



The Federal Democratic Republic of Ethiopia
Ministry of Health



From MDGs to SDGs: Remaining challenges to implementation of Reproductive Health programmes in Ethiopia

March 21, 2017



Outline

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- Ethiopia's Commitments at the London Summit
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- HSTP targets for FP
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Introduction

- The Government of Ethiopia is committed to improve Reproductive Health situation of all people in the country.
- To materialize this, the government has formulated Health Sector Transformation Program (HSTP) that aligns with the five year National plan, the Growth and Transformation Plan (GTP-2).
- HSTP in relation to Reproductive Health mainly focuses on three key strategic issues: maternal and child health, family planning, and adolescent and youth reproductive health



Ethiopia's commitments at the London summit:

❖ **Making FP a priority development agenda across all sectors is one of the major commitments.**

Program & Service Delivery Commitments:

1. Ensure Family Planning Commodity Security
2. Increase uptake of long-acting reversible methods
3. Expand youth-friendly services, with a focus on adolescent girls
4. Scale up delivery of services to hardest to reach groups
5. Monitor availability of contraceptives

Financial Commitment:

6. Increase the budget allocation for FP annually



MDG Achievements

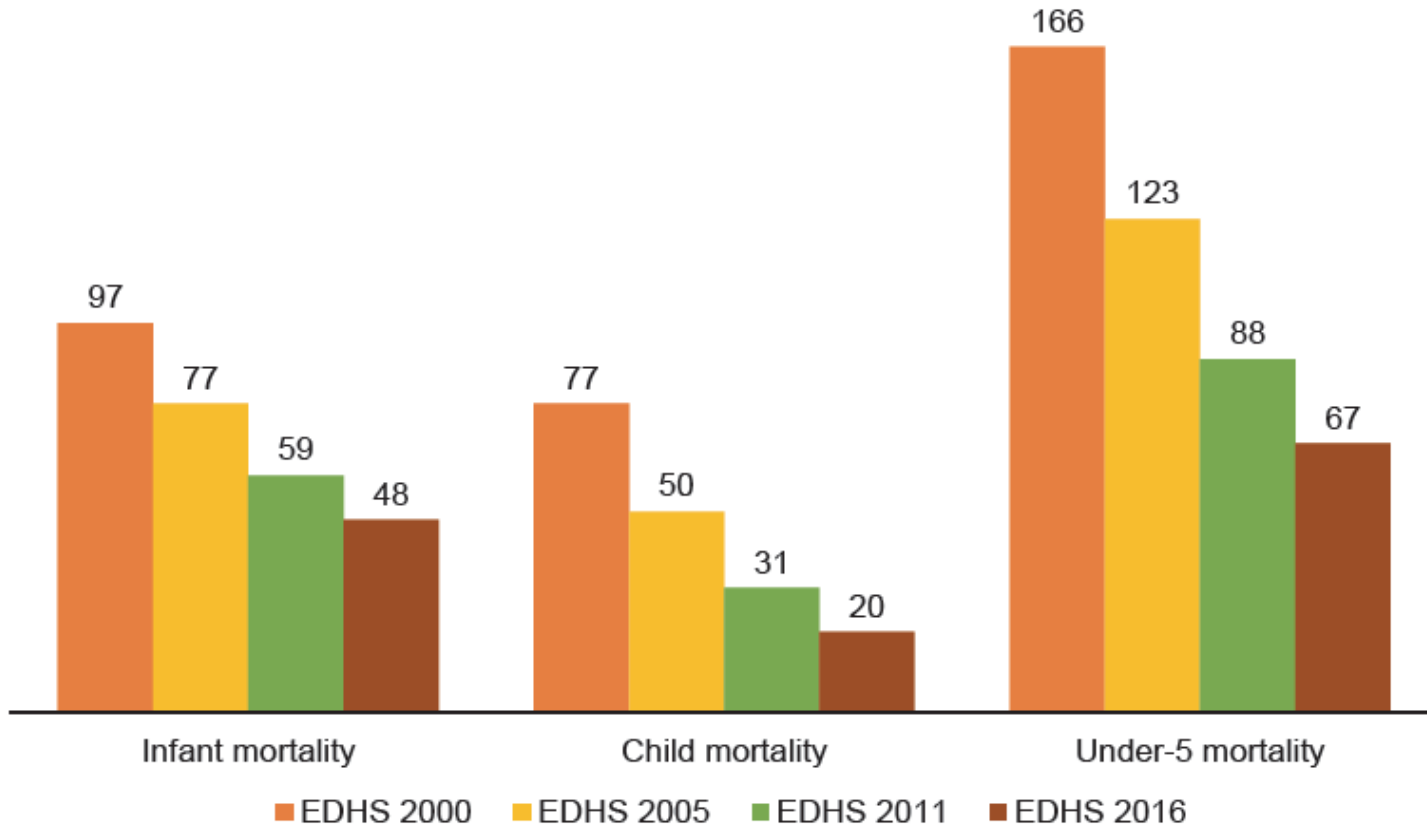
- In the past two decades, the Government of Ethiopia has invested heavily in health system strengthening and as a result, Ethiopia has done remarkably well in meeting most of the MDG targets.
- Among the notable achievements include achievement of MDG-4, MDG – 5 including improvements in CPR and fertility reduction



Reduction of Child Mortality-MDG 4:

- Ethiopia has achieved MDG 4 target three years earlier (2013) by reducing under-five mortality by 67% from the 1990 estimate.

