CHAPTER-TWO

CHIS in Ethiopia

LEARNING OUTCOMES

At the end of this session, students will be able to:

- Describe overview of Health Extension Program (HEP)
- Describe overview of CHIS system in Ethiopia
- Discuss Kebele/Woreda Profiling
- Explain Household profiling
- Discuss CHIS Recording and Reporting tools
- Explain overview of eCHIS

Overview of Health Extension Program (HEP)

- HEP is a package of preventive, promotive and basic curative services targeting households to improve the health status of families with their full participation
- ☐ It's educational approach is based on the **diffusion model**. Community behavior is changed step by step:
 - Training early adopters, then
 - moving to the next group that is ready to change

Overview of Health Extension Program (HEP) cont'd....

- The overall goal of HEP is to:
 - Reduce morbidity and mortality of children and mothers
 - Prevent communicable and non-communicable diseases
 - Prevent illnesses from malnutrition, poor hygiene
 - Prevent accidents and administer first aid
 - Improve knowledge and skills of the community to prevent contaminations

Overview of CHIS in Ethiopia

Ethiopian CHIS is designed for the health extension workers (HEWs) in rural and urban areas to manage and monitor their work

CHIS:

- Family centered at rural and
- Community-centered at urban
- The aim is to create basic health information at the grass root level

Overview of CHIS in Ethiopia _ Tools

- CHIS data is captured through:
 - Master Family Index (MFI)
 - Field book,
 - Registers (for pastoralist area) service and
 - Disease tally sheets/reporting formats, and
 - Additional administrative and personnel records.

Kebele/Woreda Profiling

- □ Formats were designed to compile Kebele's demographic profile
- The purpose is for Planning, Monitoring and Evaluation of performances
- Information is updated annually
- Resource mapping format is to compile potential resources
- Working areas are captured for health promotion activities
- Once the household registration is completed, the family health profile will be filled to compile the family information.

Household Profiling

- □ Family folder is used for rural, while community folder is for urban Health Extension Programs.
- Family Folder is a pouch that helps to record the household and family characteristics.
 - It's issued to every household in the Kebele.
 - It contains information about the household (preventive, promotive
 & environmental health) service needs

Household Profiling

- Community Folder is used to file/document family registers filled for 5-12 households (mostly 10 households), that are considered as a community
 - It uses to bind the family registers of a households.
 - The information on the community folder helps the UHEP to identify the Family/HHs

How Family Folder works?

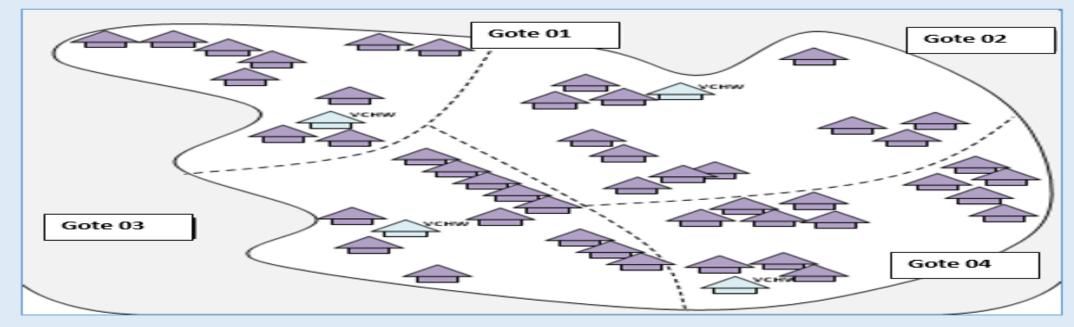
- Front and back sides are used for recording information on:
 - House hold information.
 - Household members' description
 - Household's Possession of LLITN,
 - HDA/WDA and CBHI membership status
 - HEP packages practices
 - Competency based Training Status for (WDA leaders)

- □ Family folder is issued through a campaign by mobilizing the Gote Gote: is a sub segment of the Kebele which has different meanings in different areas like 'Zoni' in Oromia and 'Kushet' in Tigray regions.
- HEWs with Kebele administration will assign Gote-code
- In each Gote, volunteers issue serial unique Household numbers
- When new household is emerged, the last serial number is given

- Register household characteristics on cover page of Family Folder
- During household registration, every household is issued a unique identifier number consisting of a 2-digit Gote code followed by 3-digit household number (xx.xxx).
- Later, HEWs aggregate data from Family Folders to compile basic demographic and environmental sanitation profile of the Gote/Kebele

Activity-2

- 1. See the hypothetical map of the community with about 51 households in four Gots. Discuss in groups on the following points:
 - a) Give house number (code) for each of the following households?
 - b) How you will give code for the newly constructed household?
 - c) What if one household shift from one place to another?

