“... Procurement procedures were rather cumbersome, resulting in delays and insufficient supplies of the commodities, sometimes it took 12 months to procure commodities, which in turn created shortages of the life saving drugs at health facility level...” concluded Mzumbe University in their report to the RCHS, MoH in November, 2011.

Advance Family Planning (AFP) advocacy has impacted the procurement act under review in its attempt to create conducive policy environment to improve access to medical commodities in Tanzania. Hindsight policy and strategic reforms in health to impact on Maternal and Neonatal Mortality, where the Government has developed its second sharpened plan and the three year focused Big Result Now, the legal environment to procure drugs and commodities for Family Planning and BEmONC had not improved and would still derail the ambitions.

To unlock the bottleneck, Health Promotion Tanzania (HDT) analyzed the procurement act in relation to Tanzania’s ambition to impact on maternal and newborn mortality and presented the encounters that the law would make to the program. HDT made recommendations for Special Provision to be made in the act to waive bureaucracy during the procurement of lifesaving drugs which include those for family planning, basic obstetric and neonatal care. These recommendations also addressed findings presented to Government by a study done by Mzumbe University on behalf of RCHS in 2011\(^1\) and were made in the law review meeting on March 21st and 22nd, 2016. According to the study, Tanzania’s Public Procurement Regulations, 2013 and their related law, the Public Procurement Act, 2011 contribute to stock-outs and inadequacies in access to the commodities.

The meeting also proposed the formation of a Medical Experts’ Team to ensure that the special provision is part of Draft Act. Among other things, the review will also address conflicting institutional arrangements such as those between Tanzania Food and Drugs Authority (TFDA) and Tanzania Bureau of Standards (TBS) as well as taxation issues which also contribute to delays in procurement and increased costs on lifesaving commodities.

Enforcement of the act and the amendment thereof will impact on (1) the current maternal mortality Rate which according to the 2012 Population Census report, two women die every hour due to reproductive causes. It will also increase access to Family Planning Services among the Poor women in Tanzania, currently only 19% have access. It will also impact on Neonatal death which stands at 51,000 every year; 32% dying due to infections and 27% complications of preterm birth\(^2\).

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\(^2\) MoH: situation analysis of New Born Health in Tanzania

Health Promotion Tanzania