Deaths per 1,000 live births





INDICATORS		SOURCE
NMR	29/1000 LB	EDHS 2016
IMR	48/1000 LB	EDHS 2016
Under Five Mortality Rate	67/1000 LB	EDHS 2016
MMR	412/100000 LB	EDHS 2016

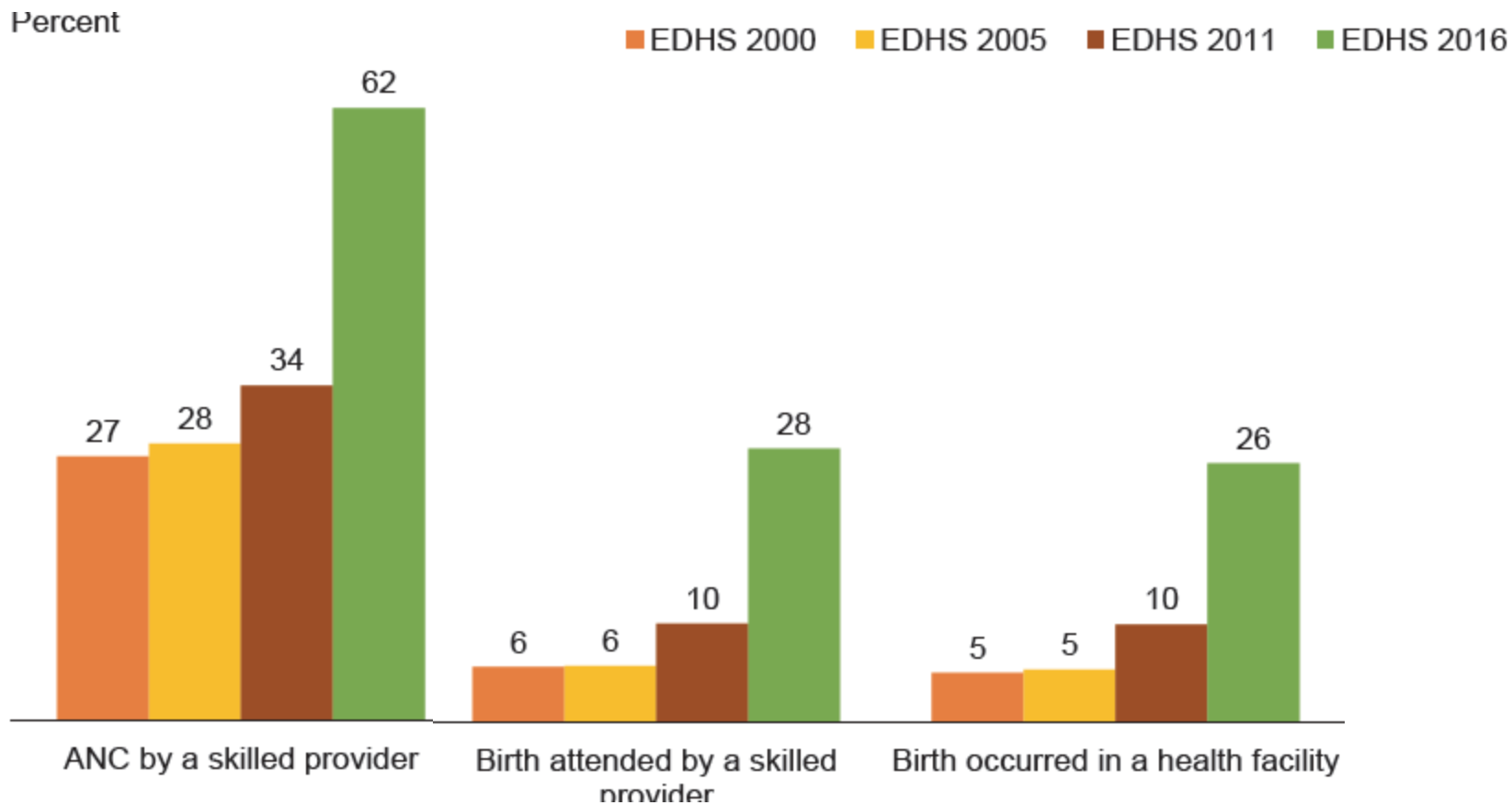


Improve Maternal Health –MDG 5:

- Ethiopia is among the countries with a good progress in reducing maternal mortality.
- According to EDHS data, Maternal Mortality Ratio (MMR) has dropped from 871 in 2000 to 412 in 2016 per 100,000 live births.
- Ethiopia is acknowledged by UN as one of the countries who showed great progress toward MDG5 MMR target of 267 maternal deaths per 100,000 live births.
- Hemorrhage, hypertension in pregnancy, abortion and sepsis are the leading causes of maternal deaths, which can only be averted through skilled institutional care.



