



CSOs Statement

Joint Annual Health Sector Review Meeting 2012

5th November, 2012 Dar es Salaam

Honourable Ministers, Permanent Secretaries, honourable Members of Parliament, Chief Medical Officer, staff of the Ministry of Health and Social Welfare, PMO-RALG, representatives of the private sector, development partners, ladies and gentleman, good morning. We are grateful for being given the opportunity to be among the opening speakers in this forum for stakeholders of the health sector of Tanzania.

Sikika presents this statement, as a member of Policy Forum, representing other civil society organizations in the health sector. Policy Forum is a member-led CSO network with about 100 members, which ensures that public decision-making affects the needs of ordinary citizens.

Ladies and Gentlemen, when we convened last year on the same occasion, nobody could see the gathering clouds that resulted in a country-wide strike of medical doctors. And when I read through this year's performance profile report, I could not find a sign of it either! It makes me concerned that we might go through the performance report during this review without finding out what went wrong? As every year, we are going to take a look at questions like 'how many patients have been attended during the last year?' and "how did that affect different health outcomes?" These measures of *technical performance* are easy to define, precise and complete.

But, what all these measures ignore is that the management of *interpersonal relationships* is also a vitally important element influencing health workers' performance. Through social exchange, people communicate information that is necessary to diagnose the nature of a problem and to select the most promising remedy. Through social exchange, individuals motivate each other to active collaboration. The successful management of interpersonal relationships is a precondition for good performance, and it requires treating each other with respect and honesty.

Over the years, our health workers have been working under very difficult conditions that constrain their ability to provide the required standard of medical treatment to citizens. When the medical interns were reshuffled in January after claiming their overdue salaries, their bottled-up frustration met the ministry's unwillingness to listen and discuss their grievances. The consequence was a dramatic strike that paralyzed the whole health system and it caused great suffering and deaths. In the course of the strike, the medical interns got fired, civil society leaders who peacefully demonstrated against the stalemate were arrested, and Dr. Stephen Ulimboka barely survived an attempt on his life.

But we are not here today to look back in anger; we want to look into a more optimistic future in which we treat each other better – with more honesty and respect. We want to appreciate each others' efforts and our common challenges and make joint efforts that will hopefully make a difference to the Tanzanian people.

Honourable Ministers, CSOs are witnessing an improving relationship with the government. In co-operation with the Ministry of Health & Social Welfare, Sikika is currently assessing the enrolment of medical students in public and private training institutions. With your permission, we are tracking freshly graduated medical doctors to learn more about the current incentives that influence their distribution. We are also looking forward to hosting a stakeholders' meeting in pharmaceuticals tomorrow at the Golden Tulip Hotel, where we want to understand the sources of persisting challenges in the sector and come up with immediately workable solutions which do not require policy changes.

Ladies and Gentlemen, the health sector has many more structural deficits that require our cooperation. Any person who works in a difficult environment without adequate motivation and external support will eventually quit its job. The unequal distribution of human resources across the country reflects the unmet challenges which our health workers face in rural areas.

For example, more than 2.4 million people lived in Tabora in 2011. If human resources were equally distributed, that would have 110 Medical Attendants instead of 5, 109 Assistant Medical Officers instead of 35 and 743 Nurses and Midwives instead of 234. Thus, it is not surprising that the region had the lowest Outpatient Department Attendance per capita in the country.

Honourable Minister, when the newly recruited health workers are deployed to these underserved regions, CSOs recommend applying a retention strategy that takes into account regional differences. We also need to set appropriate human resource targets to assess whether the selected strategy results in the improved enjoyment of health services by rural people.

Another core obligation that the Government did not meet in the past is to provide essential drugs. The new performance report shows that, on average, 32 of 100 requests for tracer medicines were responded negatively. Concurrently, we observed that the government's budget allocation for essential medicines and medical supplies was about 60% short of the estimated demand of about 200 billion Tanzanian Shilling.

