



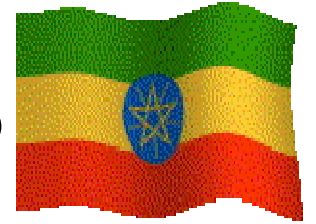
Country report ON WOMEN MPs 2013 COMMITMENTS OF FEDERAL DEMOCRATIC REPUBLIC OF ETHIOPIA

Presentation outline...



- ❖ Background
- ❖ commitment and progress
- ❖ Major lessons learned

WOMEN PARLIAMENTARIANS MEETING HIGH LIGHTS



- 5 female parliamentarian have been delegated from **three standing committee of the HPR (parliament) participated for the past two consecutive years** and two chairs of committees (social affairs and budget affairs) were participants in 2013 women parliamentarian meeting



Background



- Ethiopia is the second most populous country in Africa with total population of 84 million
- Among 547 seats 152(28%) is occupied by women during the 4th term parliament which is a double increase from the 3rd term which was 13%
- Women have caucus which collectively work for the rights of women with all women MP's as member and male as subordinate members

Caucus on discussion on RH /FP and PMTCT before constituency activity to mobilize community

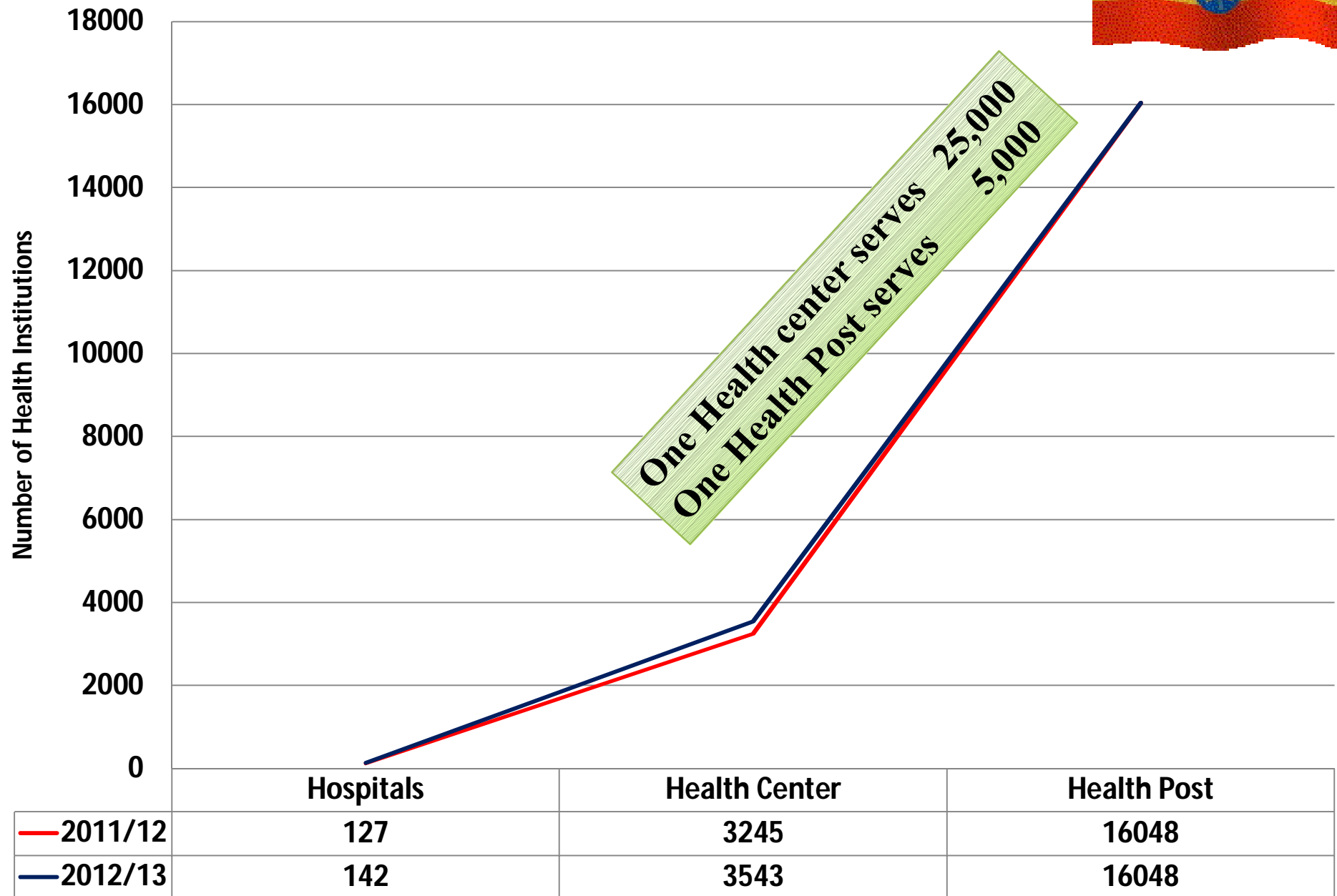


Background



- The health policy is disease preventive and health promotive in which families are center for their own health services
- Ethiopia has a decentralized health structure with several public owned and private health facilities
