



REPRODUCTIVE HEALTH (RH) SERVICES IN ETHIOPIA



REPRODUCTIVE HEALTH SUPPLIES COALITION (RHCS) MEETING

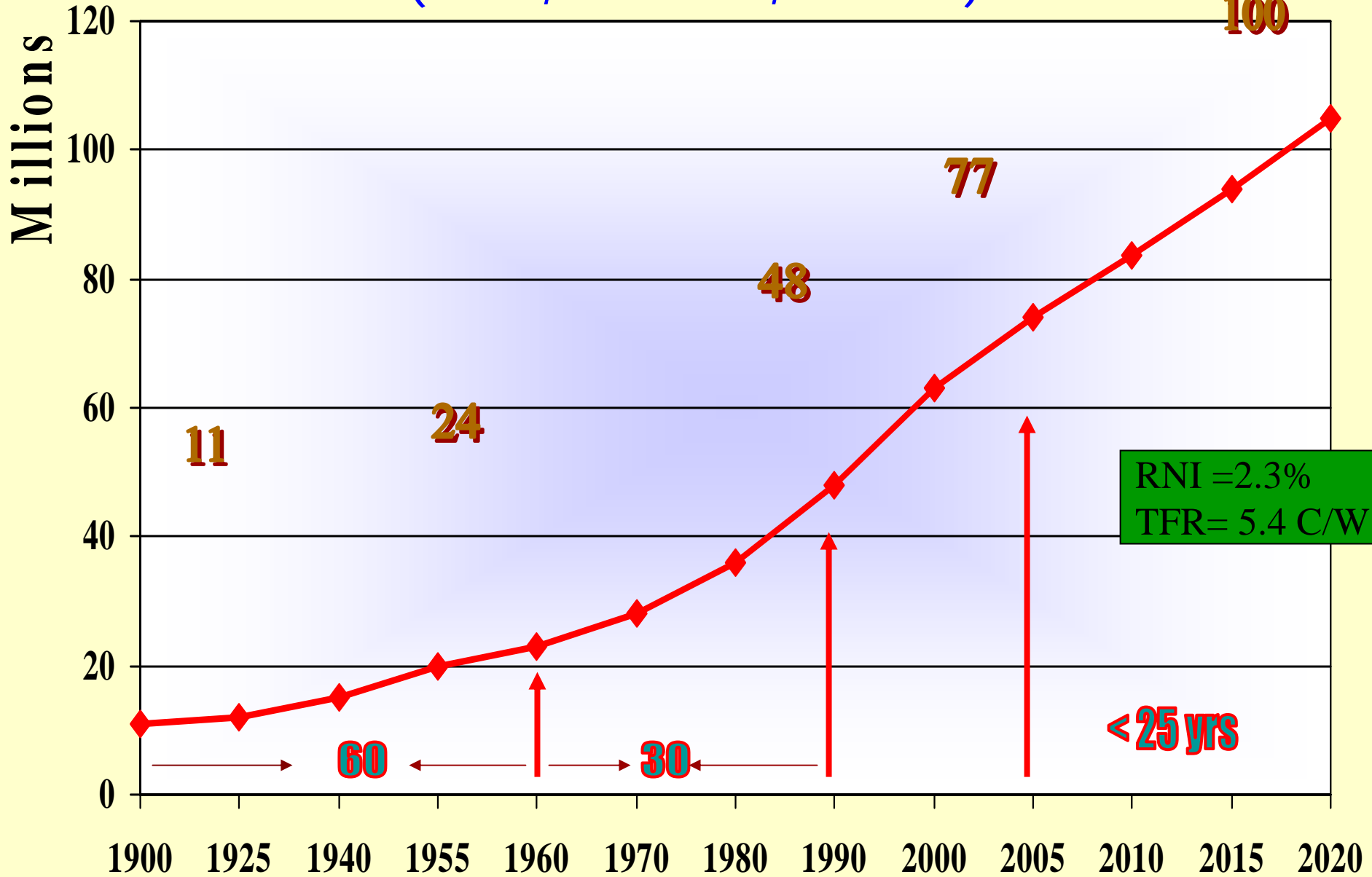
OCTOBER 20, 2006 BONN, GERMANY



The Federal Democratic Republic of Ethiopia
Ministry of Health



Ethiopian Population 1900-2020 (Past, Present, Future)



Ethiopia

2005 Demographic and Health Survey

Key Findings



- **CPR: 14.7% (25% MOH service Coverage)**
- **Method Mix:**
 - **Injectables: 10%**
 - **Pills: 3%**
 - **LTFP: 0.4%**
 - **FS: 0.2%**
 - **Condoms: 0.2%**
- **Source of FP:**
 - **Public Sector: 80%**
 - **Private/NGO: 17%**
 - **Other: 3%**
- **Unmet Need 42% WRA (34% MWRA)**
- **Urban/ Rural CPR: 47% vs. 11%**
- **MMR 673 per 100,000 live births**

