



Upgrading water supply, sanitation and hygiene in primary health care facilities in Dodoma Region, Tanzania

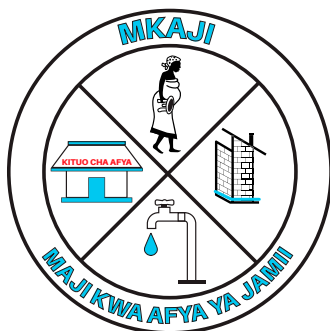
- Maji Kwa Afya ya Jamii (MKAJI)

Health Care Facilities (HCF) in rural Tanzania face many challenges in providing services. A very basic condition for good quality services at dispensaries or health centres is access to water, sanitation and hygiene (WASH), and yet just over 44% of HCFs in Dodoma region have functioning toilets while only 61% have an improved water source. Moreover, findings from a baseline study done in Dodoma region (WaterAid, 2016) illustrates that 31 % of HCF with delivery rooms have no functional handwashing facilities.

Simavi and SDC started to work together in MKAJI (Maji kwa Afya ya Jamii) project in 2014 to improve the quality of public health care services delivery in all districts of Dodoma Region . By upgrading water supply, sanitation and hygiene conditions at existing dispensaries and health centres, MKAJI aims to reduce the potential risk of transmission of communicable diseases and infections during routine patient care and treatment and improved maternity health care.

Infrastructural works for WASH are complemented with capacity building interventions in areas such as operation and maintenance of water and sanitation infrastructure, behavioral change communication to improve hygiene practices at the HCF, and improve governance of WASH; targeting health care facility staff and members of the surrounding rural communities.

Simavi-MKAJI actively contributes to the WASH sector dialogue at district, regional and national level by sharing evidence based information and best practices.



MKAJI

Project duration	2014 - 2019
Implementers	Simavi, leading a consortium of Witteveen + Bos (International Engineering Consultancy) , and CBHCC, UFUNDIKO and PATUTA, three Tanzanian NGOs:
Beneficiaries	Direct beneficiaries: Health facility staff, pregnant women, children, patients, care-givers, children, Long term beneficiaries: surrounding communities
Financial partner	Swiss Agency for Development and Cooperation (SDC)



Storage tank



Bathroom



Drilling a borehole

Key outcomes

- WASH infrastructure rehabilitated or constructed at 54 dispensaries and 4 health centres in the 7 districts of Dodoma Region. Water supply options are either connection to community water schemes, boreholes or rain water harvesting systems. Sanitation infrastructure includes (pour-flush) pit latrines, placenta pit, a bathroom adjacent to the labor room, handwashing basins in all rooms and internal plumbing to a gravel pit for disposal of waste water.
- Dispensary and health center staff as well as village health workers and traditional birth attendants trained on waste management and hygiene behavior for effective infection prevention control.
- Hygiene trainings on handwashing with soap with health care staff, village health workers and traditional birth attendants were used to focus on special hygiene needs for women, such as menstrual hygiene management and by doing so breaking the silence on menstruation matters.
- Water technicians of community water management committees improved their capacity on Operation and Maintenance of the upgraded WASH facilities for long term functionality of the water systems;
- Water committees and health care facility staff improved their capacity for community water scheme management and developed appropriate business models for cost recovering water scheme management.
- Traditional birth attendants now escort pregnant women to the HCF to give birth, reducing the number of home based deliveries.

Find more information at:

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MKAJI project:



Implemented by:



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