

Ethiopia Country strategy 2021–2025

Ethiopia has a population of approximately 121 million. There are significant health disparities between regions. Although the health workforce is well trained, the country's various health facilities experience frequent equipment shortages and limited availability of healthcare services, both of which have resulted in a low demand for services. Out-of-pocket expenditure on healthcare is moderately high at 30 percent.

Neonatal mortality is an ongoing challenge, neglected tropical diseases affect a large proportion of the population, and non-communicable diseases account for 46 percent of disability-adjusted life years. While progress has been made to reduce morbidity and mortality attributable to malaria, the disease remains one of the most pressing public health concerns in the country. This is particularly concerning in light of increasing resistance of malaria vectors to insecticides, alongside invasive new vectors such as *Anopheles stephensi* in urban and peri-urban areas.

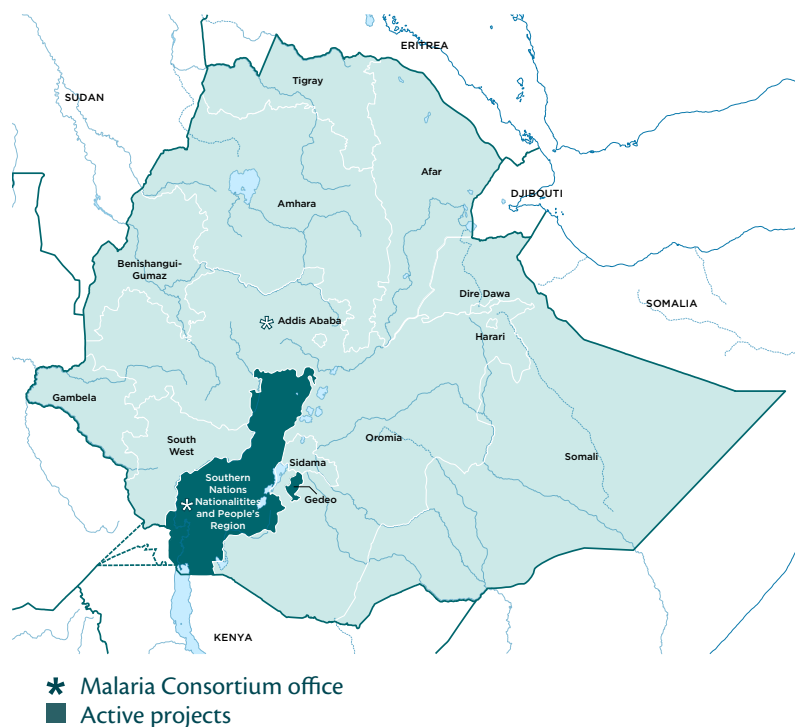
To address healthcare inequity and improve access to services, the government is implementing the Health Sector Transformation Plan II (HSTPII) 2020/21–2024/5. HSTPII aims to improve the health of the population by accelerating progress towards universal health coverage (UHC), protecting people from emergencies, creating *woreda* transformation — health governance typically occurs at the national and state levels — and ensuring the health system is responsive to the needs of the population. To support these aims, the government is looking to increase spending on healthcare from eight to 10 percent.



Malaria Consortium in Ethiopia

Malaria Consortium has been implementing projects in Ethiopia since 2004 from our offices in Addis Ababa and Hawassa, with a focus on the Oromia region and Southern Nations, Nationalities and Peoples' region (SNNPR). We support the Ethiopian government in its efforts to tackle three major public health issues: malaria, neglected tropical diseases and poor child health indicators, such as pneumonia and febrile illness.

Alongside our programmes, we have facilitated fora to coordinate stakeholders' efforts and streamline the technical assistance provided to national and regional programmes. This has been achieved through mechanisms including the Coalition Against Malaria in Ethiopia and the Malaria Control Support Team's Technical Advisory Committee, as well as through undertaking pioneering research projects with the support of the Ethiopian Public Health Institute and others.



Our strategic approach

- Enhance access to, uptake and quality of malaria services for seasonal mobile workers in development corridors, including private investors and private health facilities
- Lead on activity to reach over 200,000 individuals at risk of podoconiosis
- Implement community engagement approaches to improve demand for, and use of, primary healthcare services that focus on targeted disease burdens
- Support further implementation of improved diagnosis/ diagnostic tools and treatments for severe disease
- Collaborate with frontline partners to develop new approaches to control urban malaria from emerging threats like *An. stephensi*
- Strengthen the capacity of primary healthcare units and districts to collect, interpret and use available data along information chains and deepen a culture of data-informed decision-making
- Collaborate with malaria partners in the country on policy changes, with a special emphasis on the malaria vaccine
- Support the rollout and use of digital platforms in primary healthcare units to facilitate a focus on targeted diseases
- Support public health, epidemiological and entomological surveillance
- Finalise the action plan for pneumonia and diarrhoea as part of the integrated management of newborn and childhood illnesses and promote integration of sustainable interventions into wider health systems
- Actively participate in, take on leadership roles in, and advocate within technical advisory committees and coordination mechanisms to improve effectiveness, reduce duplication and parallel systems, and develop the roadmap to UHC
- Influence priorities of the national research agenda and develop/maintain an aligned programme of research linked to:
 - approaches to elimination of malaria in mobile workforces
 - the impact of interventions at community level and on local economies
 - the interdependencies between fever-causing diseases, including the impact of long-COVID on differential diagnosis of fever.