



Review of Transport in The Ministry of Health Zanzibar

Project Location: Zanzibar

Project Start Date: 9th April 1992

Project Duration: 2 weeks

Introduction:

In 1992, the government of Zanzibar were concerned that transport difficulties created severe problems for the effective delivery of health care. This led to The Ministry of Health in Zanzibar asking Save the Children Fund (SCF) to provide assistance. Transaid conducted a small study to establish the scale of the problem and how SCF could best contribute to solutions.

Methodology:

Transaid representatives spent two weeks in Zanzibar. They had a preliminary meeting with Dr Omar, the Principle Secretary of the Ministry of Health (MOH), who endorsed their work and approach. He made the arrangements to ensure that Transaid had unrestricted access to all personnel and facilities within the Ministry of Health and other key departments. Transaid then conducted a study to assess the actual situation of transport in all facets of the delivery of health care in Zanzibar.

The Transaid representatives then discussed their findings with Dr Omar before leaving and he was pleased that the recommendations were supportive of some of the key elements in the Ministry of Health's 5-year Plan and should materially assist its implementation.

Outcomes:

The Transaid representatives produced an assessment of the existing situation, an extensive list of recommendations and also a 'timetable for action':-

	Timescale (months)				
	3	6	9	12	15
Lead Role: SCF Support Role: Transaid 1. Recruit transport advisor (TA) 2. Sponsor training for Director of Transport (DT) 3. Sponsor training for Zonal Transport Facilitator (ZTF)	Y		Y	Y	
Lead Role: TRANSAID Support Roles: SCF/DT AND TA 1. Design transport management systems and manual (TMSM) 2. Adapt Transaid Management System Manual (TMSM) for Zanzibar 3. Print TMSM, provide documentation and training	Y	Y		Y	

aids					
Lead Role: Principal Secretary MOH Support Roles: SCF/TA and DT 1. Secure acceptance of recommendations 2. Appoint Director of Transport 3. Approve TMSM and allocate roles and responsibilities 4. Appoint members of Zonal Transport Co-ordinating Committees (ZTCC) 5. Approve the agreed vehicle disposal policy 6. Approve the agreed vehicle maintenance policy 7. Initiate formal reviews of progress	Y	Y	Y	Y	Y
Lead Role: Director of Transport MOH Support Roles: Transport Advisor/ZTF/Vehicle Owners 1. Appoint 2 zonal transport facilitators 2. Consult with MOH/donors on draft TMSM 3. Translate TMSM into Kiswahili 4. Workshop on TMSM for health programme managers and vehicle owners 5. Develop and introduce systems for data collection 6. Develop and implement training for vehicle owners (VOs) 7. Develop and implement training for drivers 8. Compile and maintain a register of vehicles 9. Compile and maintain a register of drivers 10. Develop agreed quantified transport specifications 11. Introduce mandatory vehicle records 12. Introduce mandatory monitoring systems 13. Implement agreed maintenance policies 14. Implement agreed vehicle disposal policy	Y	Y	Y	Y	Y
Lead Role: Director of Preventative Services Support Roles: Director of Transport/Transport Advisor 1. Integrate distribution schedules to PHCUs and centres 2. Implement stage 1 of integrated general supervision of Public Health Community Units (PHSCUs)					Y

Conclusion:

Transaid's findings, and the conclusions they drew, included-

- There was a widespread perception, at every level in the Ministry of Health, that shortage of transport is a serious constraint on the delivery of primary health care.
- Directors were particularly concerned that monitoring and supervision of PHC activities at unit level was severely limited by lack of transport.
- The transport shortages were primarily due to lack of money available to the Ministry of Health to pay for fuel and spare parts. This resulted in around 40% of the MOH fleet being non-operational on any one day. This had been the situation for several years.

- In quantitative terms, primary health care delivery has not suffered because of lack of money. The number of treatments at PHC units and centres has increased from 673,000 in 1985 to 1,189,000 in 1990. There were serious staff and transport shortages throughout this period.
- The primary health care system was largely maintained through specific donor supported vertical health programmes. The elements depending on transport survived primarily because some donors have allocated and controlled funds for the operating costs of the dedicated vehicles they provided. However, lack of coordination resulted in poor utilisation of vehicles.
- Transaid's brief review indicated the problems were not down to lack of vehicles. Transaid believed that many of the vehicles that were not used for very long periods could be sold, to improve cash flow, without any adverse impact on health care.
- Transaid considered that difficulties could be significantly reduced by introducing effective transport management. Transaid defines management as the 'dynamic process which plans, implements, analyses and re-plans, to optimise the costs and assets needed to meet a specified objective- the delivery of health care.'
- Transaid believed that improving availability and reliability of vehicles through a systematic approach would create confidence in the donor community that health programmes would not suffer from eventual integration of the available transport.
- Transaid's recommendations are designed to this end. They should achieve a more cost effective transport activity, geared to meet the essential needs of health care.
- The 5 year plan was a clear indication of the MOH's objective to create momentum to promote change. The policy statement on decentralisation of management and increased coordination of donor support were important elements and their implementation should materially assist the effectiveness of these recommendations.
- The success of this plan depends on firm commitment from MOH with positive support from the donor agencies for changes in practices which currently lead to under utilisation and waste of the existing assets.

Summary of Transaid's Recommendations-

- Appoint a Director of Transport reporting to the Principal Secretary MOH with defined responsibilities
- Design and implement a national standard system of vehicle records and associated management information
- Design a national manual of transport management which sets out clear roles and responsibilities with procedures specified for every level within the MOH
- Approve and implement a defined 'pragmatic approach' for improving transport coordination
- Appoint zonal transport facilitators with defined responsibilities
- Integrate the distribution arrangements for all medical supplies and stores
- Reconsider the essential drugs programme proposal to delegate, to health centres, the responsibility for distribution of drug kits at this stage
- Review the vehicle maintenance control arrangements using the government and private workshop facilities to achieve reliability and cost effectiveness
- Withdraw from Mwanakerekwe workshop

- Review the monitoring and supervision activities of PHCUs to identify options for integration of the available vehicles, to increase the effectiveness and frequency of visits
- Evaluate the basic fleet requirements and implement an agreed vehicle disposal programme.
- Encourage donors to review their transport policies to include controlled funding of the operational costs of the essential vehicles.

Tools Utilised: Review of Transport in The Ministry of Health Zanzibar April 1992- Frank Paterson (TRANSAID UK) and Anthony Echel Thomson (SCF UK)

Partners: Save the Children Fund, The Ministry of Health, Danida

About Transaid:

Transaid is an international UK development charity that aims to reduce poverty and improve livelihoods across Africa and the developing world through creating better transport. Transaid was founded by Save the Children and the Chartered Institute of Logistics and Transport. Our Patron is HRH The Princess Royal. Transaid specializes in the following:

- Building the capacity of public health authorities to provide effective, safe and cost efficient transport management systems to promote equitable access to primary health care services.
- Developing and improving logistics and supply chain systems to enhance the delivery of medicines, equipment and relief services to vulnerable communities.
- Promoting effective partnerships to support and enhance community participation in developing sustainable transport solutions in rural areas.
- Developing and delivering transport and logistics training and qualifications for public and private sector operators.

Transaid has the capacity and reach to lead projects throughout the developing world, but is equally capable of providing niche technical assistance to large scale health systems strengthening projects. Transaid maintains strong relationships with a number of leading international organizations including donor agencies such as DfID, DANIDA and USAID, and implementing organizations such as Health Partners International, Options Consulting, John Snow Inc. and Management Sciences for Health.

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