



Integration of PFPF into Mother Support Groups for PMTCT in Ethiopia

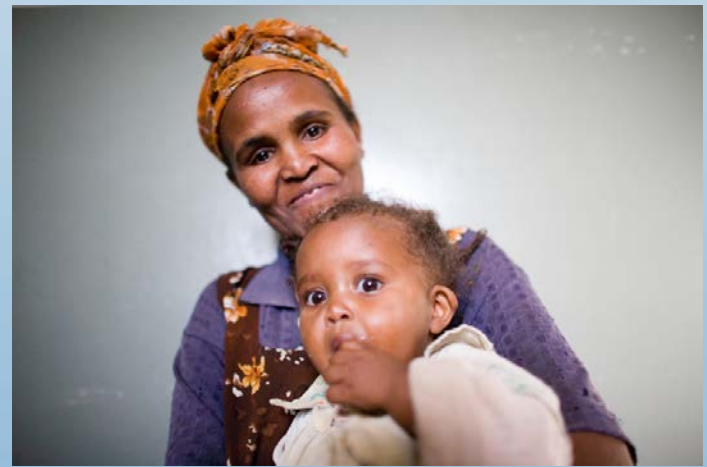
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Background

- PMTCT started in 2001 in Ethiopia
- 2001 to 2005 uptake of MNCH/PMTCT/ FP services low
- Mother Support Groups introduced in 2005
 - 198 MSG across the country
- Community PMTCT Project 2009-2014
 - 519 health centers

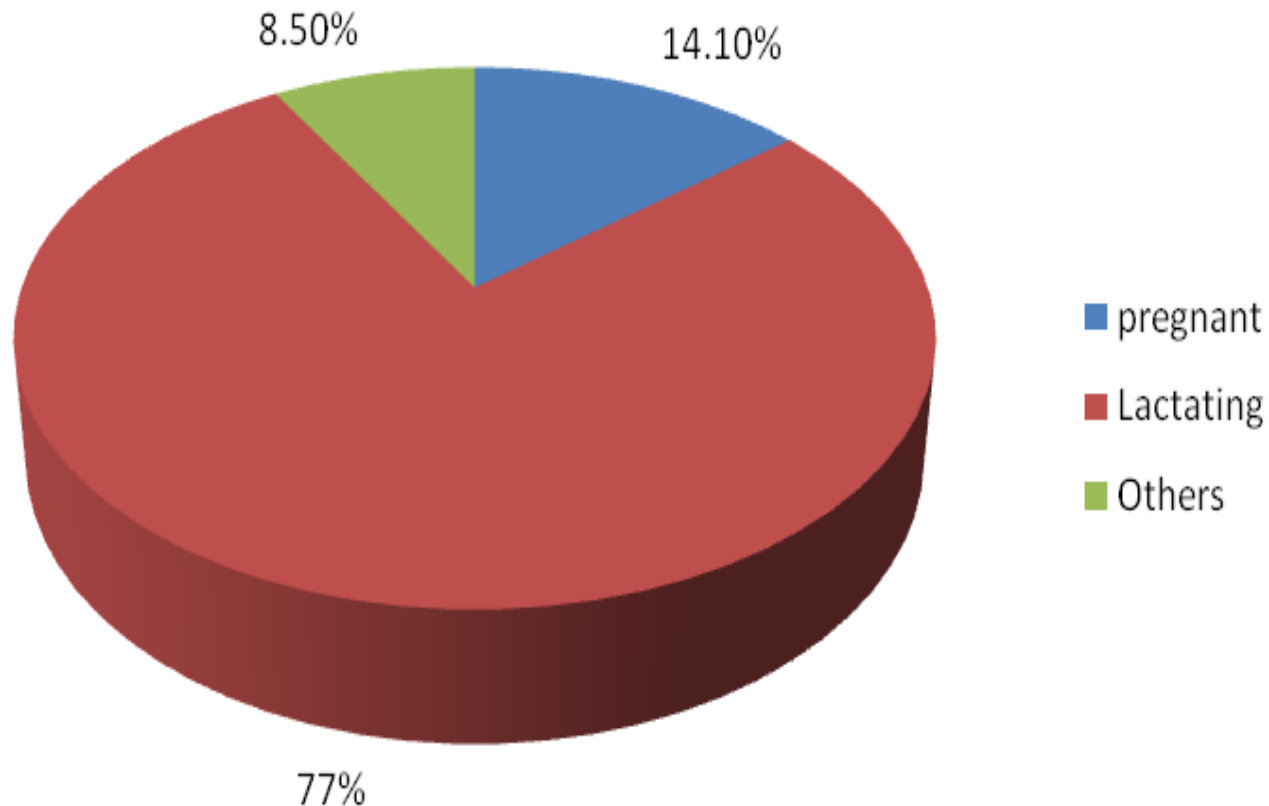
Assessment Purpose & Objectives

- Effectiveness of MSGs for utilization of PFP services
- Assess if PFP service integration to MSG program increases access to FP services
- Perception of MSGs as for FP service delivery



