

AN ASSESSMENT OF THE IMPLEMENTATION OF EXEMPTIONS AND WAIVER POLICY AMONG PERSONS WITH DISABILITIES: A CASE STUDY OF ILALA MUNICIPALITY, DARES SALAAM TANZANIA

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ABSTRACT

Tanzanian user fee policy in the health sector was introduced in 1993 with the purpose of generating additional revenue for primary health care programmes, which were previously under-funded. To protect the poor and vulnerable groups from user fees, the policy also included exemptions and waivers. The aim of this study was to assess the implementation of exemptions and waiver policy among persons with disabilities (PWDs) in Ilala Municipality. In addition, the study intended to assess the process used in granting exemptions and waiver to persons with disabilities, assess the levels of awareness and perceptions of health workers and PWDs on the implementation of the policy and find out the number and categories of those who have benefited from the policy in the last three years. The study findings revealed that PWDs are aware about the exemptions and waiver policy in spite of the fact that the majority have not benefited from the free health services. Major problems identified in this study include unnecessary bureaucratic procedures in identifying the beneficiaries, poor record keeping, stigmatization and insulting behaviors of health workers and poor quality of services. Furthermore, health workers acknowledged that they are aware of the existence of the policy, however, shortage of medicines and medical supplies and lack of in-service training on the policy appeared to be shortfalls in the implementation of the policy. They further suggested that PWDs should be given identity cards to make it easy in identifying them. Health workers also maintained that there is a great need to work on the exemptions and waiver challenges in order to protect PWDs and enable them to access quality health services. Therefore, in order to strengthen the implementation of exemptions and waiver policy, recommendations are made in respect to the implementation level at health facilities as well as users of public health facilities.

