



REACH: Reach, Expand and Access Community Health

Profile & Lessons

Enhancing Integrated Health Service for Sustainable and Scalable Impact

About Amref Health Africa

Amref Health Africa is the largest African-based and led international health development organization serving over 30 million people annually across 35 countries in sub-Saharan Africa. Strategically engaging with communities, governments, and local partners for the past 65 years, we work through our European and North American network of sister organizations on program implementation, advocacy, fundraising and partnership. Our subsidiaries include Amref Flying Doctors, Amref Enterprises Limited, and the Amref International University.

Our organization is driven by its vision to bring lasting health change in Africa and its mission to catalyze and drive community-led and people-centered health systems while addressing social determinants of health.

Amref has been active in Ethiopia since the 1960s and became fully operational as of 2002. We have been partnering with the Ethiopian government and local communities to co-create solutions and implement diverse health and development project portfolios throughout the country for over twenty-two years, serving women and children, reaching the most disadvantaged, inaccessible communities including pastoralist communities and placing an emphasis on youth development.

Our programs are designed to support community level interventions while strengthening health systems at the regional and national levels.

Our Program Focus Areas

- **Reproductive, Maternal, Neonatal, Child, Adolescent & Youth Health and Nutrition**
- **Health Systems Strengthening**
- **Youth Development**
- **Water, Sanitation and Hygiene**
- **Disease Prevention and Control**

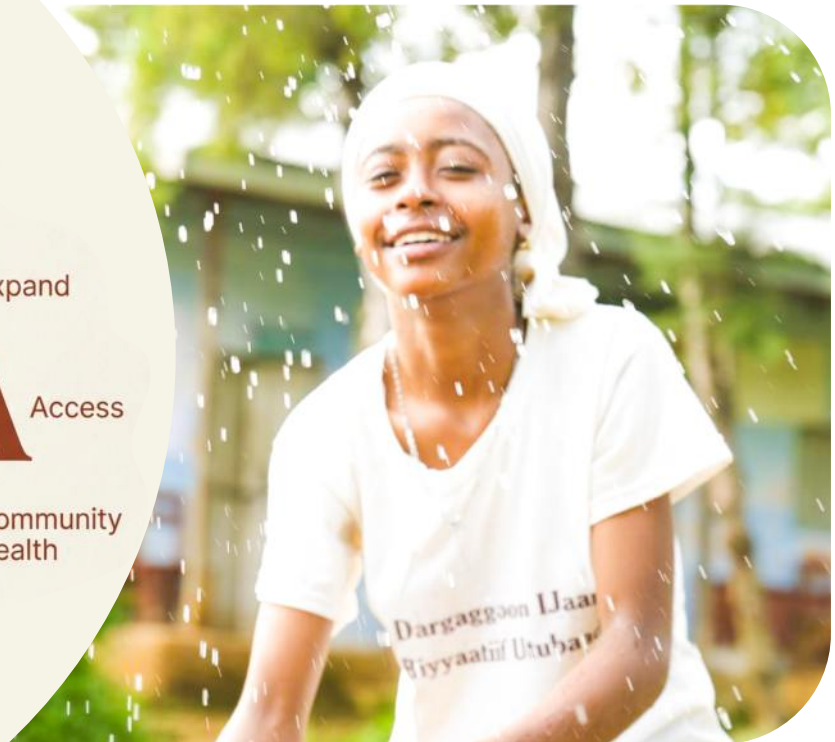
We implement projects in 10 regional states and two city administrations.

Reach, Expand and Access Community Health

Reach, Expand and Access Community Health (REACH) is an integrated Sexual & Reproductive Health (SRH), Menstrual Hygiene Management (MHM), and Water, Sanitation and Hygiene (WASH) and Nutrition project.

Implemented by a consortium of Engender Health Ethiopia (lead) and Amref Health Africa in Jimma and Borena zones of Oromia Region, the project works to ensure women and young people have access to integrated health and WASH services.

With financial resources from the Embassy of the Kingdom of the Netherlands, REACH project mainly targets women and young people.



Project Strategies

Integrated Programming: Promote integrated SRH, WASH, MHM, and nutrition services to improve access, quality, and responsiveness to adolescent, youth, and maternal health needs.

Systems Strengthening: Enhance adolescent, youth, and maternal health, WASH, MHM, and nutrition outcomes through capacity building, technical assistance, and private sector engagement, as well as training initiatives for health providers, facilitators, and community workers to ensure local ownership and sustainability.

