



E2A in Ethiopia: Supporting the Integrated Family Health Program

FACT SHEET
April 2015



Photo Credit: Pathfinder International

About E2A

The Evidence to Action for Strengthened Family Planning and Reproductive Health Services for Women and Girls Project (E2A) is USAID's global flagship for strengthening family planning and reproductive health service delivery. The project aims to address the reproductive healthcare needs of girls, women, and underserved communities around the world by increasing support, building evidence, and facilitating the scale-up of best practices that improve family planning services.

Awarded in September 2011, this five-year project is led by Pathfinder International, in partnership with the African Population and Health Research Center, ExpandNet, IntraHealth International, Management Sciences for Health, and PATH.

www.e2aproject.org

About IFHP

www.pathfinder.org/our-work/projects/integrated-family-health-program-ethiopia.html

Background

The Integrated Family Health Program (IFHP), led by Pathfinder International, is USAID Ethiopia's flagship project for delivery of family planning and maternal and child health services. IFHP is financially supported through E2A, and E2A has provided technical assistance to multiple IFHP activities that have helped to strengthen Ethiopia's health systems.

IFHP is implemented in 301 woredas (districts) in Amhara, Oromia, SNNP, Tigray, Benishangul, and Somali regions to support the Government of Ethiopia's ambitious Health Sector Development Program, which has realized some remarkable results: between 2005 and 2011, the contraceptive prevalence rate doubled while the number of deaths among children younger than 5 fell by 28 percent. The public health system, through IFHP and beyond, is still working hard to realize comparable results in terms of curbing maternal and neonatal deaths.¹

IFHP, now in its seventh year after receiving a one-year extension from USAID Ethiopia, has had many successes, including 11 million new family planning users recorded at services supported by IFHP and 2.8 million visits to youth-friendly sites. E2A's assistance continues to help IFHP ensure the sustainability of its contributions and map a way forward for the Government of Ethiopia to achieve its national reproductive health and family planning goals.

E2A Assessments

Sustainability of Health Management Approaches

E2A conducted an assessment of the sustainability of four approaches to health management that have been supported by IFHP: Woreda Based Planning, Integrated Supportive Supervision, Use of HMIS Data for Decision Making, and Performance Review Meetings held at the woreda and kebele

Ethiopia Health Indicators

Population: **80 million**

Youth: **44% under age 15**

Total Fertility Rate: **4.8**

Contraceptive prevalence rate, married women: **27%**

Source: Population Reference Bureau, 2014 World Population Data Sheet (Washington, DC: PRB, 2014).

(ward) levels. The study report assesses the potential of Woreda Health Offices to sustain these approaches after IFHP comes to an end and to discern the conditions under which the management approaches could be sustained. Since IFHP support for the approaches had not ended at the time of the assessment, however, the data collected relate more to the *potential to sustain*, rather than actual sustainability of the standards.

E2A's findings include:

- Some level of capacity has been built to implement the different management approaches.
- IFHP support to Woreda Health Offices varied by management approach and type of support.
- The financial contribution of Woreda Health Offices increased over time, demonstrating their increased commitment to implementing the management approaches.
- Woreda Health Offices' perception of their ability to sustain the management approaches at current scale varied by approach.

From its findings, E2A has made several recommendations to the Government of Ethiopia, including developing criteria for determining readiness of Woreda Health Offices to graduate from direct financial assistance and technical support, engaging

¹Ethiopia Demographic and Health Survey 2011 (Addis Ababa, Ethiopia and Calverton, Maryland, USA: Central Statistical Agency and ICF International).



