

Citizen priorities in rural Tanzania inform district medical officer's health investments

Community-generated data leads a local official to improve the availability and accessibility of medical supplies through a new medicine fund and supply center.

BACKGROUND

Dr. Miriam Mgwere is the District Medical Officer (DMO) for Kyela District Council, a district in southern Tanzania. Despite significant progress in the health sector, Dr. Miriam faces significant obstacles to healthcare delivery for Kyela's fast-growing population of over 200,000 across 43 health facilities—particularly in the fight against HIV/AIDS, whose prevalence increased by 9% in 2017.¹



Dr. Miriam Mgwere, the District Medical Officer for Kyela District Council, in her office.

PROBLEM

The challenges facing Dr. Miriam are not new to her. But, as she explained in an interview with the Data Zetu team, it isn't always clear exactly which of the many health-related challenges her team should be addressing with their limited resources: *"All along, we've been aware of these challenges facing our district...[but] it has been difficult to ascertain whether we were investing the right health resources."*²

SOLUTION

To help local officials understand community needs, the Data Zetu team, led by Sahara Sparks, conducted a Listening Campaign (LC) in four wards across Kyela. These LCs convened over 500 citizens, local government representatives, community-based organizations, and other community development stakeholders to generate discussion about the priority challenges they face daily.

This information, published openly online as "Community Insights",³ highlighted the most pressing health care delivery challenges facing citizens. Among them was that health facilities are under-stocked with essential medicines. As a result, participants at the LC noted, citizens were losing faith in public health facilities' ability to administer care, resulting in a decrease of health-seeking behaviors like obtaining treatment for HIV/AIDS.

¹ According to the DMO's 2018-2019 district health plan, shared with the Data Zetu team in November 2018.

² Quotes in this story are translated into English by the Data Zetu team.

³ www.bit.ly/dzinsights

These insights gave Dr. Miriam and her council health management team (CHMT) evidence about specifically which health issues to focus on: low medicine availability at health facilities in Kyela.

PROCESS

The Listening Campaign process begins by introducing the intent and purpose to local leaders, including the Ward Executive Officer. Then, Sahara Sparks' Engagement Fellows—local community members who are familiar with a local community (its main streets, hang-out spots, informal leaders, etc) recruit participants to spend a Saturday at the Listening Campaign. The first day of discussions surface hundreds of community-identified challenges (called “pain points”) and begins the process of categorizing and prioritizing them. The second day convenes local leaders and particularly vocal or enthusiastic citizens to dive deeper into those issues, explore root causes, and propose some initial approaches to address them. **Dr. Miriam attended the Listening Campaign in Kyela Ward, where she heard first-hand the community’s frustrations about low medicine availability.**



A medicine storage space in Kyela shows supplies stocked on shelves.

OUTCOMES AND IMPACT

Dr. Miriam’s participation in the Listening Campaign catalyzed a sequence of events that resulted in:

- **New mechanisms and infrastructure to support medicine access:** Immediately after the LC in Kyela, the DMO’s office and CHMT began to develop mechanisms to address the medicine shortage—including a new medicine revolving fund and a new storage facility at Kyela District Hospital, which were both launched in 2018.
- **Better alignment of resources to community needs:** *“Traditionally , public health planning is often driven by central-level policies and resource allocation that trickle their way down the health system... The listening campaign acted as a bottom-up health planning platform which integrated citizens ideas in making the right investment decisions on the available limited resources in Kyela District.”*
- **New trust between officials and citizens:** *“The LC...helped to kick-start better collaboration with a wide array of stakeholders and started to build relationships that the district teams can continue to use moving forward.”*
- **Renewed trust in and use of health facilities:** As people rely on more medicine availability at Kyela Health center, surgical procedures are forecasted to increase 21% in 2018, and the number of ART dropouts decreased from 2,503 in 2017 to 2,167 by June 2018.

KEY COLLABORATORS

Office of the District Medical
Officer, Kyela District Council

