

# Immediate Impacts of COVID-19 Pandemic on Essential MNCH Services in Selected Health Facilities in Ethiopia

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## Background

The number of COVID-19 cases in Ethiopia has increased rapidly from the first case on 13 March 2020 to more than 6,000 confirmed cases to date, two-thirds of which are clustered in Addis Ababa city. The Last Ten Kilometers (L10K) Project, implemented by JSI Research & Training Institute, Inc., supports the Ministry of Health and Addis Ababa city health bureau to alleviate the pandemic's effects on the health system, including essential maternal, newborn and child health (MNCH) services. **The project conducted a rapid assessment to understand the immediate effects of COVID-19 on the continuity of essential MNCH services in Addis Ababa city.**

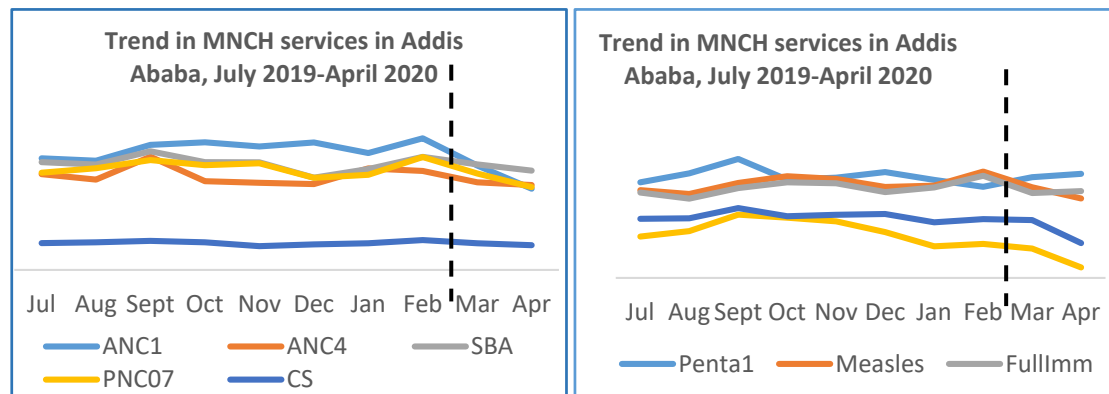
## Methods

In May 2020, L10K conducted 32 in-person, in-depth interviews with city health officers, facility managers, service providers, and community representatives drawn from 10 purposively sampled facilities (four private and six public) using semi-structured guides. L10K used theory and data-driven codes with thematic content analysis. L10K conducted service uptake trend analysis of the last nine months using data from the public health monitoring information system (HMIS) from 96 health facilities.

**Key Takeaway:** COVID-19 compromised system capacity to deliver essential health care due to diversion of resources, fear, stigma, and movement restrictions that resulted in decreased client demand for MNCH services

## Results

- First antenatal attendance and under-five pneumonia treatment decreased by 12% and 35%, respectively in April 2020 compared to the previous eight months' average performance. Interviews revealed that:
- A drop in client flow was ascribed to fear of acquiring COVID-19 at health facilities, limited access due to movement restrictions, and dedication of health facilities as COVID-19 treatment centers.
- Diversion of health workers and resources to direct COVID-19 response activities compromised the facilities' capacity to deliver essential MNCH services
- Health workers experienced a shortage of PPE; increased workload; fear of acquiring COVID-19 and passing it to their families; and stigma from clients,
- Facilities implemented strong, on-site preventive measures which respondents believed could 'boost confidence of clients' and protect health workers



*"After COVID-19 was reported [in Ethiopia], our activities are related only to the outbreak ...."*  
**-Urban Health Extension Professional**

*"I am living with my parents. My parents are old and they are afraid of acquiring the virus. I am not allowed to get in to the house [after work] before changing my clothes which I used during the day. ... I have no freedom like before, because I am afraid of taking the virus to my old parents."*  
**--Health Center nurse**

## Recommendations

1. Evidence-informed, swift responses boost the confidence of health workers and clients and alleviate the pandemic's impact on essential MNCH services.
2. Effective patient flow to optimize social distancing, strong infection control practices, triaging symptomatic clients, and adequate PPE are essential measures.
3. Community sensitization and outreach services on COVID-19 facts and prevention help sustain essential MNCH services.

## Lessons Learned

Strong preventive measures at facilities increase client confidence in and willingness to visit health facilities. Some measures like movement restrictions and diversion of resources are counterproductive to service continuity and need to be carefully designed and implemented.