Population and Poverty in Ethiopia
The average Ethiopian woman bears 5.9 children during her lifetime, and the current population of 72,420,000 is expected to more than double to 173,326,000 people by 2025. In a country plagued with recurrent drought and food shortages, where 50 percent of the population lives below the poverty line, a new mouth to feed can be a source of great anxiety.

Since 1995, Pathfinder International has collaborated with the Government of Ethiopia—with the generous support of USAID and other organizations—to introduce Reproductive Health and Family Planning (RH/FP) to poor and remote communities. Pathfinder believes that reproductive health is a basic human right, recognizing that women around the world share the desire to control the timing and number of their children in order to improve the welfare of their families.

Many communities in Ethiopia remain virtually untouched by modern health care, relying on traditional healers, traditional birth attendants, neighbors, and personal faith in the face of illness or childbirth. To reach these very traditional families, Pathfinder has long promoted community-based health care services by training community volunteers, called Community-Based Reproductive Health Agents (CBRHAs), to introduce family planning, reproductive health, and—today—HIV/AIDS prevention, care, and support to their neighbors. This approach has offered outstanding results in Ethiopia.

Bringing Reproductive Health Care to the Community
To become a Community-Based Reproductive Health Agent in Ethiopia, a community member must be literate, accepted by the community, and be willing to practice family planning. For decades, Pathfinder has collaborated with local non-governmental organizations (NGOs) to bring quality health care to people at the neighborhood level. Pathfinder provides these Implementing Partner Organizations (IPOs) with training in reproductive health and management, resources, and assistance in capacity building. Currently, 47 IPOs are implementing RH/FP programs directly, as well as recruiting, training, and supervising nearly 8,000 CBRHAs. Most programs are located in the regions of Amhara, Oromia, SNNPR, and Tigray, where more than 85 percent of the population is concentrated.

In Ethiopia, more than 850 women per 100,000 and 104.5 babies per 1,000 live births die each year in childbirth. Recent research conducted by Pathfinder found that only 12.2 percent of births were in a health facility.
At 29, Aman Buli has been a CBRHA Agent in the village of Tuse, in Gedeo Assassa Woreda of Oromia Region, for four years. A farmer, like his neighbors, and the father of three, Aman was chosen by his village to be their CBRHA.

In their highly conservative community, women of Tuse often bear 11 or 12 children. "After I was trained as a CBRHA, my wife and I stopped having children. She has now returned to school, as have many women in our community," says Aman. "When I started teaching about family planning, women came to me secretly, because their husbands were against it. Now, everyone sees the benefits to their lives and they come openly."

Aman is a natural counselor. With compassion and determination, he has counseled more than 4,000 women, dispensing family planning methods, teaching maternal health, safe childbirth, care of childhood diseases, basic hygiene, and malaria prevention. Thanks to his urging, his community has installed 60 new latrines.

Aman's carefully orchestrated week includes visiting clients in their homes, addressing crowds on market days, lessons on family planning and reproductive health, and counseling on health. He also helps women learn about the need to space children by at least 3 years to ensure the health of mother and child. In his small office provided by the village, he greets each new client with his list of her rights, which he reads and explains to her, assuring her of his confidentiality and respect.

Armed with a wealth of information learned in his Pathfinder training, Aman can explain the merits and disadvantages of different contraceptive methods and help women choose what works for them. He is remarkably persuasive, having nearly eliminated the deeply entrenched custom of Female Genital Cutting in his area. "I went through the Bible with the Orthodox priests and through the Koran with the Imams, showing how cutting is not a religious requirement. I made them understand how dangerous and harmful the practice is to our women, and how it endangers the child during labor. Women came to testify about the hardships it can bring. The religious leaders were deeply moved and have been speaking out strongly against cutting, so that now it is almost all gone from our community."

Aman's carefully orchestrated week includes visiting clients in their homes, addressing crowds on market days, lessons on family planning and reproductive health, and counseling on health. He also helps women learn about the need to space children by at least 3 years to ensure the health of mother and child. In his small office provided by the village, he greets each new client with his list of her rights, which he reads and explains to her, assuring her of his confidentiality and respect.

