

Highlights from Ethiopia, Bangladesh, and Global Efforts

# Pathfinder's Legacy of Sustainable Health Systems Strengthening



## Summary

Pathfinder envisions strong, inclusive, resilient health systems that ensure and integrate coverage, access, and use of quality, person-centered sexual and reproductive health and rights (SRHR) services into universal health coverage (UHC). **This brief highlights the legacies of four Pathfinder projects that supported sustainable health systems strengthening (HSS) around the world.**

These snapshots describe Pathfinder's strategic efforts across the world to advance the following:

- **Rights, agency, and choice** among individuals and communities, particularly women, girls, and other historically marginalized persons and groups;
- **Universal access to diverse, responsive points of care** at all levels of the health system—from community to facility to district to tertiary—for a minimum package of quality essential health services;
- **Health system resilience and readiness** to withstand shocks and stressors from climate, conflict, pandemics, and other emergencies, throughout a cycle of preparation, adaptation, and recovery;
- An **enabling policy and social environment** in which these individual-, community-, facility-, and system-level ideals can be achieved; and
- **Continuous monitoring and measurement** of the impact and longevity of HSS interventions to inform iterative adaptation, replication, and sustained scale-up of nationally-led successful programs.

## Overview

Pathfinder works through lasting, trusted local partnerships, supporting nationally led and coordinated investments and gender-transformative strategies to measurably and sustainably improve health-system performance so that all people can access quality, equitable, affordable SRH services. In an unprecedented global context of overlapping crises—the COVID-19 pandemic, persistent epidemics, conflict- and climate-related emergencies, forced migration, and economic stress, the need for responsive, resilient health systems has never been greater, and building functional synergy among HSS, primary health care, UHC, and global health security efforts has never been more important.

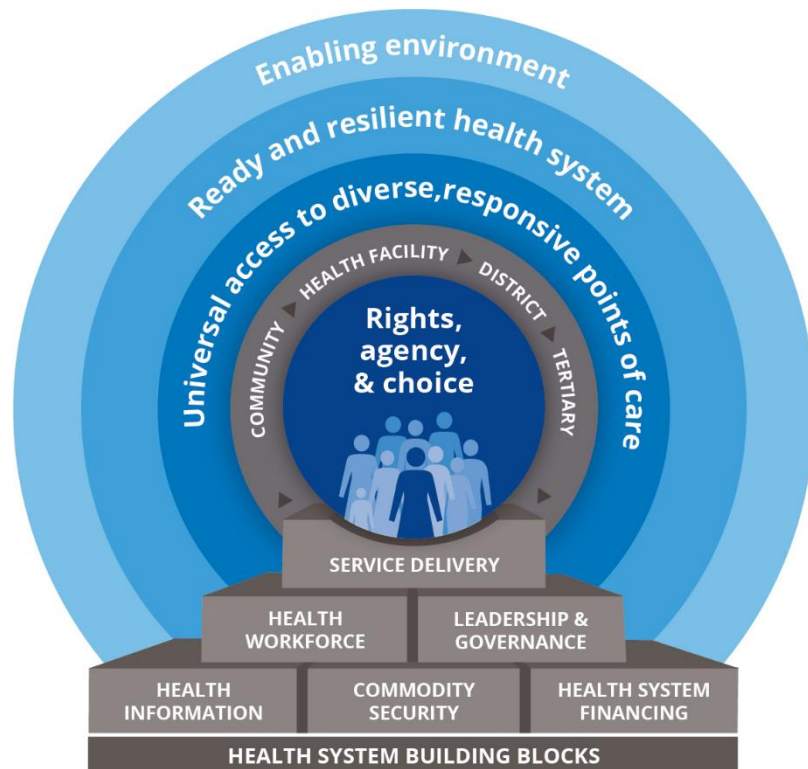
For decades, Pathfinder has been a global leader in SRHR, partnering with governments and other national actors in more than 70 countries to strengthen access to and use of quality, equitable, integrated, gender-responsive SRHR information and services. By working within, rather than parallel to, health systems, our programs ensure that local and national partners can support and sustain positive social norms, essential health system functions, and continuous quality improvement in service delivery that lasts well beyond our direct engagement.