Trends in maternal health care, 2000-2016





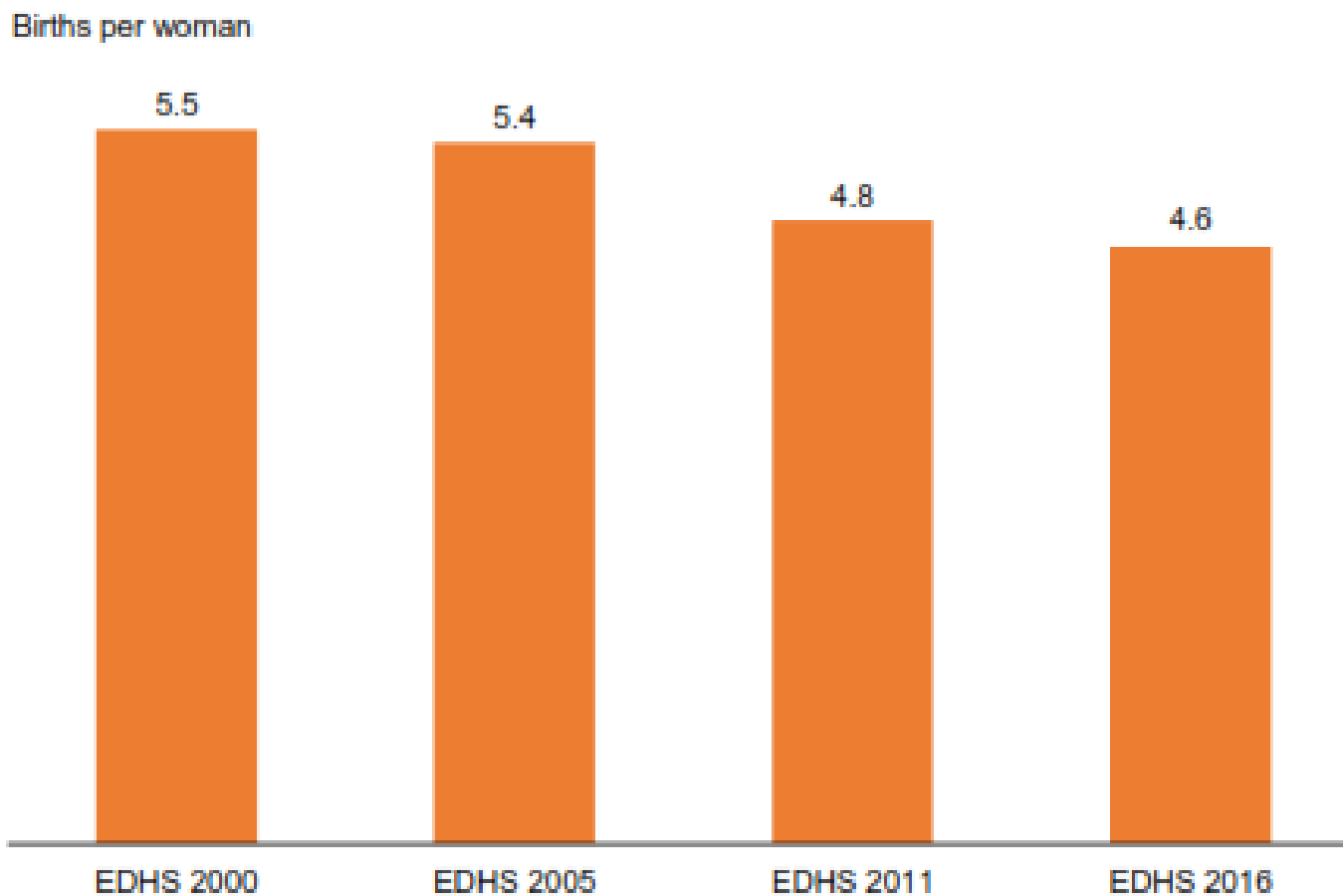
Improvement in Fertility Reduction

- Among other remarkable changes, the total fertility rate has declined from 5.5 children in 2000 to 4.6 children per woman in 2016;
- There is huge disparity between regions in Ethiopia from 7 in Somali region to 1.7 in Addis Ababa.



Trends in TFR

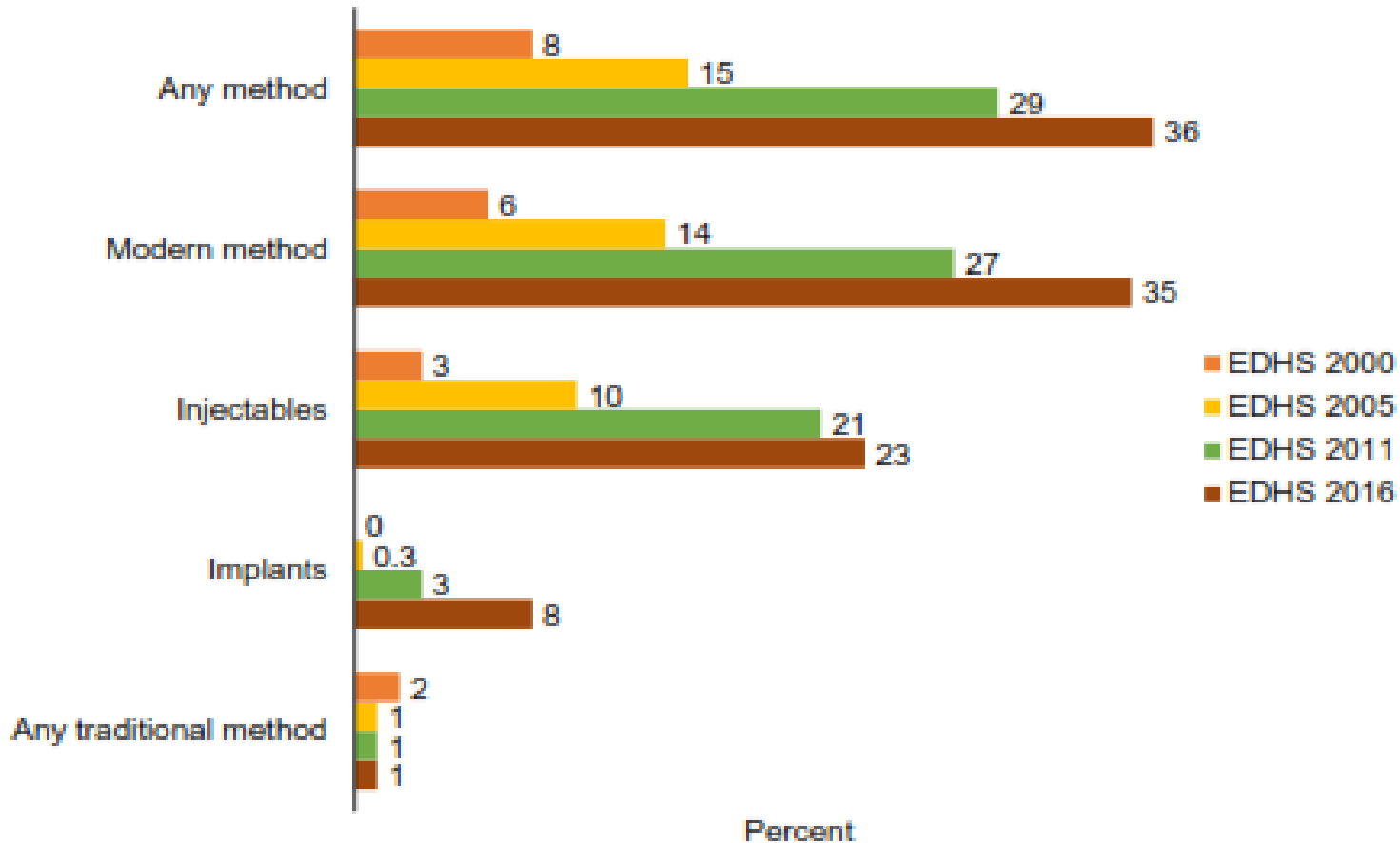
Figure 1 Trends in total fertility rate, 2000-2016





