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Advocacy case studies

# IMPROVING HEALTH CARE ACCESS IN TANZANIA

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<b>COUNTRY:</b>	<b>Tanzania</b>
<b>THEMES:</b>	<b>Health</b>
<b>ADVOCACY APPROACHES:</b>	<b>Building relationships; church and community mobilisation; government officials: lobbying</b>

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The village of Nyamalimbe is part of the Geita diocese of the African Inland Church of Tanzania. It is one of the places where the church, supported by Tearfund, has been implementing a programme called Community Health Strengthening Systems (CHSS). The programme is designed to build the capacity of health committees to perform their role overseeing local health facilities. Recently, the health committee members received training on integrating advocacy into their work, from Tearfund partner the Christian Council of Tanzania (CCT).

Before the training, the local dispensary was only open between 8am and 3:30pm because these were the only hours the doctor would work. No health care was available outside these times, even in an emergency. The community were keen to extend the opening hours and their access to health care. The advocacy training equipped and encouraged the health committee to set up a meeting with the doctor to ask why the opening hours were so restricted.

In the meeting, the doctor indicated that he felt his staff's safety would be at risk if he were to open the dispensary any later without a security guard present. He also explained the difficulties in covering both day and night shifts with only two nurses working with him.

Once the committee were aware of these issues, they were able to address them. They asked the community for contributions for the hire of a security guard. They also lobbied their village leaders, the district medical officer and the councillor for their ward about the need for more nurses for the dispensary.

As a result, the dispensary is now open 24 hours a day, and employs two extra nurses to cover these extended opening hours, so the community has access to health care at all times.