Armed with a wealth of information learned in his Pathfinder training, Aman can explain the merits and disadvantages of different contraceptive methods and help women choose what works for them. He is remarkably persuasive, having nearly eliminated the deeply entrenched custom of Female Genital Cutting in his area. "I went through the Bible with the Orthodox priests and through the Koran with the Imams, showing how cutting is not a religious requirement. I made them understand how dangerous and harmful the practice is to our women, and how it endangers the child during labor. Women came to testify about the hardships it can bring. The religious leaders were deeply moved and have been speaking out strongly against cutting, so that now it is almost all gone from our community."
Yalise Baffa

Married to a farmer at the age of 13, Yalise Baffa is now 37 years with 10 children. For most of her life, child bearing and rearing demanded all of her time and energy. Four years ago, Yalise became a CBRHA in Awassa town, Awassa Zuria Woreda.

As happens for many CBRHAs with Pathfinder training, Yalise began to see her world in a whole new way, realizing the possibility for women in her town to lead very different lives.

She draws on her own life to teach her neighbors: “I talk about my early marriage and my 10 children and how my life has improved with family planning because we are sure that there will be no more babies. After I got my tubal ligation, there are no more worries in my house, no more babies. It has changed life for my husband too!”

Yalise provides family planning, counseling, and referrals to nearly 1,500 clients, most of whom come to her home. “In the early days, some women came to me hiding from their husbands. The men opposed family planning,” she says. “But now, the husbands push their wives to get pills, and if the wife goes away for a week to visit her family, the husband will come to the clinic and want to take her pill, not knowing it only works on women. The economic reasons for family planning are clear to them now.”

Outspoken about the dangers of early marriage and female circumcision, she is a powerful voice for change in the face of tradition. People seek her advice also on basic nutrition, childhood immunizations and infections, and other medical problems. But her greatest challenge is HIV/AIDS. Many clients know little about the virus, but she encourages them all to get tested and then use condoms. She takes HIV-positive pregnant women for prenatal care and shows them how to receive safe delivery at a health facility to prevent transmission of HIV to the baby. She follows up with post-natal counseling and encourages exclusive breastfeeding.

Once a week, Yalise visits 58 sex workers downtown, armed with condoms and lessons on negotiating their use with clients. “I tell them ‘No sex without a condom! Stick together as a group and keep plenty available, and simply refuse to do otherwise.’ Most of them are having success with this approach.”

Yalise is a master at teaching and persuading her neighbors to change their behavior. Beyond lectures about the dangers of Female Genital Cutting, she relies on enforcement. “And I have my own set of informers,” she confides. “If someone is even thinking of cutting her daughter, I will hear about it, and I will show up with the police. You can be fined 600 birr or sent to jail for 6 months for participating in genital cutting. People in my district are not doing it any more,” she adds with a grin.

Smart, knowledgeable, and determined, Yalise has become a powerful voice in her village. Elected chair of the Women’s Association and head of the Women’s Traders Association, she influences local affairs far beyond reproductive health. Recently, she convinced the Kebele Association to fund many children who have lost their parents to AIDS and cannot be cared for by extended family. She never stops seeking new homes for them, even as more come in the door.

The Rise of HIV/AIDS

Over 38 million people live with HIV/AIDS worldwide—two-thirds of them (25 million) in sub-Saharan Africa. HIV/AIDS mainly affects people of reproductive age, and women now account for 57% of new infections. Because they are physiologically and socially more vulnerable, women aged 15-24 are nearly four times more likely to be infected men.

Young, married women, who are usually monogamous, have become one of the most vulnerable groups to HIV in the region. HIV/AIDS prevalence in Ethiopia is estimated to be 4.4 percent. To reach young married women, who may not be aware of their vulnerability, HIV/AIDS prevention, care, and support activities must be integrated into already established health services that are used by the general population.

Pathfinder trains agents to help men and women seek voluntary testing, following up with those who test positive with information on FP and access to care and support. Those men and women who test negative to the virus are strongly counseled to maintain positive behaviors.

