

ETHIOPIA ICPD 25 COMMITMENT

MOH

December 19, 2023

Dr Meseret Zelalem T- FMOH-MCAH-LEO



Background: ICPD

The International Conference on Population and Development (ICPD)

- First (Bucharest/Romania, 1974)
- Second (Mexico/ Mexico City, 1984)
- Third (Egypt /Cairo, September 1994)
- Decided to be every five years since ICPD (1994)



Background

- Since the ICPD (1994-2019), substantial global progress was made in some of the key indicators:
 - Enactment of policies and laws
 - Decline in preventable maternal deaths (by 40%)
 - Increase in contraceptive prevalence rate (by 25%)
 - Engagement of more women in public sphere at all levels of society



ICPD and the Ethiopia Engagement

- **Ethiopia** participated with a high-level delegation, led by its **Hon. Head of State/Prime Minister**
 - Signed the ICPD Programme of Action
- **Ethiopia** delivered its statements and submit reports in the subsequent review meetings
- **In March 2013, during the Human Rights Council (HRC) High-Level Panel on Human Rights Mainstreaming, delivered a signed Joint Statement on behalf of 24-member states**
- **Ethiopia** submitted regular review report to the UN and the AU to reaffirm its accountability



ICPD and Ethiopia's Engagement

The Government is also signatory/party to other several relevant global and continental instruments

- **Safe Motherhood Conference in Nairobi in 1987;**
- **Fourth World Conference for Women in 1995;**
- **Convention on Elimination of all forms of Discrimination against Women (CEDAW);**
- **The UN Human Rights Charter;**
- **Declaration on the Elimination of Violence against Women (DEVAW);**
- **Millennium Declarations, MDGs;**
- **FP2020, FP2030;**
- **SDGs; and**
- **AU's Maputo Plan of Action and Maputo Protocol**



ICPD 25 (Ethiopia)

The Ethiopian Government decided to model its pledges on the bases of the whole 12 commitments of the “Nairobi Statement” and this report focused on the “three zeros” commitments:

- **Zero Unmet need for Family Planning/Contraception,**
- **Zero preventable Maternal Mortality and Morbidity and**
- **Zero SGBV, including Child Marriage and FGM**



Policy Documents

Since the November 2019 Nairobi Summit different strategies and guideline developed .

- **The Ten Years Perspective Development Plan: Pathway to Prosperity (2021-2030)**
- **Health Sector Transformation Plan II (2021-2025)**
- **Reproductive Health Strategic Plan (2021–2025)**
- **Reproductive Health Commodity Security strategy**
- **National Family Planning Guideline**
- **Family Planning Costed Implementation plan (2022 - 2030)**
- **Adolescent and Youth Health Strategy (2021–2025)**
- **Revised hospital and Health center obstetrics management protocols (2021),**
- **The new ANC guideline (2022)**
- **The five-year Elimination of Obstetric Fistula 2021-2025 strategic plan**



Zero Unmet Need for FP/Contraception

The Country Commitment:

- Ensure universal availability of quality, affordable and safe modern contraceptives in an effort at achieving zero unmet need for family planning information and services



Progress

The country renewed and launched FP 2030 commitment (2021)

Commitment 1: Increase FP Financing

- Earmark funds from its treasury and SDG pool

Commitment 2: Improve contraceptive Commodity security

- Increase “**no stockout**” status of 3 modern contraceptive methods from 63% to 90%.

Commitment 3: Improve access to Adolescent and Youth contraceptive use

- reduce teenage pregnancy from 13% to 7% by 2025 and 3 % by 2030

Commitment 4: Ensure availability of quality FP information and services

- Decrease unmet need for FP from 22% to 17% by 2030



Progress

- Domestic financing from **29 million ETB** in **2012** to **275 million ETB** in **2016EFY**
- UNFPA and Multi-donor compact for financing FP
- Advocacy meetings for HPR to allocate adequate budget for FP commodities
- Expanded IPPFP from 7% to 50% of the HC and in 83% of hospitals
- Expanded post-abortion FP services
- World Contraception Day to enhance awareness on informed choices of contraceptive methods, and to address unmet need
- FP Counselling pocket guide, **MII from 12%– 23%**



Progress

- Annual National Youth forum
- Expanded YFS in 53% of all health centers
- Multi-sectoral coordination and collaboration reduce teenage pregnancy MOE, MoWSA
- RMNCAH scorecard developed
- Integrated CBCM and supportive supervision, competency-based training, digitalization of FP e-learning
- Established FP and RH fellowship programme at St. Paul Institute for RH and Rights