Trends in CPR

Figure 2 Trends in the use of family planning, 2000-2016

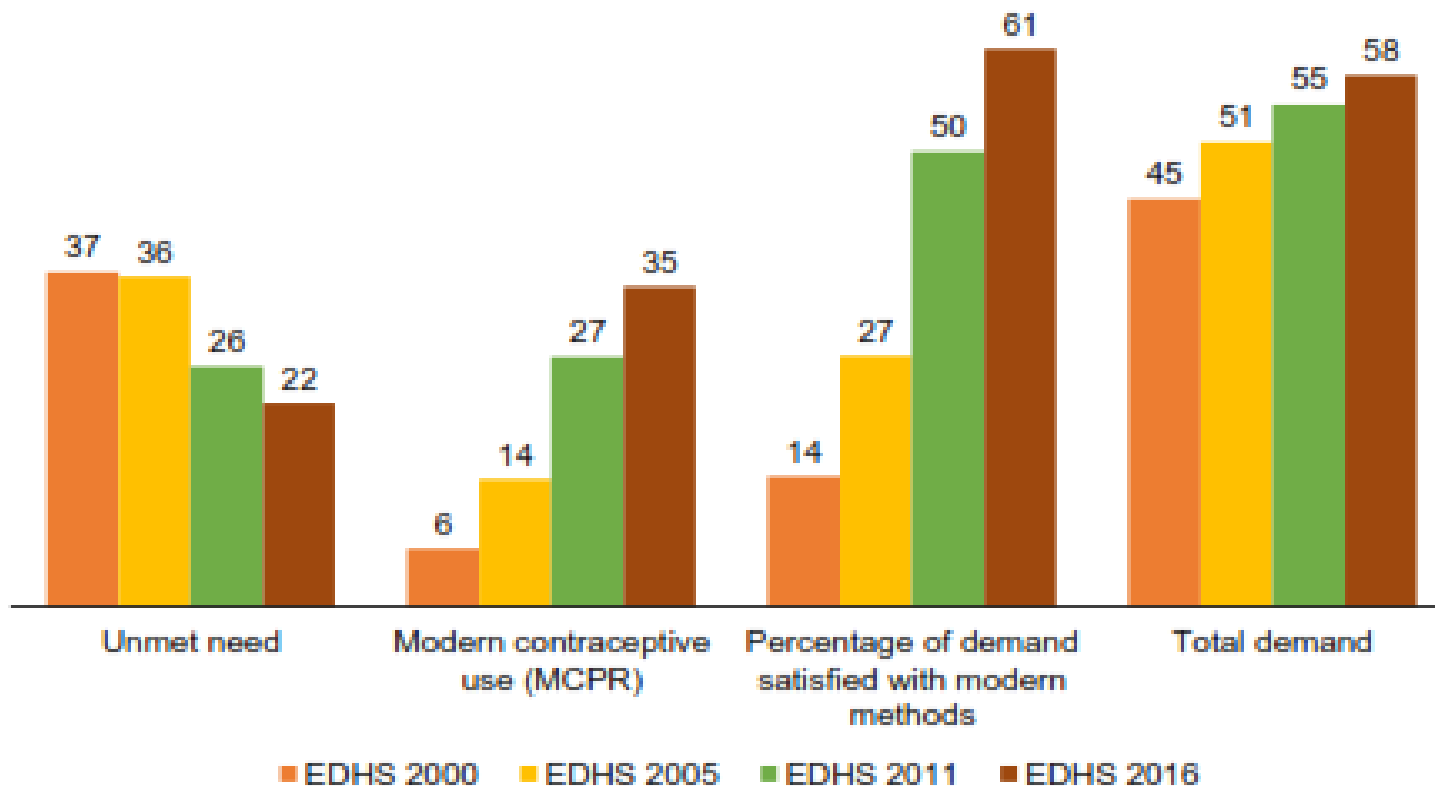




Trend IN unmet need

Figure 3 Trends in unmet need, modern contraceptive use, and percentage of demand satisfied with modern methods, 2000-2016

