

THE PUBLIC HEALTH ACT OF TANZANIA

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1.0 Introduction

This piece of legislation was enacted by the parliament in 2009, it was the first Act that was enacted in the said year. This Act/legislation was previously cited as The Public Health Act no. 1 of 2009 but since the changes that was made in 3 July 2025, this Act is currently cited as The Public Health Act [Chapter 99 R.E 2023].



2.0 Purpose

The purpose of The Public Health Act [Cap 99 R.E 2023] is to promote, preserve, and maintain public health. It aims to ensure access to comprehensive and functional health services. The Act supports the development of sustainable healthcare systems. It provides a legal framework for effective public health interventions. Ultimately, it seeks to safeguard the well-being of the general public.



3.0 Main parts of the Act

This Act is divided into seven parts, each containing provisions that clearly address various key issues related to public health.



Part i

This is the first part of the Act and considered to be an introductory part and starts from section 1 to 3. This part provides for the application of the Act and interpretation of various terms used in public health, as seen here in under;



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The Public Health Act applies to Mainland Tanzania and may be cited as such.

It defines key terms including “adult” as a person aged 18 or above, and “Authority” as either a district or urban authority. “Authorised officer” refers to designated health or public officers under the Authority or Ministry. A “basement” is defined as any room exceeding one-third below standard floor level, etc



Part ii

This part starts from section 4 to 8 and it is specifically for administration.

Provisions in this part provides duties of the authority, function and notice to cleanse and disinfect premises, as seen here in under;



CONT..



Duties of Minister: The Minister is responsible for overseeing and ensuring the effective implementation of public health laws and policies.



Duties and Functions of Authorities: Health authorities are tasked with enforcing public health regulations, monitoring sanitary conditions, and responding to health hazards in their areas of jurisdiction.



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Authorities to Make By-laws: Local health authorities have the power to create by-laws to address specific health and sanitation needs within their communities, provided they align with national laws.

Functions of Authorised Officer: An authorised officer conducts inspections, enforces health regulations, and may take necessary actions to prevent or control public health risks.



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Notice to Cleanse and Disinfect Premises: Health authorities can issue formal notices requiring property owners or occupants to clean and disinfect their premises to prevent or contain the spread of disease.



Part iii

This part starts from section 9 to 51 and it bases more on notification and control of infectious or communicable and non communicable diseases and control of mosquitoes. This part is categorized into six categories as seen here in under;



Category A

This category is based more on notification of infectious or communicable and non communicable diseases and isolation of infected person. it starts from section 9 to 13 and under this category the Act imposes duty to notify and power to isolate a person as seen here in under;



CONT....

There is a legal duty to notify authorities of notifiable infectious and communicable diseases. Health professionals must report cases to the Chief Medical Officer. Authorities have powers of entry to investigate suspected infections and may isolate infected individuals to prevent the spread.



Category B

This category bases more on prevention and control of infectious and communicable diseases. It starts from section 14 to 18, the aim of this category is to prevent diseases by introducing offences and penalties for those who will fail to fulfill their duties, as clearly seen here in under;



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Section 16 provides as follow: Anyone who knowingly exposes others to a notifiable or infectious disease whether by their presence, through others under their care, by sharing contaminated items, or renting out infected premises commits an offence. Such actions risk public health and safety. Upon conviction, the offender is liable to a fine up to one million shillings, imprisonment up to 12 months, or both.



Category C

This category bases more on vaccination against childhood and other communicable diseases, starts from section 19 to 24.





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The purpose of this category is to establish legal and administrative frameworks that ensure the effective prevention and control of communicable diseases through mandatory immunization programs, particularly targeting children, pregnant women, and other at-risk populations in Mainland Tanzania.





CONT..

Sections in category C outline mandatory immunization for children, pregnant women, and at-risk populations to prevent the spread of communicable diseases. Health authorities are empowered to issue compulsory vaccination orders when necessary.