EXPANDNET



Ethiopian Evangelical Church Mekane Yesus Development and Social Services Commission (EECMY-DASSC)

E2A provides a grant and technical assistance to EECMY-DASSC—one of three E2A grants to members of the Africa Christian Health Associations Platform. The grant supports EECMY-DASSC to work in five woredas of East Wollega Zone in Oromia, the largest state. Through the grant, EECMY-DASSC aims to improve access to family planning and reproductive health services through: robust health education campaigns that involve different cadres of community workers, Health Extension Workers (HEWs), and community and religious leaders; community-based distribution of short-acting methods, provision of injectables by HEWs, and referrals to facilities for long-acting methods; and engaging religious leaders to support family planning. EECMY-DASSC has also been working to improve service delivery in government health facilities, including clinical trainings for providers on intrauterine device insertions and implants. Preliminary results from October-December 2014 include: approximately 55,000 people reached with family planning messages and counseling, and 3,989 new family planning acceptors. Intrauterine device insertion also began during that period at health centers supported by the grant, and vasectomy is being offered in one remote area.

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stakeholders in early discussion about scale and sustainability of programs, and where possible, developing a timetable for graduation from assistance.

Health Extension Workers: Data Use for Decision Making

Health Extension Workers (HEWs) in Ethiopia are frontline health workers who undergo one year of training that prepares them to provide a package of essential primary healthcare interventions, including family planning services. E2A assessed the extent to which HEWs use the data that they gather in their day-to-day work to strengthen service delivery—that is, to plan, monitor, and improve services they provide to community members.

During the assessment, 90 percent of HEWs reported using data to:

- Plan future activities.
- Monitor disease situations.
- Track defaulters at the health post.
- Monitor uptake of family planning, reproductive health, and other health services/supplies.
- Compare performance against targets to determine gaps.

The assessment, conducted in 20 woredas of Amhara and 15 woredas of Tigray, demonstrates that frontline health workers can use data to improve family planning and reproductive health service delivery if certain conditions are met. Those conditions include the provision of adequate training and establishment of policies that support data use for decision making; integrated trainings that address both data use and service delivery; and supervisors who provide regular feedback and acknowledge both good use of data and areas that need strengthening.

Long-Acting Reversible Contraceptives in Ethiopia's Youth-Friendly Clinics

E2A is supporting the training of youth-friendly service providers at ten health facilities, five in Amhara and five in Tigray, to counsel on and provide long-acting reversible contraceptives (LARCs) to young people. Peer educators from the ten sites participated in a three-day training focused on refer-


ring young people to the facilities for contraceptives, including LARCs. These ten facilities serve as the intervention group for a study that will assess the uptake of contraceptive methods among youth in Ethiopia. At facilities in Amhara, two youth-friendly service providers at each facility were trained, and in Tigray, all providers were trained through a two-week on-the-job training program. Ten additional facilities that are continuing youth-friendly services without additional competency-based training on knowledge and skills for provision of LARCs, and are also split equally between Amhara and Tigray, make up the non-intervention group.

A baseline assessment shows that the uptake of LARCs has been extremely limited among young people at both intervention and non-intervention sites: of the 800 clients that visited the Amhara facilities in June and July of 2014, most opted for injectables, and only 5 percent chose implants. In Tigray, the statistics were similar: of the 600 clients, less than 4 percent chose implants. E2A is reviewing client registers to assess the trend in method uptake (short-acting and LARCs) before and after trainings in the intervention and non-intervention sites. Other demographic indicators that are also assessed include age, parity, marital status, and source of referral.

Eliminating Fistula

E2A is assisting with the Government of Ethiopia's National Fistula Elimination Plan, which seeks to intensify efforts to identify, repair, and rehabilitate women with obstetric fistula across 291 woredas currently supported by IFHP. The plan includes a phased approach that begins with applying a fistula-eradication strategy in 20 woredas and then replicating that strategy in the other woredas. With technical guidance from E2A's core partner Management Sciences for Health, E2A is also focusing on building the organizational capacity of Hamlin Fistula Ethiopia. Hamlin Fistula Ethiopia runs the Addis Ababa Fistula Hospital, its regional centers, the Hamlin College of Midwives, and the Desta Mender rehabilitation center for fistula patients. The approach to fistula elimination being applied in the 20 woredas is based on the successful approach already applied by Pathfinder International through its leadership of IFHP.

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