

## International Institute for Primary Health Care in Ethiopia

Federal Ministry of Health (FMOH)

#### **Outline**

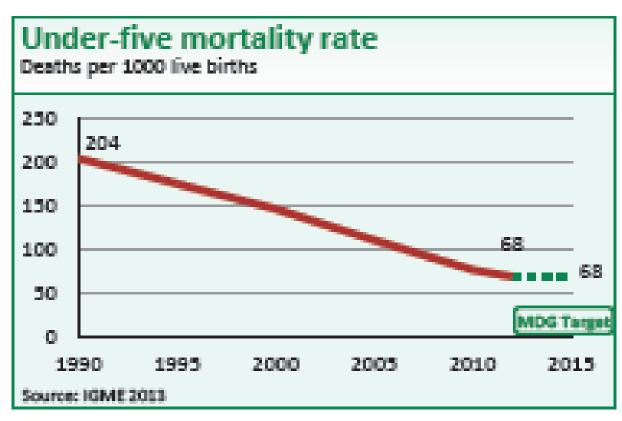
- Background: Millennium Development Goals in Ethiopia
- Primary Health Care
- Health Extension Program
- Health Development Army
- International Institute for Primary Health Care
  - Vision and mission
  - Objectives
  - Overall Approach
  - First-year plan

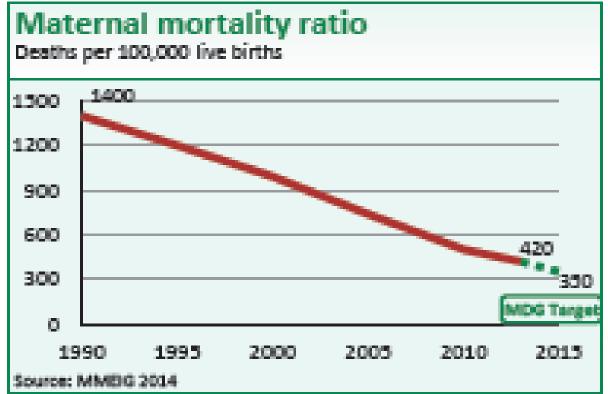
# Background: Millennium Development Goals (MDGs) in Ethiopia

- Africa and other developing regions of the world have been striving to improve the health of their populations
- Ethiopia was one of the few and by far the largest of the sub-Saharan African countries to meet the MDGs for children and their mothers by 2015

 Only 14 of the 44 achieved MDG 4 and 5 of the 44 achieved MDG 5

## Progress in achieving MDGs 4 and 5 in Ethiopia





## Progress in achieving MDG 6 in Ethiopia

- Ethiopia achieved MDG 6 :
  - control of HIV, tuberculosis, malaria, and other important diseases – well ahead of the 2015 deadline

- The prevalence of HIV has declined in the adult population and the incidence has declined by 90%
- Malaria deaths have dropped by 50%

### Primary Health Care in Ethiopia

 Much of this significant progress in Ethiopia can be attributed to the strong community-based services provided by community health workers

 Ethiopia has become a leader throughout the world in accelerating the achievement of 'Health for All' through the primary health care approach

### Health Extension Program

• The Health Extension Program (HEP) is the main strategy for achieving universal coverage of PHC to the Ethiopian population

• HEP is a defined package of basic and essential promotive, preventive and basic curative health services that reachs down to the household level through paid community health care workers (Health Extension Workers) and community health volunteers (the Health Development Army)

#### **HEP....**

• Through the Health Extension Program (HEP), major advances have been made in the expansion and coverage of community-based services

Engaging the community more broadly also has been an important part of the program

# Introduction: The Health Development Army (HDA)

The Health Development Army approach – realizing full community participation

HDA refers to an organized movement of the community through participatory learning and action meetings for health

#### Visits from other countries

- Ethiopia has been hosting ministers of health and other health officials from countries throughout Africa and beyond:
  - Making it possible to learn firsthand how Ethiopia achieved these remarkable results
- During the past three years alone, ministerial-level health officials from more than 20 African countries have come to Ethiopia for this purpose:
  - > This has become very demanding for the FMOH
- The FMOH has also tried to provide ongoing follow-up support for these countries to put what they have learned into practices.



