

Designing approaches of community engagement strategies to link communities with the primary health care system in Ethiopia

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BACKGROUND

The Ethiopian community health flagship program, the Health Extension Program (HEP), launched in 2003, has improved health outcomes and practices tremendously.

The Women's Development Army, a volunteer network established in 2011 that works in tandem with health extension workers, accelerated HEP implementation by mobilizing families and communities. Yet HEP still has challenges engaging families and communities.

RESULTS

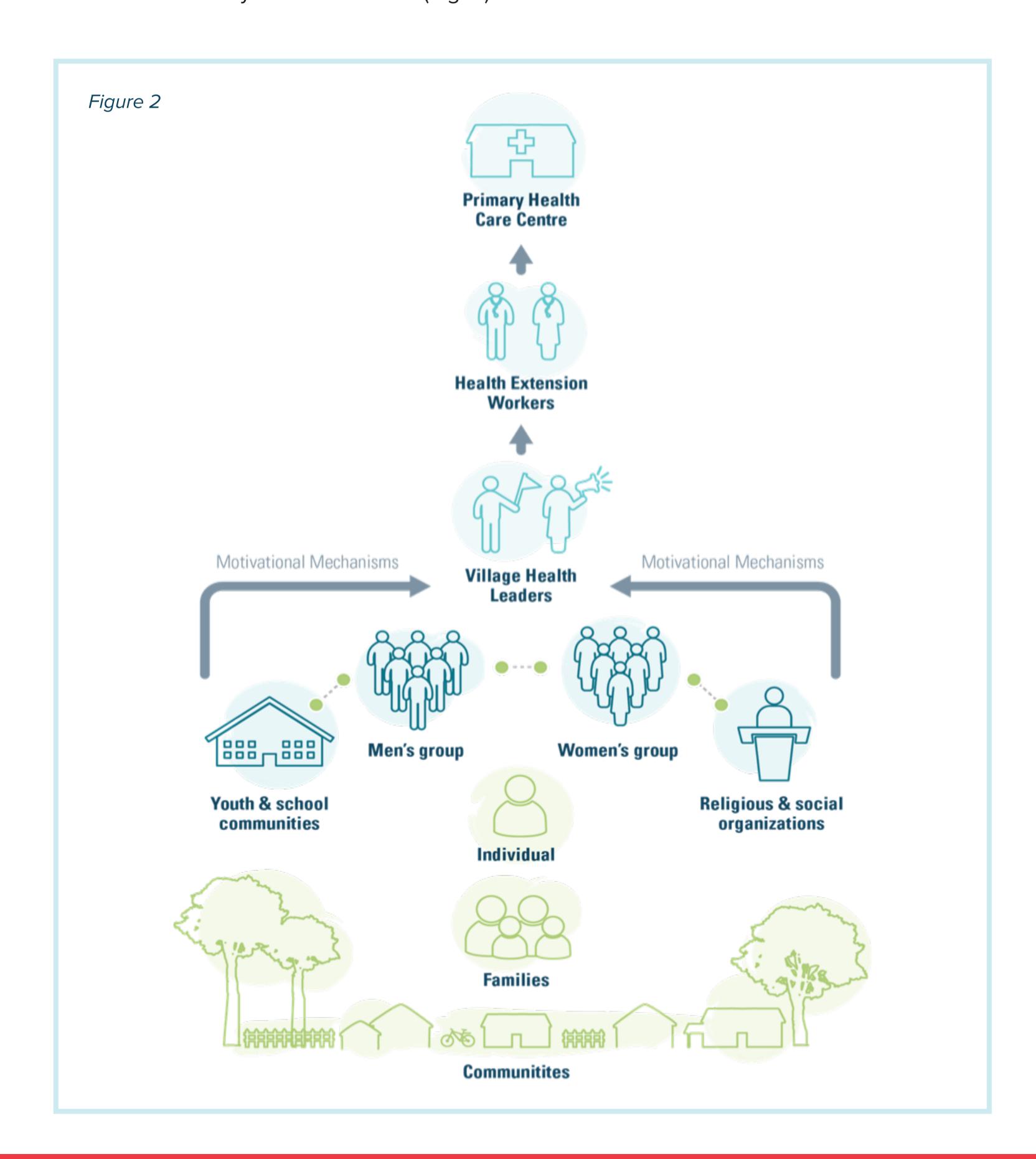
Developing community engagement policy options: The iterative and multi-pronged design process yielded alternative community engagement strategies such as optimizing the existing WDA strategies, engaging men and youth group, adding village health leaders, and designing and testing sustainable motivation mechanisms (Fig. 2).