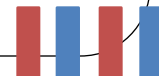
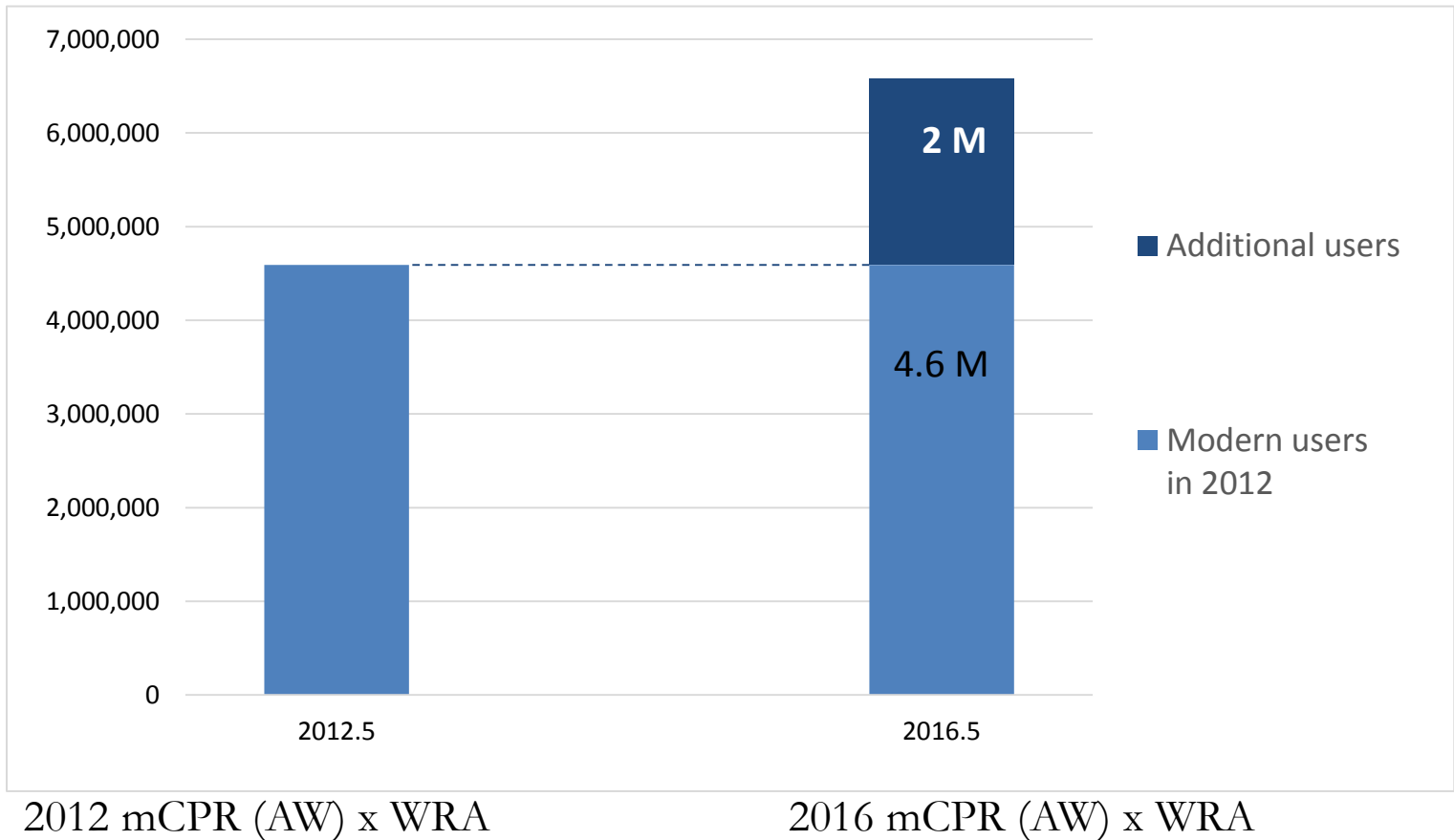
Percent





Our progress: additional users

Graph showing total users in 2012, total users in 2016 & highlighting the increase as additional





Impacts of our growing mCPR

What is the impact of our FP programme in 2016?

In 2016, we estimate:

6.6 Million

Women are using a modern method of contraception

As a result...

1.9 Million

Unintended pregnancies
will be prevented

550,000

Unsafe abortions will be avoided

5,123

Maternal deaths will be averted

Many more unintended pregnancies, unsafe abortions and maternal deaths didn't happen because women were using modern contraceptives