Results: Composition of MSGs

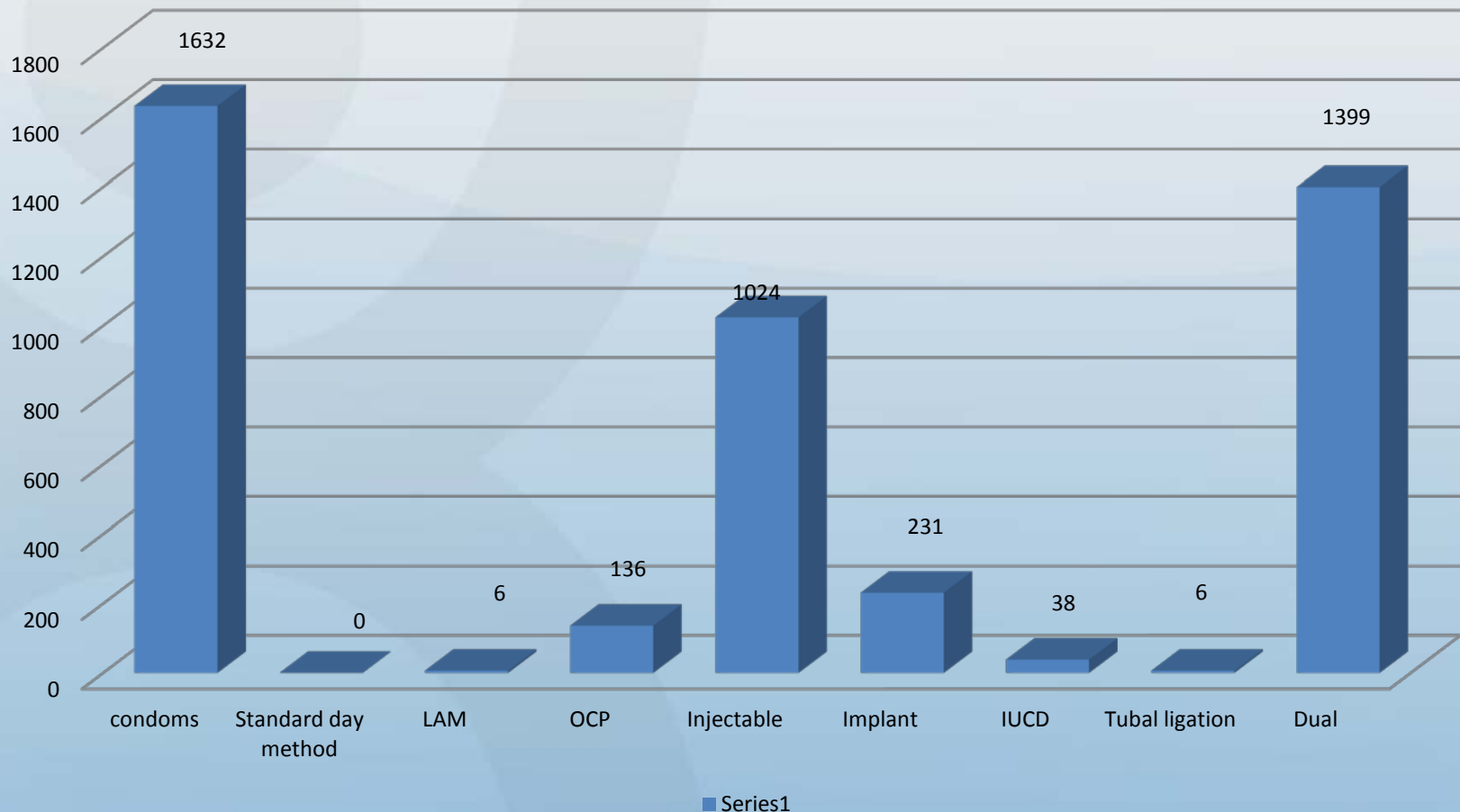
Composition of MSG Members



As of 3/2013

Results: FP use by method

FP Method use by type



Results: Perception as FP service provider

- “Is a good input to the H.C. as well to the community especially for the pregnant, lactating mothers with their partner. The best is they easily persuade the mothers rather than providers in using contraception ...”

Conclusion

- MSG are peer support group and identify easily with HIV +ve women
- They are positively perceived by the health care providers and the community
- FP & HIV counseling service can successfully be task shifted to them for provision of integrated services
- MSG ensure use of dual protection methods post partum
- Need technical and financial support

Challenges & Recommendations

- Predominance of injectable methods
- Need to strengthen offering of all methods
- More coordinated support is required for PMTCT/FP integration
- Sustainability of MSGs and community support

