

Health Extension Workers in Ethiopia: Improved Access and Coverage for the Rural Poor

- *> half of the population of Ethiopia lived >10 kilometers from health services*

In response to the problem:

- The government came up with innovative ways of scaling up the delivery of essential health interventions, in particular through its Health Extension Program

HEW

>30,000 female community health workers were trained by the local governments in the following areas:

- *Access to sanitation*
- *Immunization*
- *Family planning*
- *Malaria services has increased as a result of the program*

HEW

- The HEP was designed and implemented in recognition of the poor health status of country
- The country's population is the lack of empowerment of households and communities to promote health and prevent disease



The Problem: Shortage of Health Care providers in Rural Areas

Addressing the Problem:

- To address these problems, in 2003 Ethiopia launched the HEP
- The program's objectives were to reach the poor and deliver preventive and basic curative high-impact interventions to all of the Ethiopian population

HEW

- The program, focuses on four major areas and provides 16 different packages to reach the poor and address inequities

Major Areas and Packages of Health Extension Program

Hygiene and environmental sanitation	Disease prevention and control	Family health services	Health education and communication
<ol style="list-style-type: none"> 1. Proper and safe excreta disposal 2. Prevention and control of HIV/AIDS 3. Prevention and control of tuberculosis 4. Prevention and control of malaria 5. First aid 	<ol style="list-style-type: none"> 1. Proper and safe solid and liquid waste management 2. Water supply safety measures 3. Food hygiene and safety measures 4. Healthy home environment 5. Arthropod and rodent control 	<ol style="list-style-type: none"> 1. Maternal and child health 2. Family planning 3. Immunization 4. Adolescent reproductive health 5. Nutrition 	<p>Health education and communication</p>

HEW

Extension workers are trained to do the following:

- Manage operations of health posts
- Conduct home visits and outreach services to promote preventive health action
- Refer cases to health centers and follow up on referrals
- Identify, train, and collaborate with voluntary community health workers
- Provide reports to Woreda Health Offices

HEW

- Health extension workers spend 75 percent of their time visiting families in their homes and performing outreach activities in the community
- Two health extension workers are expected to train 360 model households a year
- The training lasts 96 hours, after which the household graduates,|| receive a certificate as recognition

HEW

They are trained:

- To provide first aid
- Conduct safe and clean deliveries
- Diagnose and treat malaria
- Diarrhea and intestinal parasites
- In 2010 the government added to diagnosis and treatment of pneumonia into the HEP

What so far achieved by HEW

- Health conditions access and sanitation, improved disproportionately
- Vaccination coverage improved significantly to 86%
- Coverage of maternal health services also improved: as of, 85 percent of health posts could provide family planning services
- 83 percent could provide antenatal care
- 59 percent could perform clean deliveries
- Ethiopia has made significant efforts in expanding coverage of key malaria interventions
- 47 percent could provide postnatal