## Advancing Outcomes for People, Communities, and Health Systems

Recognizing the complex, multisectoral, dynamic nature of health systems in today's global context, Pathfinder expands on the six World Health Organization-defined health system building blocks, prioritizing four areas for advancement across the levels of the health system (community, facility, district, and tertiary):

1. Rights, agency, and choice among individuals and communities;
2. Universal access to diverse, responsive points of care for a minimum package of quality essential health services;
3. Health system resilience and readiness to withstand shocks and stressors throughout a cycle of preparation, adaptation, and recovery; and
4. An enabling environment in which these individual-, community-, facility-, and system-level ideals can be achieved.

### Pathfinder's Approach to Sustainable Health Systems Strengthening



## Sustainability

Continued evolution and advancement of progress beyond project funding requires meaningful early and ongoing collaboration, use of incentives, and other mechanisms to perpetuate deep commitment across the partner spectrum. Pathfinder designs evidence-based strategies and activities that pragmatically address essential cross-cutting dimensions of sustainability: equity, quality, motivation, evidence-based planning, adaptive management, resource optimization, and resilience-building.

Following are snapshots of four Pathfinder projects—**Act With Her**, **Shukhi Jibon**, **Transform: Primary Health Care**, and **Evidence to Action**—highlighting particular interventions within each project that worked to address each of the four priority areas for HSS.

## Act With Her: Advancing Rights, Agency, and Choice



Pathfinder’s Act With Her (AWH, 2017-present) is a panoramic program model—launched in Ethiopia and expanded to Jordan in 2021—that partners with adolescent girls to lay the health, education, economic, and social foundations they need to thrive during the transition to adulthood. With funding from the Bill & Melinda Gates Foundation, AWH supports girls during a crucial life stage when many confront disruptors of future wellbeing, such as child, early, and forced marriage (CEFM); pregnancy; and school dropout. AWH expands the girls’ empowerment program Her Spaces by engaging boys and connecting with parents, caregivers, and communities to ensure support for girls from peers, partners, families, and influential allies. AWH worked to **advance the rights, agency, and choice**

of more than 50,000 Ethiopian adolescents in Afar, Amhara, Oromia, and the Southern Nations, Nationalities, and Peoples regions by scaling up Her Spaces while using prospective research to assess the value of the expanded AWH version. Several AWH local HSS activities enhanced services and support for youth:

- Multi-stakeholder, cross-sector governance
- Social accountability via community score cards
- Gender- and age-sensitivity training to strengthen the health workforce
- Implementation of national School Health and Nutrition Package
- Improved menstrual health and hygiene management in schools
- “Roll Back Early Marriage” clubs
- Strengthened youth-friendly service delivery

### **AWH’s sustainability strategies included early cross-sectoral, multilevel government engagement.**

This exposure to AWH helped stakeholders recognize its impact and motivated them to pilot a government-led and -financed expansion in three regions. In 2022, Pathfinder supported these stakeholders to develop cross-sectoral plans and budgets to implement AWH. We also supported the government to train project staff and volunteers on the AWH approach; the government led implementation and monitoring with minimal technical assistance from Pathfinder.

### **Highlight: Program Impact**

A [randomized controlled trial](#) by the UK Aid-funded Gender & Adolescence: Global Evidence research consortium examined program impact in rural zones of two implementation regions.

- At the short- (adolescents’ graduation from AWH) & medium-term (end of community social norms and systems-strengthening work), **girls in AWH communities had significantly higher levels of voice & agency than girls in control areas.** AWH communities in one region still had higher voice & agency than control communities 15 months after project end.
- Girls in AWH communities in one region reported **lower levels of mental distress** compared to control communities in the short-, medium, & long-term, while adolescents in one region did not report distress differently from the control communities.
- Across both regions & over time, AWH communities saw more positive impacts than those implementing Her Space alone, signaling the **importance of engaging boys, parents, & communities to improve the lives of girls.**

## Shukhi Jibon: Advancing Universal Access to Care



The Pathfinder-led USAID Accelerating Universal Access to Family Planning Project (2018-2023), locally known as Shukhi Jibon, partners with the government of Bangladesh’s (GOB) Ministry of Health and Family Welfare to strengthen health systems by providing adaptive, need-driven technical assistance. Shukhi Jibon aims to reduce inequities and reach those most in need of family planning (FP), supporting the GOB to reach 14.7 million couples and 1.2 million AY in the Chattogram, Dhaka, Mymensingh, and

Sylhet divisions with gender-integrated SRHR information and services.