CURRENT SYSTEMS

Delivery Systems

- ★ Public Sector
- ★ NGO
- ★ Private

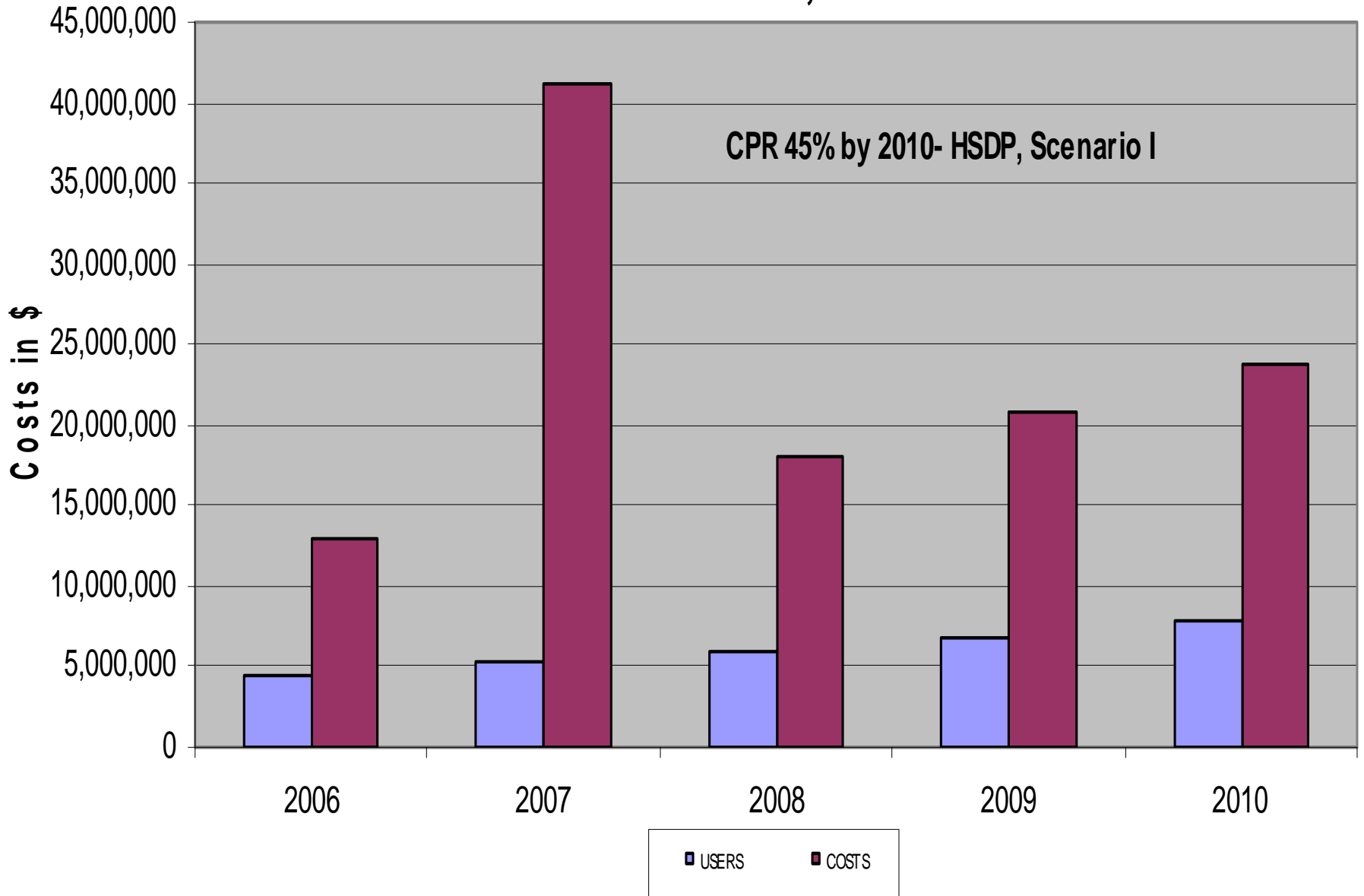
(Social Marketing
feeds into all 3
systems)