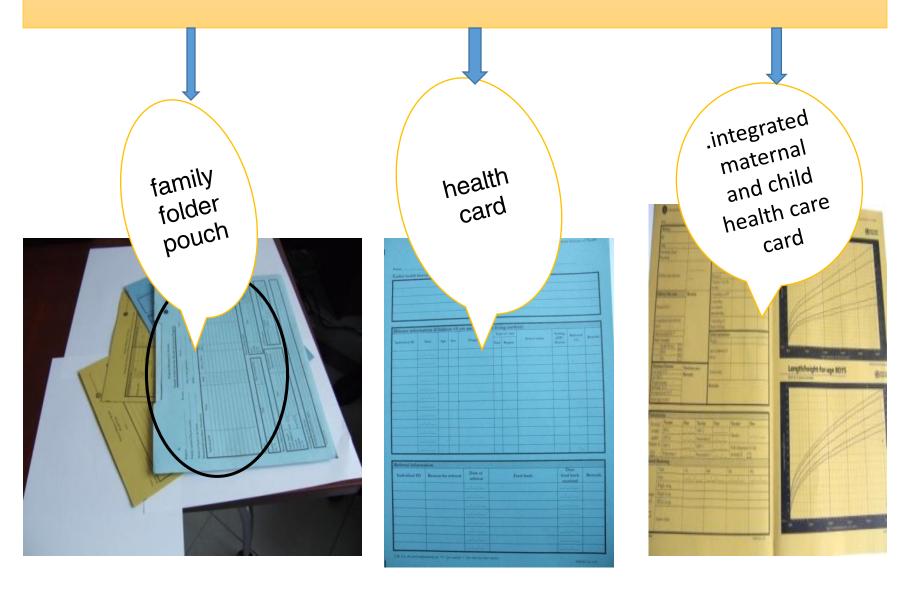


- 2. Take all common recording and reporting tools of a health post, use hypothetical data and exercise on:
 - a. Kebele/Woreda profiling
 - b. Family/household health information recording tools
 - c. Tallies
 - d. Reporting formats

Family folder with respective Got arrangement



Family folder has the following tools



- Within the Family Folder,
 - Health cards
 - 1. Family health cards,
 - 2. Hygiene and sanitation card,
 - 3. Integrated communicable card,
 - Integrated maternal and child care card and
 - 5. Comprehensive integrated nutrition card
 - These tools are stored for recording disease information, preventive and promotive services to individual members of the household. 15

- 1) The Family Health Card: is issued for every HHs (for both male and female) and individuals becomes sick.
- It helps to record individuals case based information and used to document:
 - ✓ Individual's earlier health history,
 - ✓ Disease information

- 2) Hygiene and sanitation card: is used to record hygiene and sanitation of the household's:
 - Latrine,
 - drinking water management,
 - waste disposal management and
 - ✓ housing condition.

- 3) The Integrated Maternal and Child Care Card: is issued to every woman when she becomes pregnant. it is a longitudinal record used to document:
 - Pre-pregnancy status,
 - Pregnancy follow up,
 - Delivery
 - ✓ Post-delivery care of the mother
 - Immunization and growth monitoring of the child

- 4) Integrated communicable disease card: is used to record all the information related with the service provided for:
 - TB
 - Leprosy
 - HIV/AIDS
 - NTD screening

- 5) Comprehensive Integrated Nutrition card: is issued to children under 5 years. This card used to document:
 - Growth monitoring and promotion (GMP)
 - Time and age appropriate nutritional counseling
 - Nutritional screening and
 - Out patient therapeutic program (OTP) follow up

- The front page contains basic information of HHs which includes:
 - Community code,
 - List of HHs,
 - HH number,
 - Category of the HH, and
 - Status of the HH (active /inactive).
- These information helps the UHEP to identify health needs; and to ensure every family member receive needed health services.