Honourable Minister, CSOs recommend that the budget for essential medicines and medical supplies should be fully financed by domestic resources to ensure maximum funding security; our development partners should refrain from financing recurrent expenditures and only finance capital expenditures that entail manageable recurrent expenditures.

CSOs expressly recognize that the new allocation formula is being applied for all Primary Health Care levels and that effort to ensure the timely and predictable disbursements have been made as stipulated in the Health Sector Strategic Plan.

Honourable Minister, we expect that the same vigour will be demonstrated to clear up the confusion about how fake ARVs entered the supply chain undetected. Peoples' trust in the quality of medicines is of utmost importance as losing their confidence may have unpredictable adverse consequences.

A further negative trend we must observe is the falling share of health expenditures in relation to total government expenditures. From the fiscal year 2006/2007 to 2011/2012, the health sectors share gradually decreased from 11.9% to 8.6%; the Ministry's aim of 15% seems to be getting out of sight.

Because our own government treats the health sector as an orphan, the share of domestic health sector funding has gone down from 68% to 59% during that time. Such deliberate retrogressive financial measures are taken despite the persistent failure to meet core obligations like ensuring equitable distribution of all health services or to provision of adequate essential medicines & supplies.

Honourable Minister, CSOs demand that the government proves its willingness to provide the maximum of its available resources to attain the highest attainable standard of health.

Further, to avoid that international aid which is earmarked for the underfunded health sector is reallocated for other sectors, CSOs recommend implementing financing strategy that demonstrates how internal and external sources are used to finance the health system, and how pooled funding will increase over time.

Ladies and Gentlemen, we are here today to evaluate the improvements in the quality of health care services; but the performance reports that will be presented during the day do not capture the quality of social exchange which affects the motivation of our health workers and also the overall satisfaction of patients. Through Citizen Report Cards, patients can provide feedback that captures not only physical or physiological aspects; they can also

provide information about the quality of *interpersonal interactions*. CSOs recommend considering patients' health service satisfaction as one of the desired outcomes of health care.

Honourable Minister, you have been selected to be the leader of a work force which has shown clear signs of job frustration. Your recent order to pay doctors on-call allowances on time demonstrates your willingness to attend fundamental matters. To foster good relationships with the employees, CSOs recommend that health worker representatives regularly meet with their employer to discuss the existing challenges and joint action plans in an honest and respectful way. Further, we want to remind both sides that it is absolutely imperative to agree on minimum services that have to be provided during a strike as their interruption could endanger life, personal safety or health of the whole population.

Honourable Minister, Policy Forum and the Prime Minister Office Regional Administration and Local Government (PMO-RALG) have just recently signed a Memorandum of Understanding that provides for a conducive environment for Social Accountability Monitoring and Public Expenditure Tracking. CSOs strongly recommend prioritizing Tanzania's Open Government Partnership commitments which should be a policy priority for the next year. We expect your full support when we access budget documents for the health sector. The publication of public documents like CCHPs in Swahili would be a first step towards making information more accessible to all stakeholders.

Ladies and Gentlemen, I will end my speech with a short story about how active citizenship can make a difference. The central zone is known for the lack of running water supply, and the local health facilities have problems to provide clean premises. During our field visits of dispensaries in Kiteto district last month, we witnessed three different ways through which the locals try to address this problem. In the village Songambebe, we learned that the available health workers have to use their own salary for buying water to be able to clean the facility as no funds are provided by the local authority. When we visited the village Sunya, we were explained that citizens were bringing water from their homes to the facility on every Wednesday. Yet, we were mostly impressed by the villagers of Dosidosi, where

the community managed to tax the local market place and used the revenues to supply water to their dispensary.

Honourable Minister, ladies and gentleman, the obstacles that lie ahead concern our whole nation. But so far, citizens and health workers do not feel properly included in health sector decision-making. To overcome these challenges, our health workers and citizens must be given a more active role. We need go to the village communities to explain the existing policies and activity plans and carefully listen to what the health workers and patients have to say – and serve them.

Thank you!