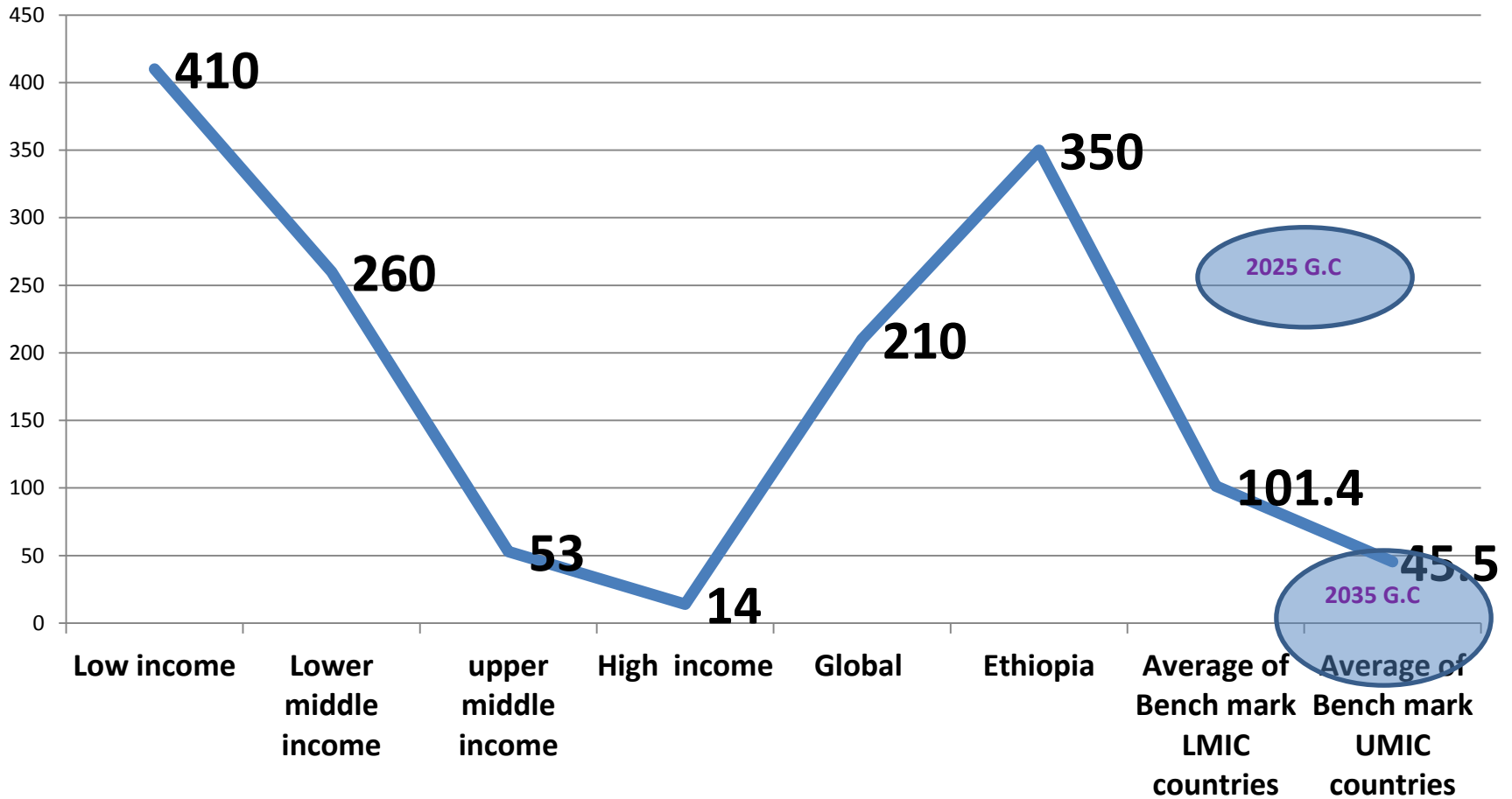
HSTP targets for FP

- Increase **CPR** to 55%
- Reduce **TFR** to 3
- Reduce unmet need to 10%
- Reduce adolescent/teen age pregnancy rate to 3%



MMR projected for 2025&2035

MMR by economic status as of 2010 (based on 2013 World Health Statistics; WHO Report)