- Community Code: Is a given code for the specific compound which consist of 5 to 12 HHs in the community folder
 - → e.g. Naming could be Gote1/G1, G2, G3: Ketena 01, 02, 03, ...
- □ The Community Code will be given according to the context of the town or city

NB: Addis Ababa uses Woreda as the smallest administration level

- Individual ID: In UHEP, unique identification number with digit sequentially assigned serial number given for every member of the household
- The last two digits assigned for the HH member by sequential numbering

- □ In UHEP the program implementation is primarily by categorizing the HHs based on service delivery needs and income level.
- □ The method of the prioritization is called Household Category.
- ☐ The household category is documented as IA, IIA, IIIA, IB, IIB, IIB, IC, IIC and IIIC.

- The community folder has a print page on the front sides for recording information on :
 - Community Identifier or code,
 - Household number,
 - Health risk or condition,
 - Households by their health category level and
 - Household status (active /inactive)

- Recording tools within the community folder includes:
 - 1) Family Register: family health information card
 - 2) Maternal and child Health Recording forms: documents:
 - Identification,
 - Assessment and referral of pregnant women,
 - Postnatal care services,
 - Family planning services and
 - Childhood illness management service

- 3) Chronic communicable disease screening and management recording forms: - is designed used to document:
 - HIV /AIDS counseling and testing,
 - ✓ ART follow up,
 - ✓ TB case identification and treatment follow-up and referral service being provided at community level.

- 4) Non Communicable Disease screening form: It is designed to collect on
 - Diet and physical activity,
 - Tobacco use and alcohol consumption
 - Data on physical measurements such as:
 - Blood pressure and
 - Anthropometric measurements

	Rural	Urban
Kebele profiling formats	a. Kebele demographic profileb. Kebele resource mappingc. Kebele household environmental sanitation profile	 a. Kebele/Woreda demographic profile b. Kebele/Woreda resource mapping c. Kebele/Woreda household environmental sanitation profile

Rural	Urban
a. Family folder b. Health card • Family health card • Integrated Maternal and Child Care card • Hygiene and sanitation card • Integrated communicable disease card • Comprehensive integrated nutrition card c. Master Family Index (MFI) d. Field Book	 a) Family Health Profile form b) Family Planning Service Recording Form c) ANC Identification and Recording Form d) Postnatal Service Recording Form e) Child Health and Nutrition Recording Form f) NCD screening and management forms g) ART follow up forms h) HIV/AIDS Counseling and Testing form i) Referral Register j) Referral and Feedback Slip k) TB Screening and Treatment follow up form l) Community Health Education Register m) Field Book

	Rural	Urban
Tallies	a. Service delivery tally	a. UHEP monthly disease and service
	b. Disease information tally	delivery tally
	c. Tracer drug availability tallyd. Family planning method	b. UHEP quarterly disease and service
		delivery tally
	dispensed count	c. Urban HEP annual disease and service
		delivery tally
		d. Tracer drug availability tally
		e. Family planning method dispensed
		count

	Rural	Urban
Reporting formats	a. Monthly service delivery reportsb. Quarterly service delivery reportsc. Quarterly disease reportsd. Annual reports	a. Monthly service delivery andDisease report formatsb. Quarterly Service Delivery report formatsc. Annual report format

Pastoralist CHIS:

- The Health Extension Packages are all the same with rural HEP
- The difference is only on record keeping.
- Health Extension Workers in Pastoralist community don't use family/community folders
- Instead they use integrated registers. This is because of the mobile life style of the community.

Overview of eCHIS

- The glob has been radically transformed by digital technology and transformed daily lives
- Health is an information-rich enterprise.
- A seamless flow of information within a digital health care improves efficiency, quality and equity in health care.
- Electronic based Community Health Information System (eCHIS) is the first step to transform primary health care under CHIS.

Overview of eCHIS

- The benefits of eCHIS include:
 - Improves health care provision of the HEW
 - Facilitates informed-decision making
 - Significantly Reduce errors for producing periodic reports
 - The space saving benefit of a digital records environment

eCHIS in Ethiopia



In Ethiopia, e-CHIS is under piloting

Modules of eCHIS

eCHIS comprises of all modules included in the health extension Package.



