## Community engagement for maternal health: Lessons learned from southern Ethiopia



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Ethiopia has a unique approach for community participation, embedded in its health policy. Within the Health Extension Program, two community participation structures have been established: the health development army (HDA) and the pregnant women forum (PWF). Health extension workers (HEWs) facilitate monthly HDA and PFW meetings. As part of a quality

improvement intervention to enhance responsiveness and resilience of the health system, HEWs received trainings, guidance and supervision focused on facilitation of these community-based meeting. This study aimed to evaluate the intervention and explore the perceptions of involved stakeholders regarding efforts to enhance community participation.

### **METHODS**

We conducted a mixed method study in Shebedino district, Sidama Zone, south Ethiopia. We explored the perceptions of different stakeholders on the content and functionality of the HDA meetings and PWFs by observation of these meetings (15), in-depth interviews with HEWs (32), HEW supervisors and managers (8) and focus group discussions (FGDs) with community members (8). The interviews and FGDs were recorded, transcribed, translated, coded and thematically analysed. In addition, we collected data related to the outputs of the intervention and service utilization, which were analysed using Excel and SPSS.

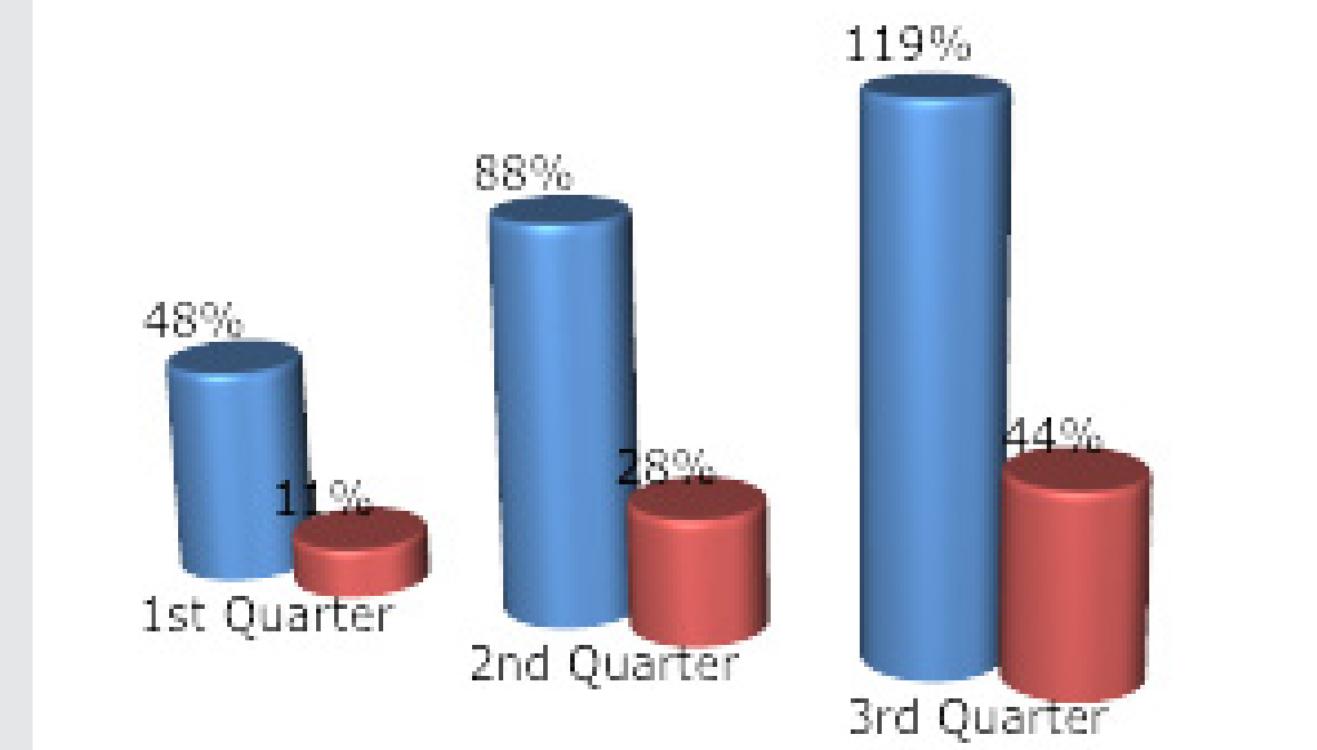
### **RESULTS**

The attendance of both types of meetings increased over time. The proportion of pregnant women attending the PWF increased by 71%, while the proportion of HDA leaders attending HDA meetings increased by 34%. It was observed that communication during the meetings between the facilitators and attendees became more participatory over the course of the intervention. The HDA leaders contributed to an increase in the identification of new pregnancies, there by linking referral between the community and the HEWs. The percentage of pregnant women who came for care and were identified by the HDA increased from 43% to 85%. Generally, the antenatal care utilization figures went up, from 73% to 77%. Institutional delivery increased from 79% to 83.3%. From interviews with stakeholders involved, it was found that knowledge and awareness about maternal health issues went up. All stakeholders felt that both meetings had led to increased health seeking behavior. The functionality of the meetings were hindered by unmet expectations regarding incentives for HDA leaders, absentees, lack of reporting formats and lack of support from the kebele administration.

"Generally there is good improvement in community engagement (PWF and HDA) meetings, especially there is increased and visible participation of women in pregnant women forums. On top of attending, they also discuss how to identify danger signs during pregnancy, labor and the postnatal period by using the family health guide."

HEW interview

# CHANGES IN THE PARTICIPATION OVER THE QUARTERS



"These HDA leaders are previously voluntary community health workers.
These guys previously got incentives once in three or six months and have such habit, but nowadays nothing at all. These people make rumor expecting incentives and saying health extension workers are getting benefits for themselves letting us to work for free."

Figure showing: PWF held in shebedino

woreda, Nure Dulecha health post, 2015

The knowledge and awareness of women

a result of the PWFs and HDA efforts:

about maternal health services improved as

HEW Interview

Most HEWs explained challenges with HDA leaders' meetings, because of the HDA leaders' expectation to receive financial incentives.

"My village is behind the hill, initially I was a lot tired because of mothers were not voluntary going for ANC visits and other services, but now though it is far for health posts they are attending the pregnant women forum and also getting the ANC services because they understand the importance, because of that they saved us from tiredness."

Community interview, Woman

"Formerly when mothers were referred by HEWs, our community did not give attention, but now their awareness has been improved by far more than earlier time. They [women] started considering it as serious when referred especially if it is because of maternal case."

Community interview, Male

## KEY

Pregnant women forum participation

Health development army participation

## CONCLUSION

With focused training, facilitation guidelines and regular supportive supervision, HEWs are able to stimulate community participation, resulting in better maternal health service utilization. This is important for efforts to reach universal health coverage in Ethiopia.

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