

Improving quality of primary health care through improving quality of pre-service education for Health Extension workers in Ethiopia



Executive Summary

The purpose of this policy brief is to identify key gaps, challenges and solutions, policy options, to pre-service education and training of human resources for health extension program, in Ethiopia. This policy brief is based on national assessment of health extension workers pre-services training which employed mixed methods on 21 training institutions, 1,245 trainees and 192 instructors. Gaps in the competency of HEWs are primarily linked to sub-optimal pre-service training in recruitment, medium of instruction, training capacity of institutions, lack of practical attachment sites and limited compliance of training with training curricula. Policy makers shall take a measure to standardize pre-services trainings.

Introduction

Health extension workers are frontline health care providers which have direct contact with patients and communities. Investing in pre-services education and training of health extension workers can lead to improved primary health service delivery and tremendous health and economic returns. In this policy brief, “pre-service education” refers to the structured process and activities aimed at developing or reinforcing knowledge and skills of health extension workers before they begin providing health services.

In Ethiopia, efforts to achieve universal health coverage have been hampered by a health workforce that lacks adequate skills/competences to deliver primary health services. Studies have linked poor quality of primary health service delivery to inadequate pre-service training of health workers, noting that the training and curricula are often outdated, impractical, and misaligned with national policy priorities. Studies also revealed that the training institutions have limited capacity to deliver effective pre-service education and training due to their inadequate infrastructure, teaching methods and limited competencies.

This policy brief is intended to guide government ministries (Federal Ministry of Health and Ministry of Science and Higher Education), pre-service teaching institutions (23 in number), and other relevant stakeholders who are directly and indirectly involved in the pre-service training of health extension workers.

Key Findings

- There is curriculum implementation problem like mismatch between breadth of the curricula against the time allotted and English language proficiency of trainees
- Practical components of the curricula have encountered several problems including lack of skill labs (20% of the institutions do not have skill labs), poor supervision of trainees during attachment and lack of practical attachment sites (only 46% have adequate attachment sites).
- Criteria practiced in selecting candidates have been contributing towards incompetent trainees and future services providers.
- There are huge competence gaps of the trainees and HEWs
 - ✓ More than 51% of the students perceived as they are less competent in providing ANC services

- ✓ 33% of graduates were un able to pass the COC exam in the first attempt
- ✓ Only 57% of the HEWs (currently working) are COC certified.

Policy Recommendations

- Revise the existing curricula, match theory and practice, content and time of training, teaching and assessment methods, and follow/M&E the compliance of the institutions to curricula implementation
- Apply appropriate selection criteria for health extension workers and entrance exam requirement for HEWs
- Develop the capacity of the training institutions to fulfill all necessary infrastructure, such as class rooms, skill labs, field sites, library, and internet, in both Colleges and TVET agencies.
- Upgrading all level three health extension workers to level 4 and above with clear and diverse career development path.
- Initiating lifelong learning (CPD) by using appropriate modality of learning methods with in the institutions or in working places to fill the competency gaps of the graduates.

