



The Launch of an International Institute for Primary Health Care in Ethiopia: Revitalizing ‘Health for All’ through the Primary Health Care Approach

By [YibeltalAssefa](#) on February 1, 2016

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As many of you know, Ethiopia is one of the very few countries in sub-Saharan Africa that has made [substantial progress](#) on all 2015 health Millennium Development Goals (MDGs). [Maternal and child health](#) statistics have improved considerably in the past decade, and the country has also made [tremendous strides](#) in the fight against HIV, malaria and TB. More and more, the country is considered as a public health role model in Africa, even if the job isn’t done yet.

The development of Primary Health Care (PHC) programs and systems, including the introduction and full implementation of the [Health Extension Program](#) (HEP), was a key factor in this Ethiopian story of progress and success. The [HEP](#) is an innovative community-based health care delivery system aimed at providing essential health promotion, disease prevention and basic curative health care services in communities. It was designed in 2003 after recognition that existing models of care failed to deliver essential services to communities in rural, remote parts of Ethiopia. The HEP bridged the gap between communities and health facilities by ensuring community ownership and community participation, and drawing upon local technologies, skills and wisdom.



Health Extension Workers in the Health Post

As you might recall, the International Conference on Primary Health Care in Alma-Ata (1978) [defined](#) PHC as: “*Essential health care based on practical, scientifically sound and socially acceptable methods and technology made universally accessible to individuals and families in*

the community through their full participation and at a cost that the community and country can afford to maintain at every stage of their development in the spirit of self-reliance and self-determination.” The Declaration of Alma-Ata called for the achievement of ‘Health for All’ through PHC by the year 2000. The deadline wasn’t met, but the goal remains as important as it was then.

Primary health care remains the foundation of Ethiopia’s health system, in the journey towards “Health for All”, and – post-2015 – [Universal Health Coverage](#) (UHC). Hence, it is important to design a mechanism to sustain the gains made so far and address new challenges. Although the expansion of PHC services in Ethiopia has been quite successful, the [program needs to be adjusted](#) and further improved to address the challenges of the post-2105 era and fine-tune implementation. As was recently [reported](#) in the Lancet Global Health, the country just embarked on an ambitious Health Sector Transformation Plan (HSTP).

In addition, more and more Ministers of Health and other health officials from African countries have been visiting Ethiopia in recent years. They want to learn firsthand how Ethiopia achieved these remarkable health results. During the past three years alone, ministerial-level health officials from more than 20 African countries have come to Ethiopia for this purpose. Many more African countries have shown interest in learning from Ethiopia’s successful community-based PHC program.

Till now, there was no international institute in Ethiopia, or elsewhere, that was closely linked to a successful national program, grounded in exposure to fieldwork, and dedicated to expanding and strengthening of PHC programs at scale throughout Africa and beyond. This will now change. The Federal Ministry of Health of Ethiopia, in collaboration with the Johns Hopkins University Bloomberg School of Public Health, just established an International Institute for Primary Health Care in Addis Ababa. The Institute will be based within the Ethiopian Public Health Institute, here in Addis. The International Institute for PHC will assist other countries in the design and implementation of PHC programs at scale, aiming to accelerate the improvement of the health of populations in sub-Saharan Africa and beyond. The Institute aims to contribute to the revitalization of the global movement of ‘Health for All’ through the PHC approach, and has the following key objectives:

- Provide short-term training courses for designing and strengthening PHC programs (for national and international trainees);
- Provide short-term training courses to support the Health Sector Transformation Plan of Ethiopia;
- Carry out needs-based implementation research on PHC and community-based health programs;
- Serve as a resource center for the Federal Ministry of Health, its Regional Health Bureaus, and other institutions in Ethiopia and beyond;
- Organize fora to communicate research findings, policy changes, and other updates;
- Launch an international Journal of PHC; and,
- Host visits from health officials and PHC services managers from other countries in Africa and beyond.



In my capacity as the Interim Executive Director of the Institute, I am pleased to announce the establishment of the International Institute for Primary Health Care, here in Addis. The Institute was launched this afternoon (February 1, 2016), at a Ministerial Meeting, “Marshalling the Health Workforce: Needed reforms to reach the 90-90-90 targets towards ending the AIDS epidemic”, organized by the African Union, the Federal Ministry of Health of Ethiopia and UNAIDS. 200 Participants from around the world, including 16 Health Ministers, attended the launch. It is my firm belief that the Institute will contribute to accelerating progress towards ‘Universal Health Coverage’ and ‘Health for All’ in Africa and beyond, using Ethiopia’s rich experience and best practices in the implementation of innovative community-based health programs at scale.



The International Institute for Primary Health Care

2 Responses to “The Launch of an International Institute for Primary Health Care in Ethiopia: Revitalizing ‘Health for All’ through the Primary Health Care Approach”



Bart Criel

[February 5, 2016](#)

Dear DrYibeltal and colleagues,
Congratulations with the newly created International Institute for Primary Health Care in Ethiopia. It is good to see that PHC is still very much a priority concern in your country. I hope we can collaborate in one way or the other in the times to come. All the best,
Bart Criel, ITM Antwerp

[Reply](#)



[Ronald Labonte](#)

[February 5, 2016](#)

Dear DrYibeltal and colleagues: I am fascinated with this new development. From 2007 – 2011 I co-led (with Prof David Sanders, UWC) an 21 site, 16 country study on exactly this theme: revitalization of CPHC. We’ve generated several articles on this, and now putting the final touches on a book. Two of our projects were in Ethiopia (Tigray and Jimma), and as an extension of our CPHC work in Jimma, we have initiated a 5 year implementation study based on MNCH scale-up. I would love to touch base with your group, and will be back in Ethiopia sometime in September this years. If you think it useful, we could connect by skype earlier, or I could arrange a short visit in June (I will be in Europe in early June). Yours most sincerely...

[Reply](#)

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