Testing the VHL approach in selected communities: The village health leaders (VHLs), community volunteers who are supposed to bridge families and communities with the primary health care system has been piloted in selected districts. In a pilot effort, the MOH allocated resources to design and implement the pilot, review the learnings, and prepare for scale in geographies with different contexts.

The VHL approach has been implemented in Dembecha, Adea, Hulbareg, and Damot woyde woredas (Fig. 3). This involved:

- Implementation guideline and VHL training materials developed
- Consultative meeting
- Recruiting 252 community embedded VHLs to serve their catchment community
- A 6-day pre-deployment training for VHLs.
- Distributing tools and guides to VHLs.
- Joint monitoring and learning visits and performance reviews.

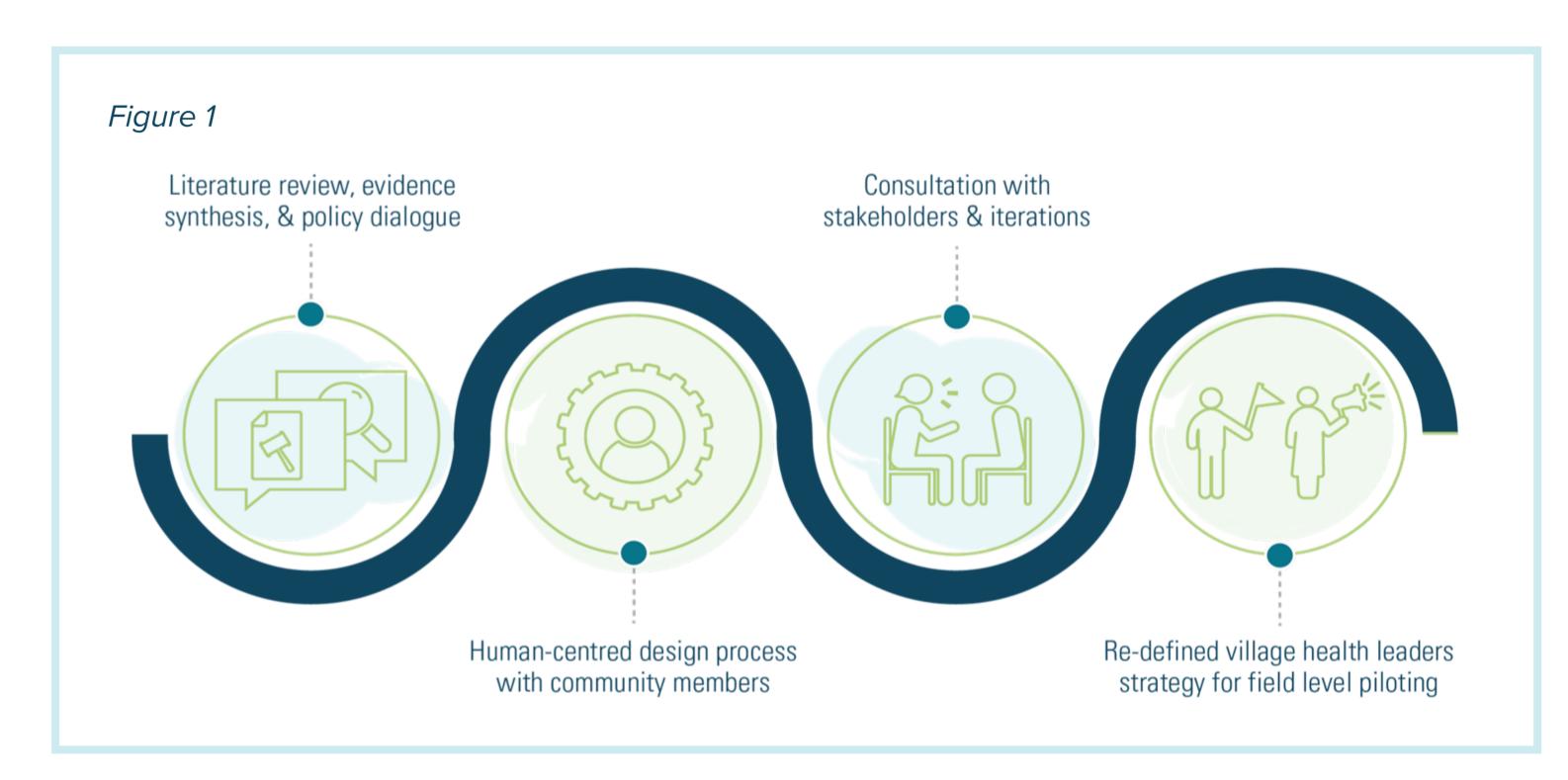
Test scale of the VHL strategy in wider and different contexts: Learning from the pilot implementation of this strategy from the four primary health care units in four districts, the MOH refined the VHL strategy and taken to additional 26 more districts in different contexts to test its scalability at national level (Fig. 4).