# International Institute for Primary Health Care in Ethiopia (IIfPHC-E)

• There is no international institute that is closely linked to a successful national program and grounded in exposure to fieldwork.

- An investment in the establishment of this Institute will produce major benefits internationally by:
  - Helping other countries design and implement their own primary health care programs at scale

#### **IIfPHC-E**

• IIfPHC-E will contribute to the development of well-structured, proactive, flexible, problem-solving, and resilient PHC systems in Africa:

• By serving as a valuable resource for building capacity on technical, managerial, and programmatic matters

By carrying out PHC systems implementation research

#### **IIfPHC-E: Vision and mission**

• The vision of the Institute is to contribute to the revitalization of the global movement of "Health for All' through primary health care

• The mission of the Institute is to provide training on primary health care and to conduct PHC research

### **Objectives**

 Provide short-term capacity-building trainings on identified needs for national and international trainees related to designing and strengthening PHC and community health programs

 Provide short-term trainings in line with the "transformation agenda" of the Government's Health Sector Transformation Plan (HSTP) and woreda/district transformation

 Carry out need-based health systems implementation research on PHC and community-based health programs;

### **Objectives cont'd**

• Serve as a resource center for the FMOH, its Regional Health Bureaus, and other institutions in Ethiopia and beyond

- Organize forums to communicate research findings, policy changes, and other updates
- Launch and issue an international journal on PHC, and
- Host visits from other countries in Africa and beyond

#### Who will be trained?

| Trainees  | Who are they?            | How many at a time? | How long?   |
|---|--------------------------|---------------------|---|
| Policy makers (lawyers, economic advisors & parliamentarians)       | International & national | 25                  | 3 days<br>(2 days of classes & I<br>day of field visit)     |
| Health programmers<br>(regional, provincial, bureau<br>heads)       | International & national | 25                  | 2 weeks (10 days of classes and 2 days of field visits)     |
| PHC implementers (professionals at woreda and health centre levels) | International & national | 25                  | 6 weeks<br>(5 weeks of classes & I<br>week of field visits) |
| Health officers   | Only national            | 25                  | 2 weeks   |

## What is the purpose of the training?

| Trainees           | Purpose   |
|--------------------|---|
| Policy makers      | Understanding the magnitude of the health problem and developing a political commitment for PHC implementation        |
| Health Programmers | Sharing of Ethiopian best practices on how to implement PHC at the community level                                    |
| PHC implementers   | Sharing of Ethiopian best practices and hands-on-<br>training for PHC implementation and lessons from<br>case studies |
| Health officers    | Strengthening HSTP implementation and leadership capacity   |

### Overall approach

- It is a collaborative endeavor led by the Ministry of Health of Ethiopia and supported technically by the Johns Hopkins Bloomberg School of Public Health
- At the end of the course, a certificate in primary health care will be issued to trainees by the Ministry of Health of Ethiopia and the Johns Hopkins University jointly
- There is a governance board from its key stakeholders
- Initial funding has been provided by the Gates Foundation
- A one year plan has been developed

## First-year plan

| Activities                                       | Status                         |  |
|--|--------------------------------|--|
| Launching  | Done                           |  |
| Providing trainings                              | Preliminary trainings provided |  |
| Recruiting full-time staff                       | Partly done                    |  |
| Developing a five-years strategic plan           | Not yet                        |  |
| Marketing and resource mobilization              | Not yet                        |  |
| Establishing advisory group/governing board      | In process                     |  |
| Establishing a resource center                   | Not yet                        |  |
| Establishing an international journal of PHC     | Not yet                        |  |
| Hosting visits requested by countries            | Started                        |  |
| Preparing for an international conference on PHC | Not yet                        |  |

## Thank you

## "Health for all" through the primary health care!