Zero Preventable Maternal Mortality and Morbidity

The Country Commitment:

- Integrate a comprehensive approach of the essential sexual and reproductive health package including:
 - Access to safe abortion to the full extent of the law
 - Measures for preventing and avoiding unsafe abortions
 - Inclusion of comprehensive and post-abortion care in to the national and Universal Health strategies, policies and programs



Progress

- **SMH month, OF and eclampsia day commemoration**
- **9 obstetric fistula treatment center established**
- **PCC service integration health facilities**
- Confidentiality enquiry – analysis
- US service task sharing initiated
- Integrated CBCM implementation
- Strengthening continuum of care (PCC, Initiate early ANC, <= 12 weeks, ANC 8+, SBA..)
- CEmONC site expansion
- Medical equipment maintenance initiated



Ambulance, Medical equipment and supplies donated to the conflict areas of the region



Progress

- 1,800 functional Maternity waiting homes established
- Pre-conception care service integration initiated
- Obstetric fistula surveillance campaign integration
- 70 new mini blood bank established
- Facility rehabilitation in conflict/drought affected regions
- Annual MH : RM, SS,
- Capacity building (mentorship, training)
- Started RMNCH score card implementation
- Capacity building on GBV survivors



MWH exhibition



- Feto-maternal unit established at Black-Lion Specialized Hospital



Zero SGBV, Child marriage, FGM

The Country Commitment:

- Realize all individuals' potential as agents of change in their society
 - Both socially and economically: thereby making earnest efforts to achieve zero sexual and gender-based violence, including zero child, early and forced marriage, as well as zero female genital mutilation



Progress

- National Costed Roadmap to End Child Marriage and FGM (2020-2024)
- GBV strategic Plan
- Prevention and response to Violence against women and Children (2021-2026) strategy
- The NAYH Strategy covers, GBV and HTPs- early/child marriage, and FGM/C.
- Community mobilization on GBV and early marriage
- Capacity building for community health actors
- Capacitate one stop centers with supply equipment



Gaps

- Budget shortage
- SRH commodity and equipment shortage
- Supply Chain - end to end data visibility from EPSS to SDPs
- Low community literacy
- Data quality and use
- Poor referral linkages
- Conflict, Climate and public health emergencies



Call to Action: Zero Unmet Need

- Increase financing for FP
- Increase LAFP service availability in all public facilities- [IUCD to 11% and Implant to 24% by 2030]
- Scale-up IPPFP service provision
- Integrate of FP with safe-abortion services and PAC
- Increase support for private sector high-impact practices, including mobile outreach, social franchising, and pharmacies.
- Reach more youth and adolescents with multicomponent youth programming and youth-friendly services
- Increase women's exposure to FP messaging through mass media and interpersonal communication
- Reduce regional and urban-rural disparities in the availability of some contraceptive methods
- Ensure end to end data visibility and availability for decision making
- FP commodity production



Call to Action: Zero preventable Maternal Mortality and Morbidity

- Social mobilization and awareness creation, Safe Motherhood, fistula day, eclampsia/preeclampsia day
- Expand mini- blood bank
- Strengthen continuum of maternal health (PCC, early ANC, SBA, PNC..)
- Sustainable health care financing - resource mobilization, domestic financing, push the Abuja declaration - 15% from the treasury budget
- Resource mobilization, maintenance of medical equipment , strengthen supply chain management - capacity building , forecasting,
- Strengthen and expand CEmONC health facilities
- Expand CAC service at all health facilities
- Support the implementation of SRH in humanitarian setting - restoration



Call to Action: Zero preventable Maternal Mortality and Morbidity

- Strengthen the referral linkage - avail ambulances,
- Strengthen campaign integration (immunization and OF identification)
- Strengthen MPDSR system - finalize the strategic plan and follow the implementation
- Strengthen Confidentiality Enquiry implementation
- Strengthen quality audit, CBCM, RHCS, MCC
- Device retention and motivation mechanisms, performance based financing
- Establish multi-sectoral collaboration platforms
- Strengthen Maternity Waiting Homes
- PCC service integration in 25 % health facilities



Call to Action: Zero SGBV, Child Marriage and FGM

- Revitalizing multi sectoral engagement
- Strengthening the national alliance effort
- Integration of FGM in to the existing service delivery points (ANC, PNC, EPI.)
- Advocacy to improve community awareness, family law adoption
- Strengthening the engagement of community leaders/religious leaders and clan leaders, engaging in-law/ in the high burden regions.
- Strengthen one stop center for GBV survivors



Thank You