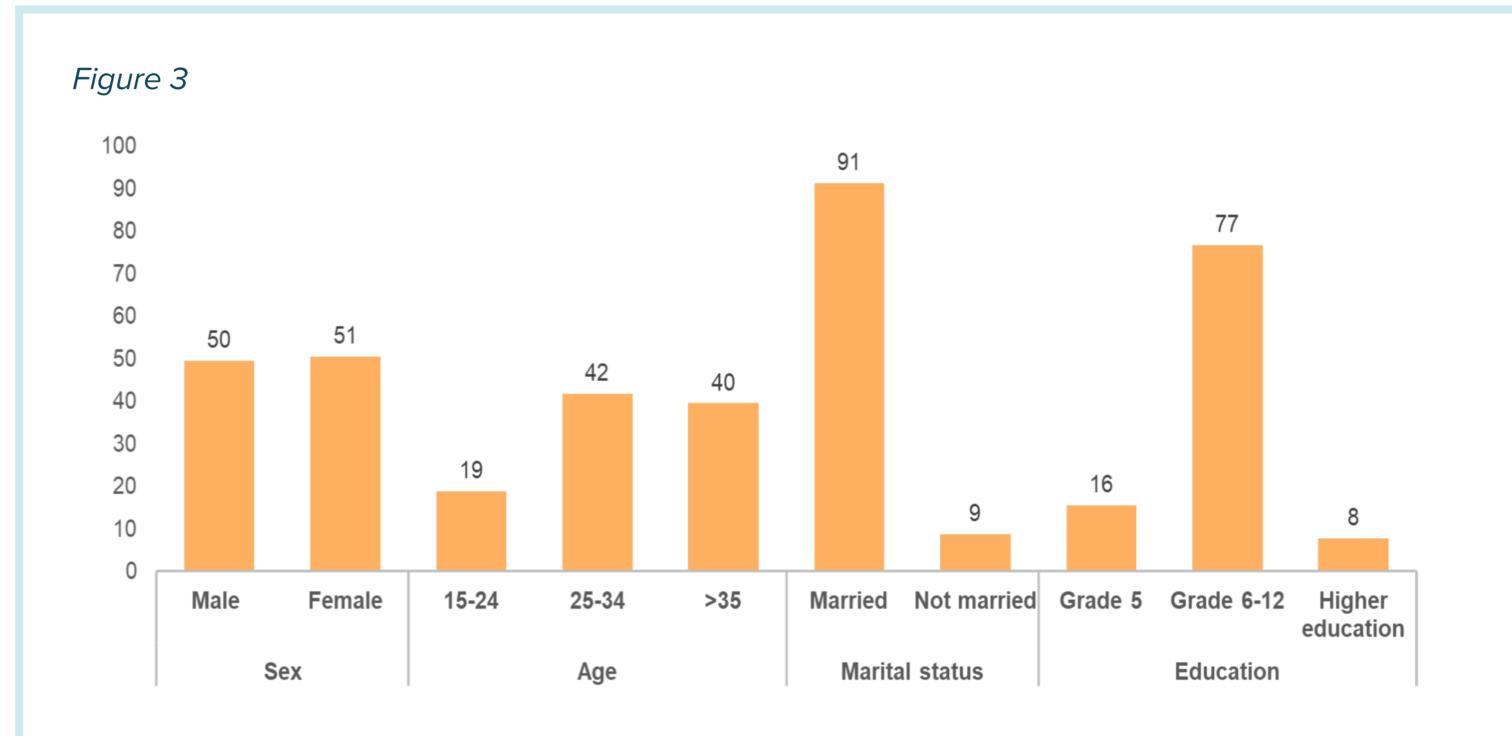


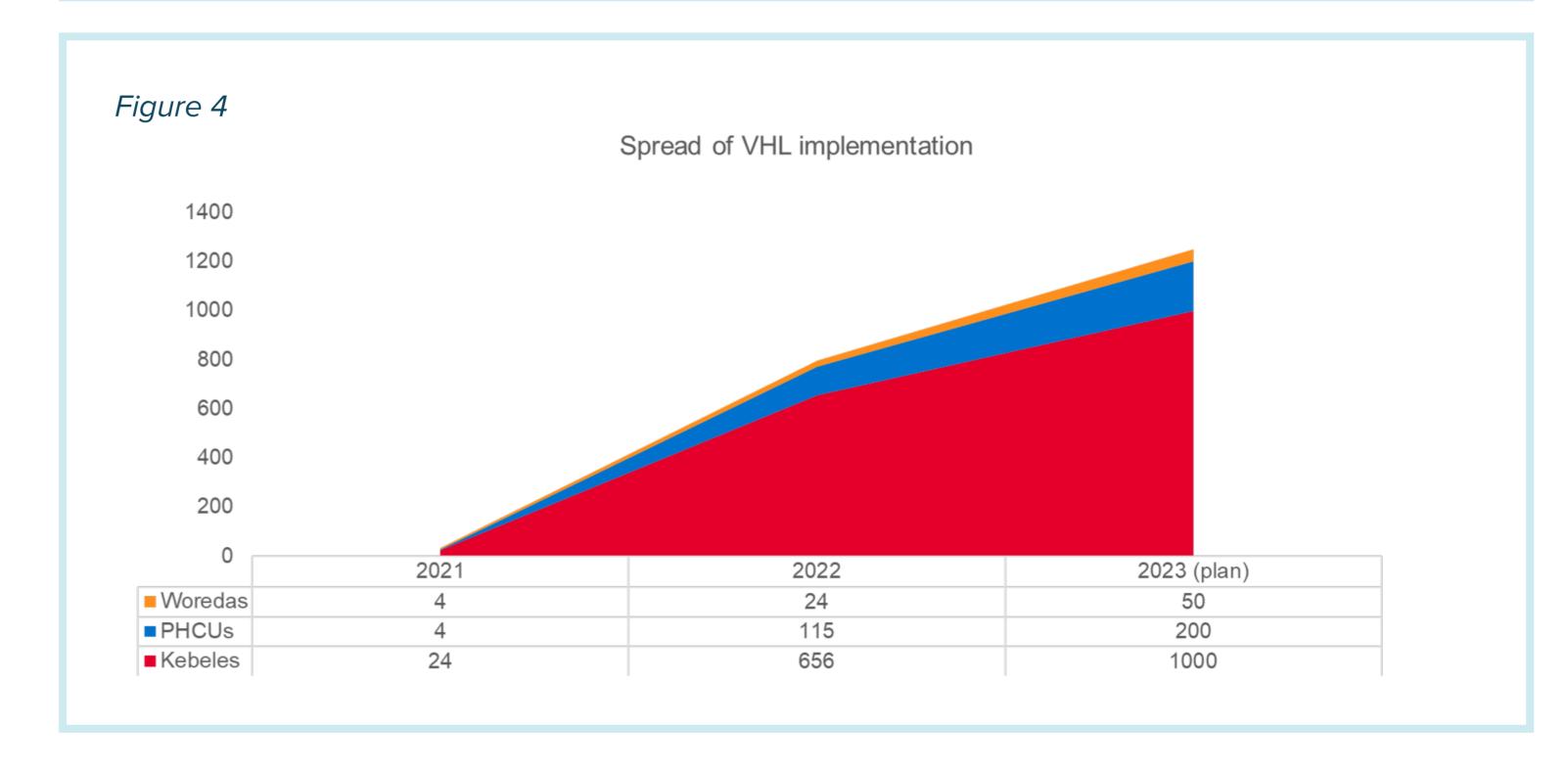
DESIGN APPROACHES

In response, a technical working group at the Ethiopian Ministry of Health (MOH) employed the following to redesign the Ministry's community engagement approaches (Fig. 1):

- I. National and sub-national level advocacy.
- II. Evidence synthesis.
- III. Human-centered design (HCD) techniques.
- IV. Policy dialogue.
- V. Iterative co-designing processes.







LESSONS

- Evidence-based advocacy helped political leaders agree to explore alternative approaches.
- Iterative HCD process included community and frontline health worker voices, desires and input to policy decisions.
- MOH leadership and active development partners involvement fostered health system ownership and sustainability.