Source of Funds

- ★ Government
 - Federal
 - Regional
- ★ Multi-lateral
- ★ Bi-lateral

Coverage Projections of Users and Commodity Costs

Health Service Statistics, 2006-2010



DONOR	Commitment as of October 18th, 2006	2006 Shipped	2006 Anticipated*	2007 Anticipated*
USAID	\$3.5 Million to arrive in 2006 + \$3.5 million of \$6 million committed for 2006-2007	\$3,200,000	\$1,516,000	\$ 4,334,028
Organon Donation	2 nd donation, 1 st amount having arrived in 2005	\$225,600		
UNFPA	Request made for \$1.5 to \$4.5 million Gap filling	\$1,900,000		\$ 1,500,000 to \$ 4,500,000
DKT-DFID, Irish Aid & RNE Netherlands	\$10.5 Million grant 2005-2008 (most spending starts 2006) +DFID \$1.3 Million + \$500,000 Netherlands in 2007		\$ 3,500,000	\$ 4,800,000
IPPF	Includes only injectables and pills		\$ 250,000	Not known
PBS	Low end estimate of \$11.5 million proposed, given lower anticipated total			\$4,666,667
KFW	\$3.5 Million committed in 2004, first shipment in Customs Aug 15, 2006	\$3,484,475		
EU	Not in Current Country Strategy – next plan 1/08			
All Donors	Total	\$8,810,075	\$5,266,000	\$15,300,695 to \$18,300,695
All Totals for 2006 and 2007		\$13.2 million		\$15.3 to \$18.3 million

*Anticipated: No shipping schedule as yet, but general commitment made

ACHIEVEMENTS

DHS 2000-2005

- ★ Increase in CPR 8% to 14.7%
- ★ Decline in MMR from 870 to 673



Policy and Strategy Context

- ★ Population in PASDEP (PRSP-II) and HSDP – aligned with MDGs
- ★ Health Extension Program
- ★ RH and AYRH Strategies
- ★ Safe Abortion guidelines & Penal Code Amendment
- ★ National Contraceptive Forecast 2005-2010

ACHIEVEMENTS



Coordination

- ★ **National and International Partnerships**
 - **HPN Donor Group**
 - **RH Task Force**
 - ★ **FP Technical Working Group**

Others

- ★ **Contraceptive Security Workshop**
- ★ **Population Forum, Advocacy Initiatives**

WEAKNESSES



Donor-related

- ★ **Lengthy Procurement procedures**
- ★ **Donor endorsement of Branded products**
- ★ **Conditionality**
- ★ **Funding Volatility**

WEAKNESSES



National

- ★ **Procurement Capacity & Regulations**
- ★ **Information Systems**
- ★ **Logistics planning**
- ★ **Infrastructure**
 - **Health facility**
 - **Transport & Warehousing**
- ★ **Limited choice impacts Access**
- ★ **Provider Bias**

OPPORTUNITIES



- ★ **Rapidly Expanding Service Delivery (HEP)**
- ★ **Harmonization on track**
- ★ **New Donors and Foundations**
- ★ **Initiative in Health Commodity Supply System (Logistics master plan)**
- ★ **Existence of functional coordinating bodies**
- ★ **RHSC – Secretariat ???**

MDA

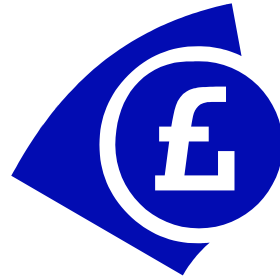
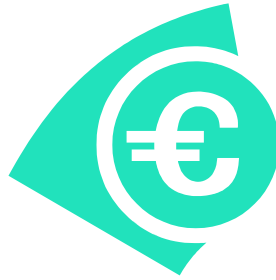
★ **Second Tier Markets**

- **Need to identify Ability and Willingness to Pay at different facilities (Public/Private)**
- **Not relevant as long as donors and government are endorsing branded products**

★ **Generic manufacturing/Prequalification**

- **Interest in local manufacturing**
- **Capacity building needed**

SYSTEMS STRENGTHENING



- ★ **Debt Relief**
 - Inclusion of RH in the criteria
- ★ **RH funding Gap**
 - Including Buffer Stock Needs for 2007
- ★ **Procurement Planning**
 - MOH Initiative toward pooled procurement
 - Generic Products & Donor compliance
- ★ **Multi-lateral Funds**
 - Use Experience of Global Fund and GAVI
 - Integration of RH within International Health Initiatives

RMA

Messages

- ★ **No product, No Program**
- ★ **Long Term Commitment (Govt /Donor)**
- ★ **Advocate Finance people (beyond health sector)**
- ★ **Pooled Funding**
- ★ **Country decided Procurement**



To ensure CS...

What we have

- Funds – donor and government
- CPR – doubling of CPR in 5 years
- Context – rapidly expanding service delivery

What we Require

- Support to manage expanding demand and supplies
- Support to examining Discontinuation
- Support to expanding Choice – LTPM
- Support for sustainable financing for all sectors
- Support for harmonized interventions

Let us join hands and create true partnership to make RHCS a reality

Synergy



1 + 1 = 3

(may be even 4)



Thank You