In Bangladesh, 35% of deliveries occur at home, and 39% of mothers receive no postnatal care<sup>1</sup>, yet national operational plans primarily focus on providing postpartum FP (PPFP) at facilities. In its effort to **advance universal access to care**, Shukhi Jibon sought to close this gap. The project supported [provision of community-based PPFP and postabortion care FP \(PAC-FP\)](#) through community health worker registration of pregnant women using a government-approved form; delivery of PPFP and PAC-FP messages, short-acting methods, and referrals for long-acting methods to women who deliver at home or have undergone menstrual regulation or miscarriage; and strengthening of the referral system for women who receive PAC at facilities and desire FP.

### Shukhi Jibon employed innovative service delivery, health workforce, health management information system (HMIS), and governance strategies to ensure success and sustainability:

- Increased coordination between the Directorate General of FP and the Directorate General of Health Services (DGHS) through biweekly community-level meetings;
- Integrated mentorship and supervision to enhance community- and facility-based providers’ PPFP and PAC-FP counseling and service delivery skills;
- Improved pregnancy registration to ensure new and expectant mothers receive a full range of services;
- Strengthened record-keeping, facility readiness, and commodity security, improving the capacity of local managers for data-driven decision making;
- Engaged men, local leaders, and DGHS staff to raise community awareness;
- Integrated FP and immunization outreach services to diversify points of care; and
- Implemented community-level task sharing between FP and health service providers.

#### Highlight: Program Impact

- 42%** increase in PPFP counseling during antenatal care visits
- 32%** increase in PPFP counseling during postnatal care visits
- 39%** increase in progestin-only pill uptake
- 64%** increase in implant uptake
- 161%** increase in vasectomy uptake
- 84%** increase in IUD uptake
- 72%** mentees reported improved PPFP counseling skills & **66%** reported improved postpartum IUD insertion skills

<sup>1</sup> “Bangladesh Demographic and Health Survey 2022: Key Indicators Report.” Dhaka, Bangladesh and Rockville, MD, US: National Institute of Population Research and Training (NIPORT) and ICF, 2023.

## Transform: Primary Health Care: Advancing a Ready and Resilient Health System



The [Pathfinder-led USAID: Transform Primary Health Care Activity \(2017-2022\)](#) worked with the Government of Ethiopia (GOE) and partners to prevent maternal and child deaths by strengthening Ethiopia’s health systems, enhancing their capacity to deliver integrated quality care, in alignment with the National Healthcare Quality and Safety Strategy. Transform supported the strengthening of woreda-level health system management and performance; institutionalized evidence-based participatory planning; supported

the delivery of sustainable, quality services through innovative channels; promoted household and community health practices and health-seeking behaviors; and facilitated program learning to improve leadership and governance and policies aimed at preventing maternal and child mortality.

To overcome the challenging lack of quality data from its routine HMIS, the Ethiopian Ministry of Health introduced the connected woreda strategy (CWS), a locally developed HMIS performance-monitoring tool. In its effort to **advance a ready and resilient health system**, the Activity supported implementation of the CWS in selected districts to improve HMIS capacity, data quality, and information-use culture. The following strategies helped improve data quality, strengthening health-system capability of data-informed planning at all levels:

- Facilitating an inventory of HMIS resources, identifying gaps, and providing technical and financial support to improve HMIS systems;
- Providing technical support for implementation of HMIS at points of care; and
- Promoting use of HMIS at the community level, including improving the HMIS governance system at health posts by strengthening the capacity of health information technicians.

### Highlight: Program Impact

**56%** of woreda health offices implemented the CWS in 2021, up from **19%** in 2019

**908** health professionals, health managers, & health information technicians trained on use of data for decision making, District Health Information System 2 (DHIS2), & HMIS

**3,486** health managers, FP providers, & logistics officers trained in evidence-based participatory planning & local resource mobilization for FP & SRHR services using routine health service data

**80** public-sector staff trained in operations research

### Higher quality data enhanced the sustainability of Transform initiatives by strengthening program learning to influence policy and programs.

