

Project HOPE



Integrating Health Services into Ethiopia's Productive SafetyNet Program: Insights from a Qualitative Study **Across Three Regions of Ethiopia**

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BACKGROUND

Despite global efforts to improve maternal and child health in low-income countries, challenges persist, particularly in nations like Ethiopia. Integrating healthcare services with programs like the Productive Safety Net Program (PSNP) is crucial for supporting communities in accessing Reproductive, Maternal, Newborn, and Child Health (RMNCH) services. However, evidence on the effectiveness of this integration and the factors affecting its implementation at the community level remains limited.

OBJECTIVE

To assess the integration of health services into PSNP, identify influencing factors, and generate recommendations for improvement.

METHODOLOGY

The study was conducted in 10 project-targeted districts of Afar, Amhara, and Tigray regions. As part of a mixed-method study, this research focused on the qualitative analysis of integrating health services into the Productive Safety Net Program in the specified regions. The qualitative component centered on conducting a formative assessment through Key In-depth Interviews (KII) and Focus Group Discussions (FGDs), with the study period extending from May 8 to July 30, 2024.

KEY FINDINGS

- Findings indicate that integration of RMNCH services with PSNP at the community level remains weak and inconsistent.
- Key barriers to integration of health services into the PSNP platform included conflict in the northern region, resource constraints, geographic inaccessibility, and deviations from implementation guidelines.
- The integration process was further impeded by insufficient commitment from leadership and a lack of effective management and coordination mechanisms.
- Despite these challenges, some successful partnerships were noted between service providers such as health extension workers (HEWs) and Agriculture development Agents (ADAs).







Pictures shown during integrated services are given in the project areas

DISCUSSION

The integration of RMNCH services into the PSNP is essential for improving maternal and child health outcomes. This includes transitioning eligible pregnant and lactating women, and households with malnourished children, from the public work requirements to the temporary direct support (TDS) and strengthening the linkages between health and social protection services

Evidence indicates that social protection initiatives are most effective when coordinated with multisectoral approaches, such as healthcare, agriculture, job creation, infrastructure, and nutrition education.

In this regard, Project HOPE is implementing the "Integrating Health into PSNP" initiative. However, our findings show that the integration of PSNP and RMNCH services is currently limited, with no established community structures. While health services, including malnutrition screening, antenatal care, vaccinations, and family planning, are available, their consistency remains a concern.

CONCLUSION

 Health service integration into the Productive Safety Net Programme (PSNP) at the community level remains minimal, with current efforts largely limited to malnutrition screening.

Some key recommendations:

- Capacity Building: Provide targeted training and ensure essential resources.
- Outreach
 Services: Strengthen community-level health service delivery.
- Coordination: Establish multisectoral mechanisms with clear accountability.
- Information Systems: Develop unified platforms to track beneficiaries.
- Innovative Strategies: Use human-centered and genderfocused models to improve access.



References: Site your key sources here.