Gender, Youth & Social Inclusion (GYSI): Strategically embed GYSI across all interventions to promote inclusion, sustainability, and support gender and social equity at all levels.

Social and Behavior Change Mechanisms: Promote healthy behaviors and empower communities to actively improve their health outcomes through tailored SBC mechanisms at individual and community level.

Health Innovation: Leverage digital technologies and health innovations to strengthen capacity building and reinforce positive health-seeking behaviors.

Meaningful Youth Participation (MYP): Promote inclusivity and Meaningful Youth Participation by empowering young people to actively advocate for adolescent and youth health, meet their needs, and serve as catalysts for change in Adolescent, Youth and Maternal Health services.

Linkage and collaboration: Strengthen linkages and collaboration with public offices, professional associations, and ongoing projects in the implementation area, while integrating cross-cutting socioecological strategies at individual, community, and system levels to guide project interventions.



Project Objectives



Create demand and enhance utilization of SRHR, MHM, WASH and Nutrition services



Improve schools and the surrounding community's support for women and young people to demand and use integrated SRH, MHM, WASH and Nutrition services



Ensure the availability of high-quality integrated SRH, MHM, WASH and Nutrition services, products and infrastructures to schools, and households in the surrounding communities



Enhance enabling environment, learning

Expected Outcomes

- **62,802** Clients with confirmed referral for Adolescent, Youth and Maternal Health service utilization and counseling.
- **205,600** People have access to safe water supply.
- **96,200** People have access to improved and inclusive sanitation facilities in their community and school.

Amref Health Africa - REACH Key Achievements to-date



67,187
Confirmed
Referrals



12,003 Improved
household sanitation facilities'
construction facilitated



195,019
People Accessed safe
water supply



149,275
People Accessed
improved and inclusive
sanitation facilities



80 Schools
and surrounding
communities accessed
safe water supply



71 Schools
accessed improved
and inclusive
Sanitation services



34 Schools
accessed menstrual
hygiene management
safe space

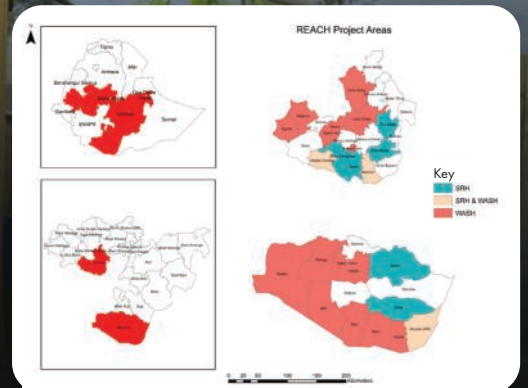
Amref Health Africa – REACH Sites

Jimma

13 districts
40 health centers
124 health posts
152 schools
12 private clinics

Borena

10 districts
11 health centers
34 health posts
34 schools
3 private clinics



Key Learnings

MBS

Sanitation Entrepreneurship

Resource Leverage

Integrated Water Resource Management

Public-Private Mix

Market-Based Sanitation

Only 20% of Ethiopian households have access to improved sanitation, while 56% use unimproved facilities and 27% practice open defecation (Mini EDHS, 2019). To address this gap, the Government of Ethiopia introduced Market Based Sanitation (MBS) approach as a sustainable and scalable solution. Although MBS is promoted nationally, implementation often lacks an integrated design that connects demand creation, supply chains, financing, and governance.

LESSONS

REACH project shows that MBS succeeds when communities, businesses, financial institutions, and government work together:

- ✓ **Communities** invest when benefits are clear and technologies are affordable
- ✓ **Local businesses** expand services when sanitation is positioned as a viable enterprise.
- ✓ **Financial institutions** reduce affordability gaps through microloans.
- ✓ **Government** leadership ensures coordination, standards, and sustainability.

ACHIEVEMENTS

12,000+

Improved household sanitation facilities' construction facilitated

ETB 15Million+

Sanitation microloans disbursed by financial institution

“ Our previous toilet was unstable and unhygienic. After attending sanitation marketing training, we built a clean and safe compost latrine using local materials. It has no odor, no flies, and is easy to maintain. This experience has inspired our neighbors to upgrade their facilities as well.

