to schools are combined with motivation for teachers (in the form of financial bonuses), learning outcomes improve. However, the marked improvements in healthcare provision highlighted by these *Sauti za Wananchi* data are commendable steps on the path to a healthier Tanzania.