

附 属 資 料

General Strategies of the National Health Policy

Five-year EPI-Plus Strategic Plan, Ethiopia, 1996-97 to 2000-01

1998 SURVEILLANCE PLAN OF ACTION ETHIOPIA

1998 NID'S PLAN OF ACTION

Interim Report by the Fact Finding Study Team on Population and Health
(調査団暫定報告書)

① General Strategies of the National Health Policy

General Strategies of the National Health Policy

1. **Democratization** within the system shall be implemented by establishing health councils with strong community representation at all levels and health committees at grass-root levels to participate in identifying major health problems, budgeting, planning, implementation, monitoring and evaluating health activities.
2. **Decentralization** shall be realized through transfer of the major parts of decision-making, health care organization, capacity building, planning, implementation and monitoring to the regions with clear definition of roles.
3. **Intersectoral collaboration** shall be emphasized particularly in:
 - 3.1 Enriching the concept and intensifying the practice of family planning for optimal family health and planned population dynamics.
 - 3.2 Formulating and implementing an appropriate food and nutrition policy.
 - 3.3 Accelerating the provision of safe and adequate water for urban and rural populations.
 - 3.4 Developing safe disposal of human, household, agricultural, and industrial wastes, and encouragement of recycling.
 - 3.5 Developing measures to improve the quality of housing and work premises for health.
 - 3.6 Participating in the development of community-based facilities for the care of the physically and mentally disabled, the abandoned, street children and the aged.
 - 3.7 Participating in the development of day-care centres in factories and enterprises, school health and nutrition programs.
 - 3.8 Undertakings in disaster management, agriculture, education, communication, transportation, expansion of employment opportunities and development of other social services.
 - 3.9 Developing facilities for workers' health and safety in production sectors.
4. **Health education** shall be strengthened generally and for specific target populations through the mass media, community leaders, religious and cultural leaders, professional associations, schools and other social organizations for:
 - 4.1 Inculcating attitudes of responsibility for self-care in health and assurance of safe environment.
 - 4.2 Encouraging the awareness and development of health promotive life-styles and attention to personal hygiene and health environment.
 - 4.3 Enhancing awareness of common communicable and nutritional diseases and the means for their prevention.
 - 4.4 Inculcating attitudes of participation in community health development.
 - 4.5 Identifying and discouraging harmful traditional practices while encouraging their beneficial aspects.
 - 4.6 Discouraging the acquisition of harmful habits such as cigarette smoking, alcohol consumption, drug abuse and irresponsible sexual behaviour.
 - 4.7 Creating awareness in the population about the rational use of drugs.
5. **Promotive and Preventive activities** shall address:
 - 5.1 Control of common endemic and epidemic communicable and nutritional diseases using appropriate general and specific measures.
 - 5.2 Prevention of diseases related to affluence and aging from emerging as major health problems.
 - 5.3 Prevention of environmental pollution with hazardous chemical wastes.
6. **Human Resource Development** shall focus on:
 - 6.1 Developing of the team approach to health care.
 - 6.2 Training of community based task-oriented frontline and middle level health workers of appropriate professional standards; and recruitment and training of these categories at regional and local levels.