Mohammed and Sukare (Shebe District, Jimma)



Improved Household Sanitation Facility, Shebe district



Artisan on production of sanitation facility wall, Shebe district

| Sanitation Entrepreneurship: Empowering Local Masons

Sanitation construction was not widely recognized as a business, and limited skilled labor slowed progress. REACH project trained and supported local masons to transform sanitation into a livelihood opportunity while improving household and school WASH facilities.

ACHIEVEMENTS

- Masons earn about **ETB 2,500** per toilet, on average earning **ETB 25,000** per month.
- More than **250** masons and **1,000** assitants engaged in sanitation-related jobs through training, mentorship and assitant hiring.
- Construction costs reduced by **40%** using locally available materials, increasing affordability and demand.
- Strong collaboration with the health system strengthened sanitation uptake.

ETB 36 Million+

Generated by masons from improved household sanitation construction



Mason Abdo beside sanitation facility he constructed



I earn ETB 2,500 per toilet and made over ETB 25,000 in one month. The business supports my family's needs.

Abdo, Mason in Shebe District



Resource Leverage: Strengthening Ownership and Impact

WASH challenges in schools, health facilities, and surrounding communities could not be fully addressed through government or NGO resources alone. To bridge this gap, the REACH project introduced a strategy of leveraging financial and in-kind contributions from communities, schools, and government to enhance collective ownership and impact.

ACHIEVEMENTS

- Out of the **71** school latrines and **80** water schemes constructed, **35** school latrines and **10** water schemes serving health facilities and communities were delivered through leveraged support.
 - Approximately **ETB 30** million (finance and in-kind) mobilized from government, schools and communities
 - **41,741** and **30,177** people benefited from improved sanitation facilities and clean water supply access



School Sanitation Facility in Shebe District



The project introduced innovative, cost-effective designs that leveraged community contributions and improved our facilities.

Sultan, Director of Kishe School



Integrated Water Resource Management: Ensuring Groundwater Resilience

Integrated Water Resources Management (IWRM) is rarely applied comprehensively in water projects in Ethiopia. Many water projects focus on infrastructure development with less attention to catchment protection and groundwater recharge, leading to depletion of water source in areas such as Jimma and Borena.

REACH project integrated IWRM by combining infrastructure with:

- Climate-informed catchment planning/mapping and technical capacity building.
- Groundwater recharge measures such as contour bunds, trenches, check dams, gabions, terracing, and removal of high-water-demand eucalyptus trees around water source.

This integrated, climate-responsive approach strengthened groundwater recharge, improved coordination across sectors, and enhanced long-term water security for communities.



Terracing as part of IWRM



This is my first time discussing IWRM within water supply projects. There was previously no coordination with agriculture offices.

Regional Water Bureau representative

Public-Private Mix: Strengthening Sexual and Reproductive Health Service

Although Ethiopia adopted a Public–Private Mix (PPM) approach in 2020, weak reporting and limited coordination reduced the contribution of private clinics.

ACHIEVEMENTS

The project strengthened Sexual and Reproductive Health (SRH) services of 13 private clinics in Borena and Jimma by:

- Providing training on adolescent health, long acting family planning, and Comprehensive Abortion Care.
- Providing equipment and clinical guidelines.
- Ensuring contraceptive supply through the Government system.
- Introducing regular supportive supervision.

Private clinics transitioned from underutilized facilities to active SRH service providers.



After 17 years in practice, REACH project provided my first training on contraceptive and abortion care. Now I feel confident and provide long-acting methods to at least 15 clients per month.

Girma Ejeta, private clinic owner, Seka town



Meta Gefersa Health Center, Arero district



Mati Medium Private Clinic, Dedo district

REACH: Reach, Expand and Access Community Health Service

REACH project delivers a comprehensive, integrated health service model that improves outcomes for women and young people by strengthening access, quality, and community support systems to ensure equitable, sustainable, and scalable impact.

Enhancing Integrated Health Service for Sustainable and Scalable Impact

Amref Health Africa in Ethiopia
Office: +251 116 630 552
E-mail: info.ethiopia@amref.org
P.O.Box: 20855 Code 1000 Addis Ababa, Ethiopia

www.amref.org [f amrefethiopia](https://www.facebook.com/amrefethiopia) [t @amrefethiopia](https://twitter.com/amrefethiopia)



Ministry of Foreign Affairs of the
Netherlands



EngenderHealth

