



URBAN PHC REFORM IMPLEMENTATION IN PILOT SITES AND CONSIDERATIONS FOR SCALE-UP

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NATIONAL CONFERENCE ON URBAN HEALTH

APRIL 3-4, 2017, HILTON HOTEL, ADDIS ABABA, ETHIOPIA

Outline

- Background
- Design of the new Primary Health Care (PHC) Model
- Implementation status of the PHC reform
- Challenges
- Recommendations



Background

- The urban population in Ethiopia is increasing rapidly (nearly 19% of the total population).
- 30 percent of the country's people will reside in urban areas by 2028.
- Urban population growth presents a huge opportunity for multiple sectors
- It may also pose a demographic challenge to provide health care, jobs, services, and housing to rapidly increasing population.
- Urban populations are burdened and will be confronted by a triple threat
 - Infectious diseases, NCDs and Injuries and accidents



Design of The New Primary Health Care Model

- A visioning exercise was conducted within FMOH
- Experiences from Cuba and Brazil were considered as best ones to be adopted
 - Brazil's Family Health Team approach
 - The client categorization approach was adopted from Cuba's experience
- Based on these lessons & Urban HEP experience the following approaches were tested in A/A



Categorize Communities Based on Risk Assessment

Client characteristic	INCOME CATEGORY		
	(A) LOWEST	(B) MEDIUM	(C) HIGHEST
I: Pregnant women and children under the age of 5 years	Category IA	Category IB	Category IC
II: Adults with chronic problems and non-communicable disease	Category IIA	Category IIB	Category IIC
III: Others	Category IIIA	Category IIIB	Category IIIC



Introduce Team-based Approach to Provide Targeted Services

- Health workers deployed at health centers are organized as a team, called a “Family Health Team”
- The FHT is an entry point for easy access to comprehensive health care services ranging from primary to tertiary care services
- Provide targeted services to priority populations through home visit or outreach sites and make referrals
- The health center staff will be organized in 5 - 8 FHTs,
- Each FHT consists a family health doctor/ HO or BSc. Nurse, clinical nurses, UHEPs and environmental health professionals.
- The FHT will rely on pooled services for laboratory, pharmacy, delivery, and logistics and administrative matters



Service Packages and Modality of Service Provision

- Promotive, Preventive, curative and rehabilitative service packages have been defined to be provided at health center and community level
- UHEPs will identify populations that need to be visited by the FHT and make arrangements
- The team will visit the identified families with all the necessary supplies to provide services at the household level
- The team will also educate the family and make referrals



Implementation Status of The PHC Reform

- The model has been implemented in Gergi, Gulele, and Yeka Entoto Number 2 health centers in Addis Ababa
- The implementation of the reform started with household surveys for categorization, and with preparation of implementation manuals.
- It is being expanded to 20 health centers in Addis Ababa and regional towns ; Hawassa, Jimma, Mekelle, Harar, Dere Dawa, and Bahir Dar.



Implementation cont...

- The approach increased access to basic services for marginalized and vulnerable population groups.
- The team approach allowed provision of comprehensive care including non-communicable disease, injuries, violence, and mental health.
- The reform introduced the practice of team work within the primary health care system
- It helped to draw health workers out of the health centers to work with community-based structures and members



Challenges

- Inadequacy of human resources to staff the family health team
- Lack of office space to reorganize outpatient clinics according to the family health team's arrangement
- lack of sustained follow-up support from health offices
- Financial constraints (or absence of fee waiver system) for providing medications for indigent people identified during visits by team
- Transportation problems
- Shortage of supplies
- Weak referral network between the health center and hospitals



Recommendations for Scale-up

- Validate and simplify the client categorization approach
- Define the role of the FHT clearly in a written scope
- Ensure inter-sectoral collaboration
- Implement community health information system
- Integrate strong evaluation and research components
- Increase number and mix of technical staff at health centers
- Design mechanism to sustainably provide logistics, supplies, and drugs for the family health team
- Implement incentive packages to motivate the FHT
- Implement an appropriate payment mechanism including financial risk protection mechanisms for the poor



Thank you!

