## Challenge Facility for Civil Society



# Volunteer **Health Services**

Ethiopia

**Grantee Profile** 

#### Organization

Volunteer Health Services (VHS)

Where we work

**Ethiopia** 

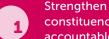


#### **About VHS**

Volunteer Health Services (VHS), formerly known as the Ethiopian Drug Information Network, was founded in April 2010 by Mr. Endalkachew Fekadu and Mr. Million Kebede. We're pharmacists, one of us is a former MDR-TB patient and together we anticipated the need for treatment support and health education at a national level in order to support patients. Our goal is to provide continued professional treatment support for patients and to promote treatment adherence by creating a network of volunteer treatment support groups that offer a place to explore the emotional and practical issues of living with infectious diseases, specifically for patients who need comprehensive treatment and care in a safe and nurturing environment.



#### **Objectives of Round 7**



Strengthen existing or new national level TB constituencies that engage, represent and are accountable to communities.



Reinforce the capacities & responses of local communities who are part of the TB response.



Tighten linkages, collaboration and coordination between communities and government.

VHS is strictly a volunteer organization with no permanent facilities or staff, but to accommodate its growing volunteer membership base and staff, we moved to our current headquarters. In 2014, during its official opening, we celebrated the milestone of more than 8,000 professional and student members across the country.

#### TB in Ethiopia

Ethiopia experiences a heavy burden of TB, mainly attributed to communicable infectious diseases and nutritional deficiencies. Ethiopia is ranked 7th out of the 22 highest TB burden countries in the world. Despite a strong and tightly-controlled TB programme managed by the Federal Ministry of Health, there are still hundreds of reported cases every year. In 2015, the TB Bulletin published by the Federal Ministry of Health showed a total of 134, 343 TB incidence, among which 17.8% were multi-drug resistant TB (MDR-TB) cases among previously treated cases. There is also 5, 291 presumptive MDR-TB cases identified in a single year.

Challenges facing communities in Ethiopia in the TB response

The burden of TB in Ethiopia raises many questions on how best to address issues surrounding access, equity, quality of healthcare, service delivery mechanisms and the strengthening of health systems. The high demands for TB related care and support exceed the resource capacities in many developing countries' health systems including in Ethiopia which directly affects patients and communities. Civil society organizations, and especially patients, increasingly recognize the need to engage in the TB response more effectively.

However engaging TB communities can be challenging due to several reasons; prioritization is institutional or agency-based, i.e. not community-based, there is no structures, platforms, processes or trainings to strengthen community responses and our meaningful engagement, community members lack knowledge, resources and the skills needed for stronger and more efficient community engagement, and weak ties among TB constituents of different social-economic backgrounds creates barriers for collaborative action.



Since VHS alone cannot respond to all the needs of TB communities, the need to promote community contributions to TB care as part of National TB Programme (NTP) activities is particularly urgent in Ethiopia, where increasing TB cases are outstripping the ability of government health service providers, including the health extension workers to cope.

## The Challenge Facility for Civil Society in Ethiopia

In order to maximize the meaningful engagement of TB constituents, VHS through the support of the Stop TB Partnership's Challenge Facility for Civil Society grant will; identify the key TB community constituents in Ethiopia to establish possible networking opportunities and collaboration opportunities between rural and urban populations, across genders, among low-income populations, prisoners, among other key and vulnerable populations in TB, assess opportunities and challenges for TB community engagement in all aspects of TB prevention and care, explore the possible ways of cooperation between government stakeholders and civil society organizations, and explore possible ways to establish and contribute to the development of national TB strategic plans, program reviews, priorities and projects.

The Challenge Facility for Civil Society Grant in Ethiopia will be implemented in two phases:

- Phase I: VHS will undertake a resource mapping exercise to identify existing resources, coverage gaps, and perspectives of stakeholders about the quality of existing services.
- Phase II: VHS will collaborate with existing resources to identify key TB-related issues to bring to the national level, develop plans to fill the coverage gaps, and reassess the perspectives of the stakeholders about the quality of the newly developed network.

### Get involved!

If you are a community or civil society organization or patient group (those working on TB or interested in working on TB) in Ethiopia and want to engage in the Challenge Facility for Civil Society work in Ethiopia please contact ENDALKACHEW FEKADU: contact@vhsi.org or enda.pharm@gmail.com

For more information about VHS please visit: www.vhsi.org