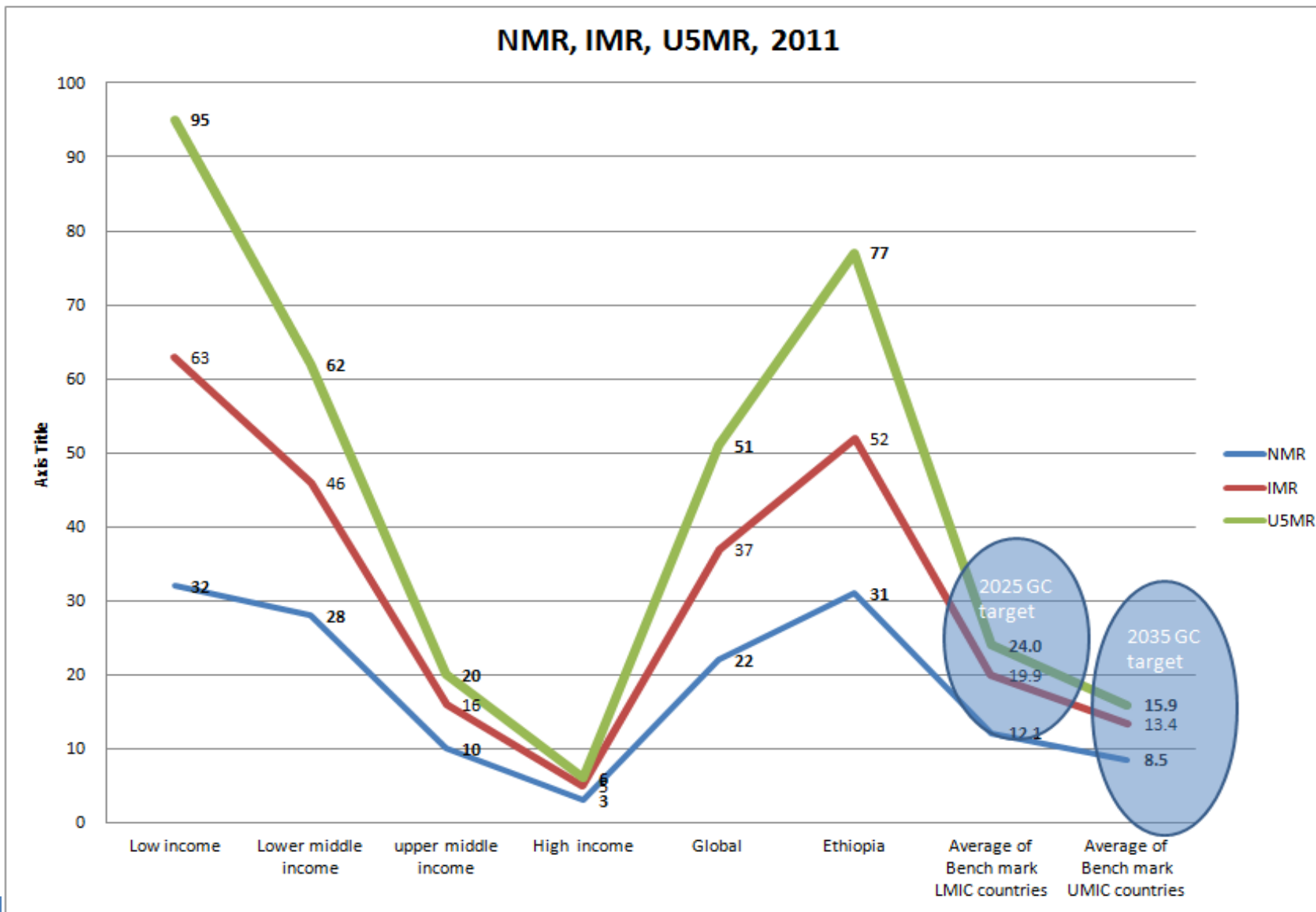




NMR, IMR, U5MR projected for 2025 & 2035



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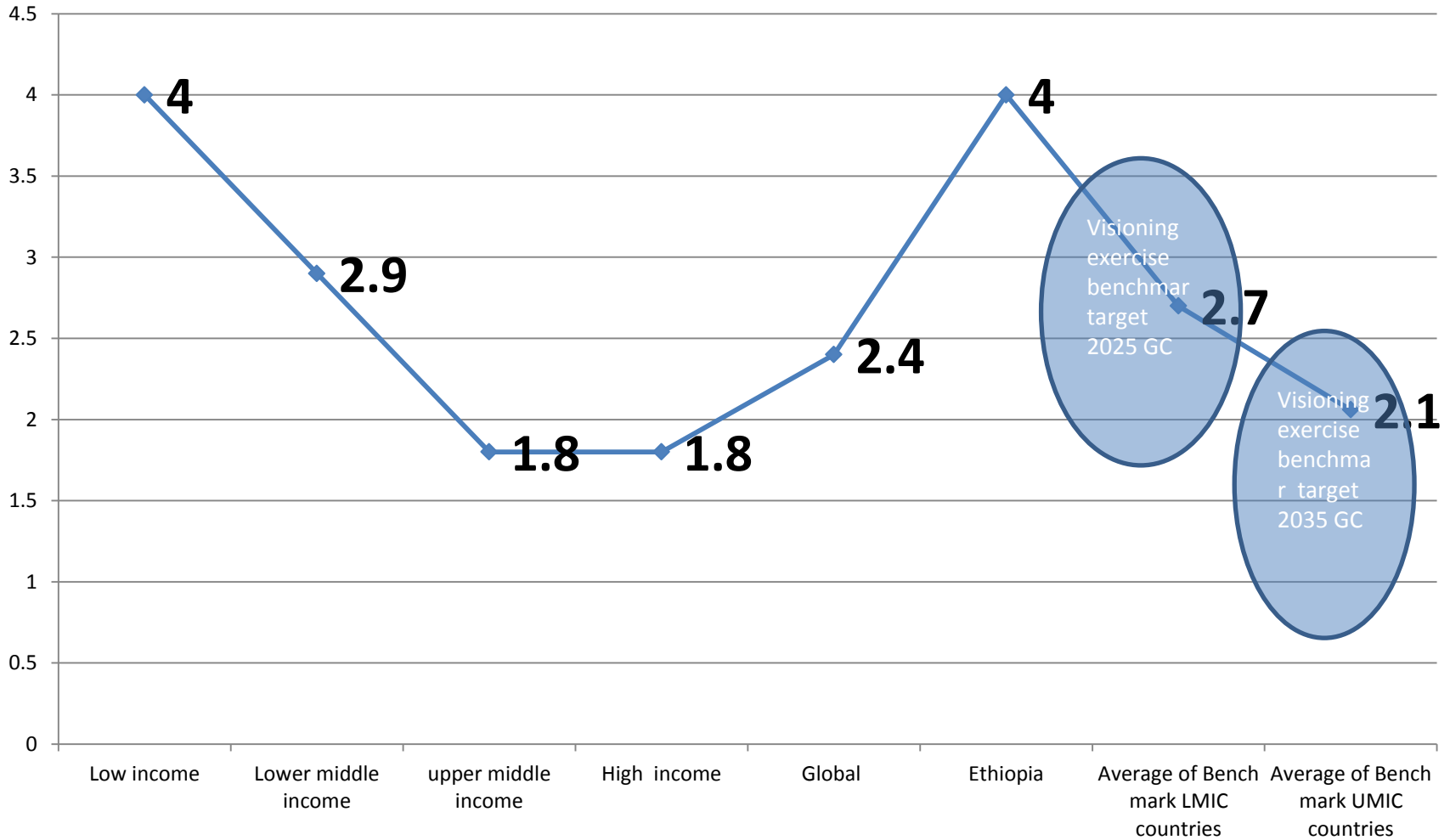




