

UM-CIRHT, Family Planning & Abortion Conference

Opening Plenary Remarks, Ethiopian Federal Ministry of Health

Excellencies,

Distinguished Guests,

Ladies and Gentlemen:

It is a great pleasure and honor for our country Ethiopia to host this Family planning and abortion conference organized by the Center for International Reproductive Health Training at the University of Michigan. On behalf of the MOH, our minister Dr. Amir Aman and myself, I would like to say to you all Welcome to Ethiopia.

Ethiopia has a very good success story in Family planning. In less than two decades the country has increased its Contraceptive Prevalence Rate six-fold and total fertility decreased from 5.4 to 4.6 children per women. Most of our data is three years old as our last EDHS was in 2016. We are currently doing mini DHS and that will hopefully bring evidence building on our success.

With regards to reducing deaths from unsafe abortion, the country has become a showcase of what policy change can achieve in improving women's life. In 2005 the country has passed a law making the provision of safe abortion legal for some conditions. Before that more than 30 percent of all maternal deaths were attributed to unsafe abortion. This was more than 8,000 deaths per year. But currently, deaths from unsafe abortion is less than 7 percent which is a remarkable achievement.

This improvement in family planning and SRH is due to many reasons.

The first is the political will of the government.

Article 35 of the Ethiopian constitutions says- To prevent harm arising from pregnancy and child birth and in order to safeguard their health, women have the right of access to family planning information, education and capacity.

Hence FP is enshrined in the constitution. The MOH has successive five-year strategies that prominently feature interventions in Family planning. Without government ownership, no country can have a success story. Our current HSTP has also ambitious targets in FP.

The second key factor is the launch of Health Extension Program which started in 2003.

Currently more than 40,000 fully salaried community health extension workers provide services including family planning to their community. Beyond educating, they are able to give short acting methods, insert implants and currently are being trained to remove implants and provide IUDs.

Our HEWs are further supported by voluntary women development groups who identify and train “model families” and “model communities” in good health practices, including the use of family planning. The government of Ethiopia is now hoping to mobilize 3 million women from these model families to scale up the best practices of HEP, with emphasis on improving reproductive, maternal, newborn, and child health and has started training them with basic health packages.

The third contributing factor is the strong partnerships between the government and international and local Non-governmental Organizations, donors, development partners, academia and public–Private Partnerships.

Most of the large international NGOs that specialize in FP/RH have programs in Ethiopia. The contribution of development partners to family planning has evolved considerably over the past two decades and has played an instrumental role in building service delivery, behavior-change, and building health system capacity.

One important partner among others is CIRHT-UM. Even though CIRHT has been in Ethiopia for relatively short time, the impact of the CIRHT program over the last 5 years has been significant.

CIRHT has mainly focused in improving the skills of students in pre-service training, be it medical and midwifery students, interns and residents in OBGYN. Improving the quality of pre-service education, which is the theme of this conference, is one of the macro level activities that could result in massive improvement in the quality of care that is sustainable.

In partnership with CIRHT, ten of our Universities have improved the teaching and learning process in family planning and comprehensive abortion care. Faculty and Staffs have better clinical, teaching and research skills, colleges have excellent skill labs, and teaching hospitals have a better quality of care in their women-centered Michu clinics. The

emphasis on research capacity building and evidence generation has also brought significant changes.

Because of CIRHT's support, contents about family planning and comprehensive abortion services are integrated into the national curriculum, which is now being used in most medical and midwifery schools across the country. Hence, the MOH is grateful to this strong partnership.

Even though there are many success stories, the country still faces many challenges in provision of high-quality family planning. We have significant unmet need for contraception that we need to address. Access to adolescent SRH services is still low with 13% prevalence of teenage pregnancy according EDHS 2016. We have a skewed method mix where by around two thirds of women use depo Provera. Hence, more effort must be made to diversify the modern contraceptive method mix—particularly LARCs like implants, IUDs and permanent methods.

Our Family planning services also need more focus to make them equitable. There is low FP utilization in rural areas and in pastoralist regions of the country.

It is gratifying to note that we have and are still taking action, as evidenced by the progress recorded so far. However, while we celebrate our progress, we must also reassess our challenges and renew our efforts to ensure that our collective aspirations, become a reality. There cannot and should not be, any complacency.

Beyond health, the Family Planning issue is also at the heart of gender equality, women's rights and women's empowerment.

To conclude, I would like to call on all of us to continue to pursue the joint path towards the achievement of zero unmet need for family planning, zero preventable maternal deaths and zero harmful practices and gender-based violence by ensuring gender equality, and women's rights to access comprehensive SRH services. On behalf of the MOH, I would like to express my sincere appreciation to CIRHT at the UM for organizing this conference and hope that these two days conference which has brought many distinguished international and local experts, researchers and advocates in the field of SRH, will be a platform to share knowledge and evidence, to transfer skills and most of all to infuse passion and inspirations to do more.

Thank you!