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Travelers or residents in Mainland Tanzania must show proof of specific vaccinations. Vaccines are provided free, especially for vulnerable groups. Proof of immunization is required for schoolchildren, and emergency vaccination measures may be taken during outbreaks.



Category D

1

This category starts from section 25 to 29 and bases more on the control of epidemic, endemic and pandemic diseases, as seen here in under;

2

Epidemic, endemic, and pandemic diseases vary by scale and spread, from local outbreaks to global threats.

3

Authorised officers must issue control orders like quarantines and movement restrictions during outbreaks.



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They have powers to enter properties, inspect, and enforce disease control measures.

Animal owners must report unusual sickness or deaths to authorities to prevent disease spread.

Regional Medical Officers must promptly report epidemics, coordinate responses, and ensure public safety.



Categories E and F

These two categories start from section 30 to 51 and intend to control mosquitoes and other diseases and also touch port health services. According to the Act controlling mosquitoes, vermin, and other disease vectors is vital for public health. Property owners must eliminate mosquito breeding sites, cover water containers, maintain drainage systems, and destroy larvae. Non-compliance or obstruction is punishable by law.



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Port health services help prevent cross-border disease spread. Port health officers inspect all arriving transport, enforce health regulations, and prohibit pollution and waste dumping. No contact between vessels and shore is allowed before receiving a free pratique certificate. These measures are crucial, especially when Mainland Tanzania is declared an infected area.



Part iv

This part starts from section 52 to 133 and it focuses on Sanitation, Housing, and Hygiene. The purpose of this part is to ensure the protection and promotion of public health by regulating and maintaining proper standards of Sanitation (disposal of waste, cleanliness, etc.) Housing conditions Hygiene practices and it is categorized into 9 categories from A to I.



Categories A,B and C

The sections in these categories primarily focus on environmental health, particularly regarding the management and abatement of nuisances, housing safety, and waste management. Sections 52 to 65 address nuisances, detailing the responsibilities of individuals and authorities in identifying, preventing, and remedying nuisances that pose health or safety hazards.



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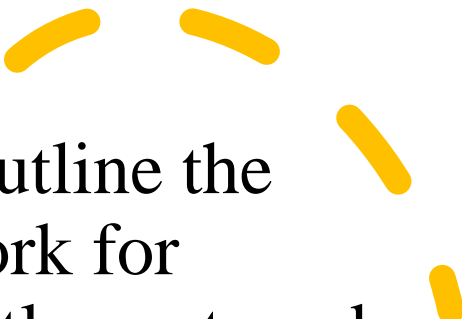
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This includes examining buildings, issuing notices, enforcing compliance, imposing penalties, and, if necessary, closing or demolishing dangerous premises. Overcrowding and failure to follow abatement notices are penalized, and authorities are empowered to take action, including property seizure and demolition, to uphold public health standards.





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Sections 66 to 81 outline the regulatory framework for housing, human settlement, and waste management. They mandate prior approval for new buildings, specify grounds for disapproving building plans, and address issues related to dangerous or dilapidated structures, including penalties for non-compliance.



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Provisions also exist for the clearance of slum areas and the re-housing of residents, along with a process to appeal or modify official notices.



The Minister is empowered to make regulations concerning environmental health. In the area of waste management, the Authority is responsible for providing services, maintaining dumping sites, and managing both solid and liquid waste.



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It must conduct studies, oversee waste collection, and designate transfer stations. The law outlines factors for selecting waste disposal methods and provides guidelines for waste handling, including transportation and disposal of liquid waste.



Categories D,E,F and G

The sections in these categories detail a comprehensive framework for managing various types of waste and sanitation systems to ensure environmental protection and public health. Sections 82 to 84 address gaseous waste management, including emissions from residential, industrial, and vehicular sources.