The Activity’s work to improve data quality, generate evidence, and document learnings continues to guide development of policies and programs. This data and evidence is helping to bridge gaps among research, policy, and practice by enabling evidence-based participatory planning that ensures that Ethiopia’s health system is efficient and adaptive in serving all, even when faced with shocks and stressors.

## Evidence to Action: Advancing an Enabling Environment



The global, \$290 million Pathfinder-led USAID [Evidence to Action \(E2A, 2011-2021\)](#) project worked to strengthen FP and SRHR service delivery in 17 countries. E2A addressed the FP and SRHR needs of girls, women, and underserved communities by increasing support, building evidence, and facilitating the scale-up of high-impact practices that can transform the health of families, communities, and nations. E2A advanced quality services that have improved SRHR and contributed to reductions in unintended pregnancies

and gender disparities. As a result, today, more women and girls can make—and act on—informed decisions that ensure the healthiest outcomes for themselves and their families.

One of many ways E2A **advanced an enabling environment** was the [Tool for Adolescent and Youth SRH \(AYSRH\)-Responsive Planning \(TARP\)](#). E2A's user-friendly digital tool enabled young people to have an impact at scale, amplifying their voices and facilitating meaningful participation in national planning and policy development. Between 2018 and 2021, young people in Burkina Faso, the Democratic Republic of Congo, Kenya, Niger, Rwanda, Senegal, and Togo, used the TARP, joining staff from ministries of health and implementing partners to analyze FP and SRHR plans and budgets to determine their responsibility to young people. TARP workshops created opportunities for young people to develop relationships with decision makers, directly engage in policy and planning, generate sharable evidence, and build knowledge and confidence—actions that directly strengthened meaningful youth participation, political will, policies, and AYSRH.

### Highlight: Accelerating a global shift to AYSRHR-responsive systems

E2A's **Thinking Outside the Separate Space (TOSS)** is a global AYSRH-responsive decision-making tool. TOSS guides program designers (governments, NGO staff, donors, & others) to develop a model that is highly adapted, contextualized, & appropriate for the specific systems & needs of diverse populations of young people in their country. TOSS helps users evaluate the desired health & behavioral outcomes, planned package of AYSRHR services, & available resources to formulate the most effective model for the context.

**E2A's sustainability strategy centered on leveraging and building strategic partnerships with governments, networks, and organizations such as the West African Health Organization, Ouagadougou Partnership, and Family Planning 2020.** These relationships extended the reach of our work; enhanced country- and regional level policy, service delivery, and resource mobilization; and built global and regional influence and leadership in FP and SRHR. Leveraging these partnerships for TARP workshops ensured that key collaborators like the Ouagadougou Partnership and Family Planning 2030 would take ownership of regional and global promotion and use of the TARP beyond the life of the project.

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#### **Contributors**

*Mahbub Alam, Country Director, Bangladesh*

*Dr. Mengistu Asnake, Senior Country Director, Ethiopia*

*Rita Badiani, Director, Multi-country Projects Unit*

*Courtney Boudreau, Senior Global Monitoring, Evaluation, and Learning Manager*

*Bruce Campbell, Senior Global Advisor, Health Systems Strengthening and Sustainability*

*Elizabeth Futrell, Senior Global Technical Writer*

*Kendra Hebert, Program Design Advisor*

*Marufa Khan, Knowledge Management and Learning Manager, Bangladesh*

*Matthew Nviiri, Senior Program Design Advisor*

#### **Photo captions and credits**

*Cover: Hasna Begum receives maternal health care at Kandirgaon Union Health & Family Welfare Center in Mollargaon, Sylhet, Bangladesh. Photo: Hafiz Shishir for Pathfinder International, 2018*

*Act With Her: Tricia Petruney for Pathfinder International, 2020*

*Transform: Bizuayehu Esubalew, 26, midwifery with Asayech Belay, 18, at maternity ward in Kidamaja Health center, Banja woreda, Agew Awi zone, Amhara region, Ethiopia. Photo: Genaye Eshetu for Pathfinder International, 2021*

*Shukhi Jibon: Community Based PPFPP Counselling Session at Jalalabad, Sylhet. Photo: Ridwanul Mosrur for Pathfinder International, 2020*

*E2A: E2A participation at the 2018 International Conference on Family Planning. Photo: Maren Vespa for Pathfinder International, 2018*

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