Lasting Support Through Local Leadership

To reinforce and strengthen RH/FP acceptance, Pathfinder has engaged the support of local leaders as members of Woreda Advisory Committees (WACs). Local representatives of the Ministries of Health, Women’s Affairs, Capacity Building, Agriculture, Education, and Youth and Sports are joined by leaders of the Orthodox Christian Church and Muslim Imams, as well as others from the Women’s and Farmer’s Associations.

This graph shows the remarkable progress made by AHA in educating women about contraception and providing access to it. The number of acceptors in the program has more than doubled in just two years.

Educated by Pathfinder in the issues of RH/FP and committed to promoting community health, WAC members recognize the importance of family planning to the development of their communities. By speaking out against harmful traditional practices and in support of maternal health, these prominent village leaders greatly facilitate the jobs of the CBRHAs and the IPOs. Over the past 3 years, in many villages where IPOs, WACs and CBRHAs collaborate, resistance to family planning has virtually disappeared.

[Image: This graph shows the remarkable progress made by AHA in educating women about contraception and providing access to it. The number of acceptors in the program has more than doubled in just two years.]

[Image: These CBRH agents have just picked up some more family planning supplies from African Humanitarian Action, where they also receive training and support.]

The Rise of HIV/AIDS

Over 38 million people live with HIV/AIDS worldwide—two-thirds of them (25 million) in sub-Saharan Africa. HIV/AIDS mainly affects people of reproductive age, and women now account for 57% of new infections. Because they are physiologically and socially more vulnerable, women aged 15-24 are nearly four times more likely to be infected men.

Young, married women, who are usually monogamous, have become one of the most vulnerable groups to HIV in the region. HIV/AIDS prevalence in Ethiopia is estimated to be 4.4 percent. To reach young married women, who may not be aware of their vulnerability, HIV/AIDS prevention, care, and support activities must be integrated into already established health services that are used by the general population.

Pathfinder trains agents to help men and women seek voluntary testing, following up with those who test positive with information on FP and access to care and support. Those men and women who test negative to the virus are strongly counseled to maintain positive behaviors.

Lasting Support Through Local Leadership

To reinforce and strengthen RH/FP acceptance, Pathfinder has engaged the support of local leaders as members of Woreda Advisory Committees (WACs). Local representatives of the Ministries of Health, Women’s Affairs, Capacity Building, Agriculture, Education, and Youth and Sports are joined by leaders of the Orthodox Christian Church and Muslim Imams, as well as others from the Women’s and Farmer’s Associations.

This graph shows the remarkable progress made by AHA in educating women about contraception and providing access to it. The number of acceptors in the program has more than doubled in just two years.

Educated by Pathfinder in the issues of RH/FP and committed to promoting community health, WAC members recognize the importance of family planning to the development of their communities. By speaking out against harmful traditional practices and in support of maternal health, these prominent village leaders greatly facilitate the jobs of the CBRHAs and the IPOs. Over the past 3 years, in many villages where IPOs, WACs and CBRHAs collaborate, resistance to family planning has virtually disappeared.

These CBRH agents have just picked up some more family planning supplies from African Humanitarian Action, where they also receive training and support.
Looking Ahead

The success of community-based health care delivery is primarily attributable to local ownership and local responsibility. Without community involvement, outside ideas—good or bad—generally come and go. As Pathfinder expands the numbers of CBRHAs, and broadens into more woredas with new and committed WAGs, the pattern of reproduction and population growth will begin to change meaningfully in Ethiopia. It is a system that can be expanded and improved. With enthusiastic support from the Ethiopian government, as well as continued resources from USAID and other supporters, Pathfinder looks forward to widespread improvement in both family planning and community health in Ethiopia.

3PRR 2004, World Population Data Sheet.
5PRR 2004, World Population Data Sheet.

—By Jennifer Wilder, Senior Technical Communications Associate at Pathfinder International

Pathfinder International/Ethiopia
P.O. Box 12655
Addis Ababa, Ethiopia
Tel: 011-251-1-613330

Pathfinder International/Headquarters
9 Galen Street, Suite 217
Watertown, MA 02472
USA
Tel: 617.924.7200
Email: info@pathfind.org

www.pathfind.org

Pathfinder International in Ethiopia is generously financed by:

USAID

The David and Lucile Packard Foundation

Sida

Swedish International Development Agency

UNICEF