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These provisions aim to regulate and control air pollution through legal and administrative mechanisms. Sections 85 and 86 focus on the management of excreta waste, particularly outlining the responsibilities of relevant authorities in ensuring its safe collection, treatment, and disposal.



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Sections 87 to 115 concentrate on hazardous and healthcare waste, sewerage, and drainage systems. They establish rules for handling hazardous materials, importing such waste, and assessing their environmental health impact. Provisions also cover the planning, construction, maintenance, and legal responsibilities related to public sewers and drainage systems.



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Specific attention is given to ensuring building compliance, providing adequate sanitation facilities, and empowering authorities to enforce regulations. Overall, this legal framework provides a structured approach to managing waste and sewage in a manner that prioritizes environmental safety and public welfare.





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Sections 126 to 133 set out the rules and responsibilities for managing cemeteries, crematoria, and funeral-related businesses. Local authorities have the power to designate burial sites, must be notified when burial grounds are closed, and can be reimbursed for related expenses.



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The law also regulates the funeral industry by requiring funeral undertakers to be licensed and giving authorities the power to approve the establishment of mortuaries, coffin-selling centres, and funeral homes. It further governs where these facilities can be located, sets standards for how they must operate, and allows authorities to create by-laws to ensure proper management and oversight.



Part V

This part comprises three categories and it starts from section 134 to 149. This part carries a purpose to Provide legal authority to ensure that all food-related activities—from preparation to sale—adhere to hygienic, sanitary, and nutritional standards. Empower regulators and health inspectors to conduct inspections, enforce compliance (e.g., licensing, closures), and intervene when food safety is compromised.



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Address the unique challenges presented by marketplaces—particularly informal or traditional markets—through oversight and ensuring that food sold there is safe and nutritious. Contribute to public health protection by reducing risks associated with food borne illness.



Categories A, B and C

Sections 134 to 149 establish comprehensive regulations for food hygiene, manufacturing, and retail, mandating proper disposal of unfit food, inspection of slaughter facilities, and accurate record-keeping by food producers. They require manufacturer registration, regulate food additives through labelling and import controls, and enforce public health standards.



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The law also controls the establishment of markets, supermarkets, and shops, requiring prior approval to ensure compliance. Enforcement provisions include penalties for non-compliance (Section 146), licensing conditions (Section 147), authority to close non-compliant premises (Section 148), and the power to make by-laws for effective implementation (Section 149).



Part vi

This part comprises four categories and it starts from section 150 to 164. This part ensure that institutions which provide accommodation, personal care, recreational services, and education operate under conditions that uphold public health standards and prevent the spread of disease.



Categories A,B,C and D

These Categories bases more on institutions like hotels, schools guest houses and so on. The sections outline regulatory provisions for a range of public and commercial establishments, including schools, lodgings, salons, swimming pools, and similar facilities, emphasizing the importance of sanitary measures, health inspections, and compliance with public health standards.



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Specifically, Section 164 highlights that health inspections of schools are conducted regularly to ensure proper hygiene, safe water supply, and food safety, all aimed at protecting students and staff. These inspections are vital in preventing disease outbreaks and maintaining a safe learning environment, with authorities empowered to enforce compliance and take corrective action when necessary, especially during public health emergencies or infectious disease outbreaks.



Part vii

This is the last part of the Act and starts from section 165 to 177. This part is titled "Miscellaneous Provisions", serves to provide supporting legal, administrative, and practical mechanisms that ensure the effective enforcement and application of the public health law. This part contains a series of provisions that address legal protections, responsibilities, and oversight regarding public health matters.



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Sections 165 to 177 establish a strong legal framework for public health and workplace safety. They provide legal protection for officials acting in good faith, ensure corporate accountability, and mandate worker health surveillance and safe conditions.



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These sections also extend hygiene oversight to public establishments, enable effective enforcement through regulatory powers, require maternal death reporting, ban misleading health ads and public defecation, and allow updates to laws, ensuring a modern, enforceable public health system.



Thank you