- 6.3 Training of trainers, managerial and supportive categories with appropriate orientation to the health service objectives.
 - 6.4 Developing of appropriate continuing education for all categories of workers in the health sector
 - 6.5 Developing an attractive career structure, remuneration and incentives for all categories of workers within their respective systems of employment.
7. **Availability of Drugs, Supplies and Equipment** shall be assured by:
- 7.1 Preparing lists of essential and standard drugs and equipment for all levels of the health service system and continuously updating such lists.
 - 7.2 Encouraging national production capability of drugs, vaccines, supplies and equipment by giving appropriate incentives to firms which are engaged in manufacture, research and development.
 - 7.3 Developing a standardized and efficient system for procurement, distribution, storage and utilization of the products.
 - 7.4 Developing quality control capability to assure efficacy and safety of products.
 - 7.5 Developing maintenance and repair facilities for equipment.
8. **Traditional Medicine** shall be accorded appropriate attention by:
- 8.1 Identifying and encouraging utilization of its beneficial aspects.
 - 8.2 Co-ordinating and encouraging research including its linkage with modern medicine.
 - 8.3 Developing appropriate regulation and registration for its practice.
9. **Health Systems Research** shall be given due emphasis by:
- 9.1 Identifying priority areas for research in health.
 - 9.2 Expanding applied research on major health problems and health service systems.
 - 9.3 Strengthening the research capabilities of national institutions and scientists in collaboration with responsible agencies.
 - 9.4 Developing appropriate measures to assure strict observance of ethical principles in research.
10. **Family Health Services** shall be promoted by:
- 10.1 Assuring adequate maternal health care and referral facilities for high risk pregnancies.
 - 10.2 Intensifying family planning for the optimal health of the mother, child and family.
 - 10.3 Inculcating principles of appropriate maternal nutrition.
 - 10.4 Maintaining breast-feeding, and advocating home made preparation, production and availability of weaning foods at affordable prices.
 - 10.5 Expanding and strengthening immunization services, optimisation of access and utilization.
 - 10.6 Encouraging early utilization of available health care facilities for the management of common childhood diseases particularly diarrhoeal diseases and acute respiratory infections.
 - 10.7 Addressing the special health problems and related needs of adolescents.
 - 10.8 Encouraging paternal involvement in family health.
 - 10.9 Identifying and discouraging harmful traditional practices while encouraging their beneficial aspects.
11. **Referral System** shall be developed by:
- 11.1 Optimizing utilization of health care facilities at all levels.
 - 11.2 Improving accessibility of care according to need.
 - 11.3 Assuring continuity and improved quality of care at all levels.
 - 11.4 Rationalizing costs for health care seekers and providers for optimal utilization of health care facilities at all levels.
 - 11.5 Strengthening the communication within the health care system.
12. **Diagnostic and Supportive Services for Health Care** shall be developed by:
- 12.1 Strengthening the scientific and technical bases of health care.

- 12.2 Facilitating prompt diagnosis and treatment.
- 12.3 Providing guidance in continuing care.

13. Health Management Information System shall be organized by:

- 13.1 Making the system appropriate and relevant for decision making, planning, implementing, monitoring and evaluation.
- 13.2 Maximizing the utilization of information at all levels.
- 13.3 Developing central and regional information documentation centres.

14. Health Legislation shall be revised by:

- 14.1 Up-dating existing public health laws and regulations.
- 14.2 Developing new rules and regulations to help in the implementation of the current policy and addressing new health issues.
- 14.3 Strengthening mechanisms for implementation of the health laws and regulations.

15. Health Service Organization shall be systematized and rationalized by:

- 15.1 Standardizing the human resource, physical facilities and operational systems of the health units at all levels.
- 15.2 Defining and instituting the catchment areas of health units and referral systems based on assessment of pertinent factors.
- 15.3 Regulating private health care and professional deployment by appropriate licensing.

16. Administration and Management of the health system shall be strengthened and made more effective and efficient by:

- 16.1 Restructuring and organizing at all levels in line with the present policy of decentralization and democratization of decision making and management.
- 16.2 Combining departments and services which are closely related and rationalizing the utilization of human and material resources.
- 16.3 Studying the possibility of designating undersecretaries to ensure continuity of service.
- 16.4 Creating management boards for national hospitals, institutions and organizations.
- 16.5 Allowing health institutions to utilize their income to improve their services.
- 16.6 Ensuring placement of appropriately qualified and motivated personnel at all levels.

17. Financing the Health Services shall be through public, private and international sources and the following options shall be considered and evaluated.

- 17.1 Raising taxes and revenues.
- 17.2 Formal contributions or insurance by public employees.
- 17.3 Legislative requirements of a contributory health fund for employees of the private sector.
- 17.4 Individual or group health insurance.
- 17.5 Voluntary contributions.