TFR projected for 2025&2035

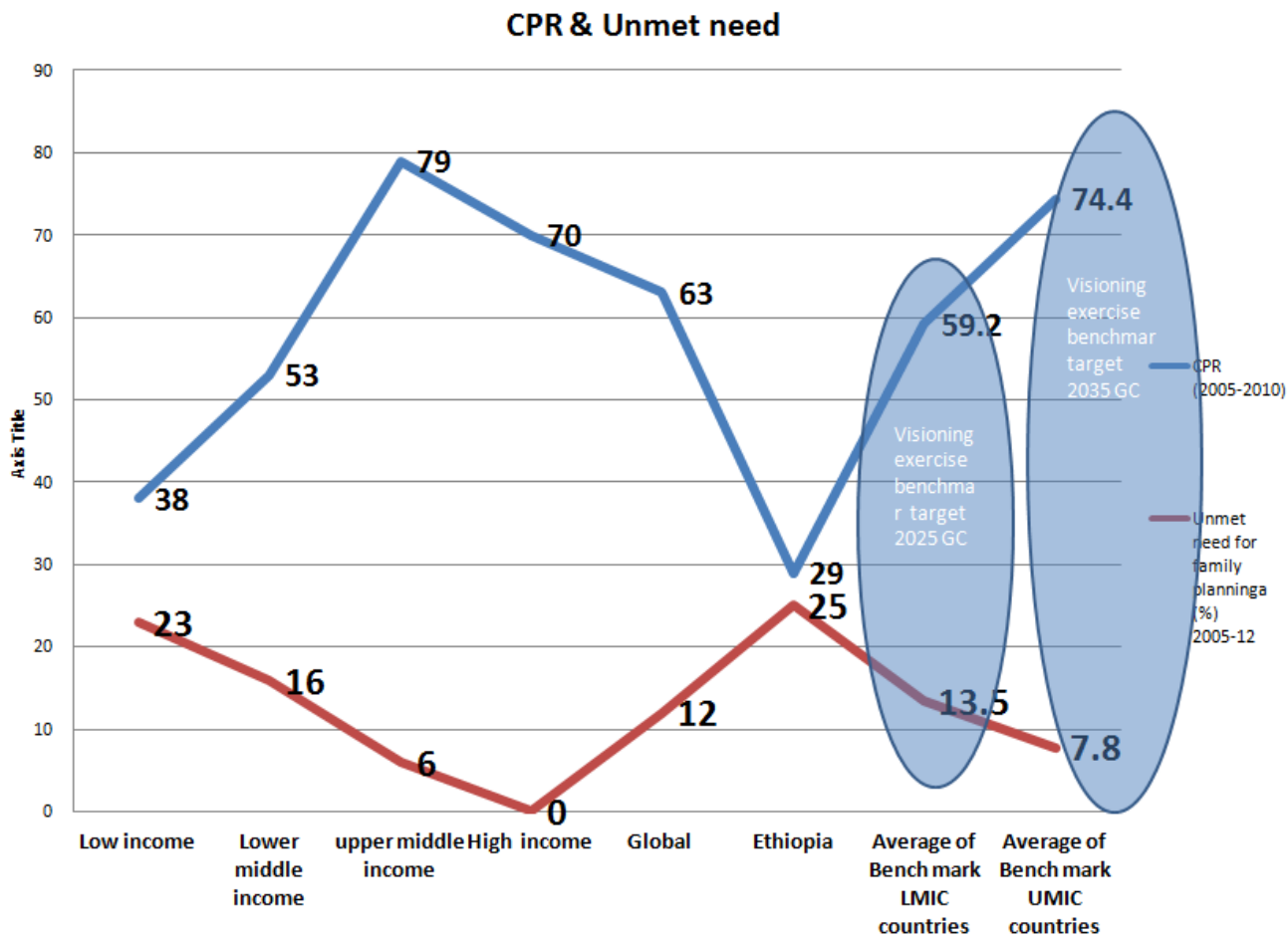


TFR,2011





CPR & Unmet need projected for 2025&2035





Opportunities

1. Conducive policy Environment
2. Strong Government leadership and coordination
3. Service delivery Expansion
4. Development Partners commitment



Challenges



Addressing the unmet need for family planning among vulnerable groups

- Although overall contraceptive prevalence is increasing there are large disparities within society with some vulnerable groups still experiencing high unmet need for family planning:
 - ✓ Adolescent girls, aged 15 – 19 years, have the highest unmet need
 - ✓ People living with HIV and people with disabilities



Addressing the continued high fertility rates in pastoralist communities

- Ethiopian pastoralists represent about 11% of the total population inhabiting nearly 52 % of the country's geographic area.
- Fertility rates among these communities are significantly higher than in other parts of the country. While the national total fertility rate (TFR) is 4.6 children per woman, the TFR for the pastoralist regions is as high as 7 children per woman.

➤ **Availability of commodities**

- ✓ Method mix-choice



Way Forward

- Despite the efforts and progresses thus far, we have more work to do to achieve the FP targets set for 2020:

Political will critical

Strengthen Collaboration and Coordination

- ✓ All stakeholders need to coordinate at all levels

Allocate Sufficient budget for FP programs

Strengthen integration with other services such as ANC, labor and delivery; immunization and PMTCT



Way Forward

Improve access to hard to reach populations and young and adolescents:

- ✓ Expand youth friendly services
- ✓ Expand services to pastoralist, remote areas and hard to reach populations

Improve access to full range of contraceptive methods:

- ✓ Expand access to long acting and permanent methods
- Address myths & misconceptions & create more demand

Strengthen supply chain management at central, regional and lower levels including service delivery points (SDP)



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Thank You!