

Integrating a "Designated District Hospital" into a "District Health System": Reforming Peripheral and Primary Health Care in Tanzania in the 1980s

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This presentation looks at how health interventions in sub-Saharan Africa in the 1980s were designed and implemented. It describes how they were formed by medical research in a development framework and how the historical situation in which they took place came to bear on them. New actors spearheaded developmentalist agendas in established institutions like the Swiss Tropical Institute Field Laboratory (STIFL), a small institute with a research portfolio in tropical diseases, and St. Francis Designated District Hospital (SFDDH), a 350 bed former mission hospital with half a dozen expatriate doctors, both located in Ifakara/Tanzania. These new agendas were based on the idea of community participation which tried to push back what was considered as a colonial system of top-down health provision. It also meant that existing, hospital based health service structures had to be reformed: the designated district-hospital in Ifakara had to be integrated into a district health system.

Yet when these health interventions were put in place, their intentions were often reconfigured by traditions of health care delivery, the expectations of development and the absence of state and little community support. People in Kilombero district had seen a range of extractive and more or less successful social development interventions in the region. Schools and welfare projects were in their majority based on late-colonial missionary structures rooted in personal networks and external funding and transferred into the postcolonial world with relative little changes. Where they did deliver services, these services were mostly of comparably high quality.

When in the 1980s Primary Health Care projects were presented as a new ideal of the relations between community and experts history had already taught these 'communities' to be careful about any interventions in which they were made responsible for 'development' and for the 'sustainability' of social service provision.

Drawing from new archival sources from medical researchers, health service and donor institutions and from interviews with former staff and residents, this presentation shows the history of the enlargement of the scope of the hospital, the development of new specialized units and it sheds new light on the postcolonial concepts and realities of health interventions in rural Africa.