



In Ethiopia, Last Mile Health is the government's leading partner for driving innovative community health worker training and support. We're building the skills of a workforce that employs more than 40,000 women.

The need: Ethiopia is the second most populous country in Africa. Over the past two decades, the government has improved health outcomes for women and children and built a stronger health workforce. Still, significant gaps remain in access to essential maternal and newborn care and routine immunization, especially in rural areas. Ethiopia also faces a growing burden of infectious and non-communicable diseases.

Our focus: Our work in Ethiopia focuses on building community health workers' skills and strengthening government supervision systems. Together with the Ministry of Health, we're transforming the way tens of thousands of community health workers receive training and on-the-job support. Our ultimate goal is to save lives by ensuring everyone at Ethiopia's last mile has access to quality primary care.

By the numbers

Our direct footprint: Last Mile Health has worked in Ethiopia since 2020. To date, we've directly supported **28,036** community and frontline health workers serving a population of more than **57.9 million** people.

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National program reach: Ethiopia has a total population of about 123.4 million people. Since 2004, the government has deployed more than **40,000 community health workers** nationally.

Program background

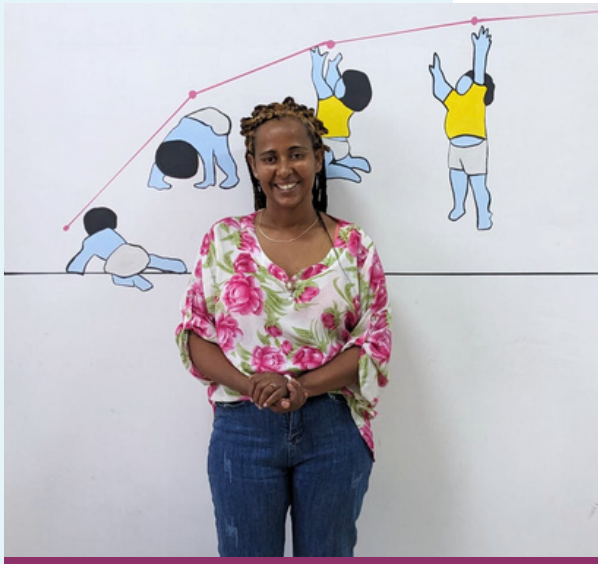
The government of Ethiopia has long been a leader in the community health movement. In 2004, they formalized a national community health program that now delivers lifesaving primary care to millions of people.

Last Mile Health began working in Ethiopia in 2020, when we were invited to support the government to develop a digital learning app for health workers responding to COVID-19. The app reached more than 21,000 learners, highlighting an opportunity to transform frontline health workers' training.

Since 2022, we've worked with the Ministry of Health to develop an innovative blended learning approach for community health worker training. This strategy improves knowledge and reduces costs by leveraging the best of both in-person and digital training methods. The first module covered the government's most urgent area of need: reproductive, maternal, neonatal, and child health.

Background (continued)

This module was so effective in improving learning outcomes and reducing costs that the Ministry of Health [formally committed](#) to making blended learning part of the national training strategy, which Last Mile Health is helping to scale. To build on the gains driven by blended learning, we began piloting AI-powered support for community health workers, equipping them with clinical guidance at the point of care.



Serkalem Getachew has served as a community health worker for 15 years. She delivers care in Legambo District in the Amhara Region.

By investing in our work, partners can help **incubate new solutions** to upskill the health workforce, reduce costs, and improve quality of care.

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Our current work in Ethiopia

Driving knowledge and skills gains with blended learning

For Ethiopia's community health workers, regular refresher training is crucial—and costly. Our blended learning approach **combines in-person training with digital self-learning** using Extension Essentials, a mobile app users can access at any time. Its success in driving learning gains while reducing costs led the Ministry to formally adopt this approach, and all training modules have been adapted. The approach is being scaled nationally, and more than **25,000 community health workers** have completed a module.

The blended approach promotes

- **Time efficiency**, reducing hours spent away from patients
- **Cost efficiency**, reducing cost per learner by 39%
- **Learning gains**, with 88% and 87% of learners receiving passing scores in post-training knowledge and skills assessments, respectively
- **Data-driven responsiveness**, leveraging data for quality assessment

Providing clinical support through artificial intelligence

Community health workers often face uncertainty on how to treat patients, and supervisors are unable to provide real-time support. This leads to unnecessary facility referrals and delays in proper treatment. To bridge this gap, we developed **HEP Assist, an AI-powered decision support tool** grounded in Ministry protocols. It provides clinical guidance in two modes: supervisor-moderated (where health center clinicians review AI recommendations) and direct use. HEP Assist now serves 289 health posts across seven regions, reaching a population of more than 1.5 million people. During initial implementation, the supervisor-moderated model alone supported **11,491 consultations**. 76% of community health workers reported increased clinical confidence.

HEP Assist promotes

- **Timely, protocol-aligned health guidance**
- **Fewer unnecessary referrals**
- **Improved quality of care for patients**
- **Stronger, more confident community health workers**

Addressing Ethiopia's leading cause of death: NCDs

To equip community health workers to address Ethiopia's leading cause of death, we supported the Ministry in developing a first-of-its-kind training in non-communicable diseases. The module prepares community health workers to treat and refer patients with non-communicable diseases like diabetes and hypertension. They also screen for vision problems including presbyopia. In remote communities, obtaining glasses requires travel and cost many can't afford. Now, patients can receive near-vision glasses in their own communities. This high-demand service opens the door to additional health services, strengthening patients' trust in community health workers.

Non-communicable disease care promotes

- **Life-saving treatment** for conditions like diabetes
- **Independence and agency** through restored health and vision
- **An entry point into the health system** via high-demand services