- The constitution clearly states the right of women and children including the free choice of FP
- In addition there is population policy , RH strategy, adolescent RH strategy, family law, women policy, youth policy, restrictive abortion law among others

Public Health Facilities



Back ground cont'

- Many civil society organizations , private health facilities and NGO health facilities are serving people on RH.
- Task shifting modalities in place to improve access to sexual and RHR
- Each local (district administration) have been provided ambulance to bring mothers and children to health institutions a total of 1250 ambulances were provided for 800 districts in the country

Cont'



- More than 38,000 health extension workers are deployed by government implementing 16 health extension packages
- Accelerated training program of **Midwifery, Health Officers** and **Medical Doctors** is underway to meet the demand.

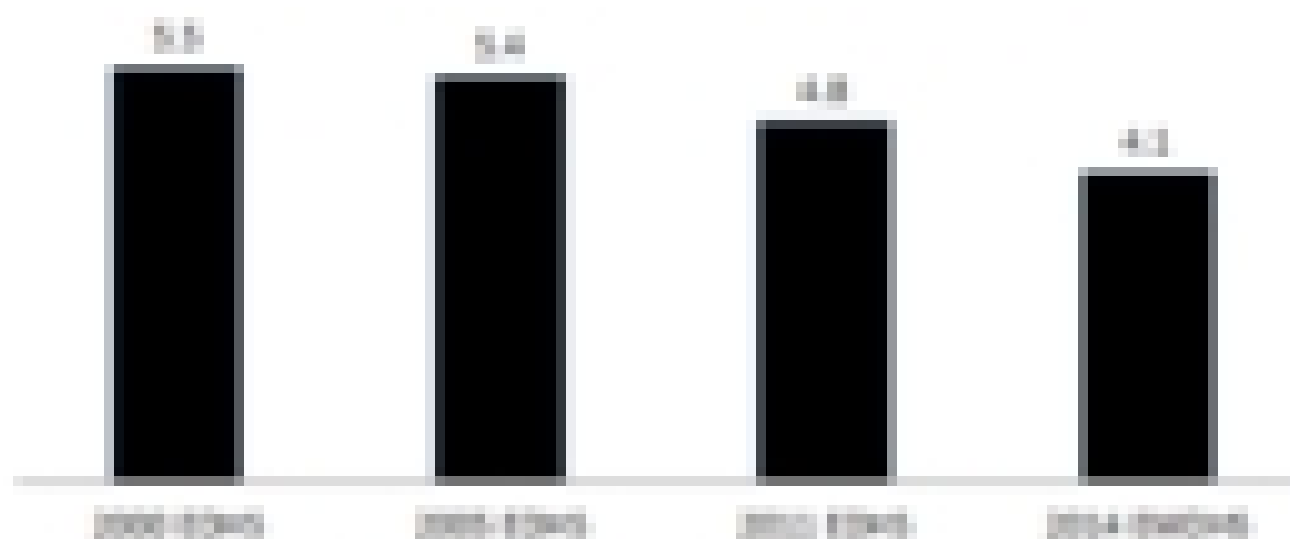
Back ground....



- According to EDHS 2011 the TFR was 4.8, CPR was 29% (doubled in the past 5 years)
- AS result of mini DHS of 2014 shows TFR is 4.1, the CPR is 42%
- Ethiopia is among 7 countries who achieved child mortality reduction goal by 2/3 of the MDG commitment ahead of 3 years



Figure 4.2 Trends in Fertility Rates, 2000-2014

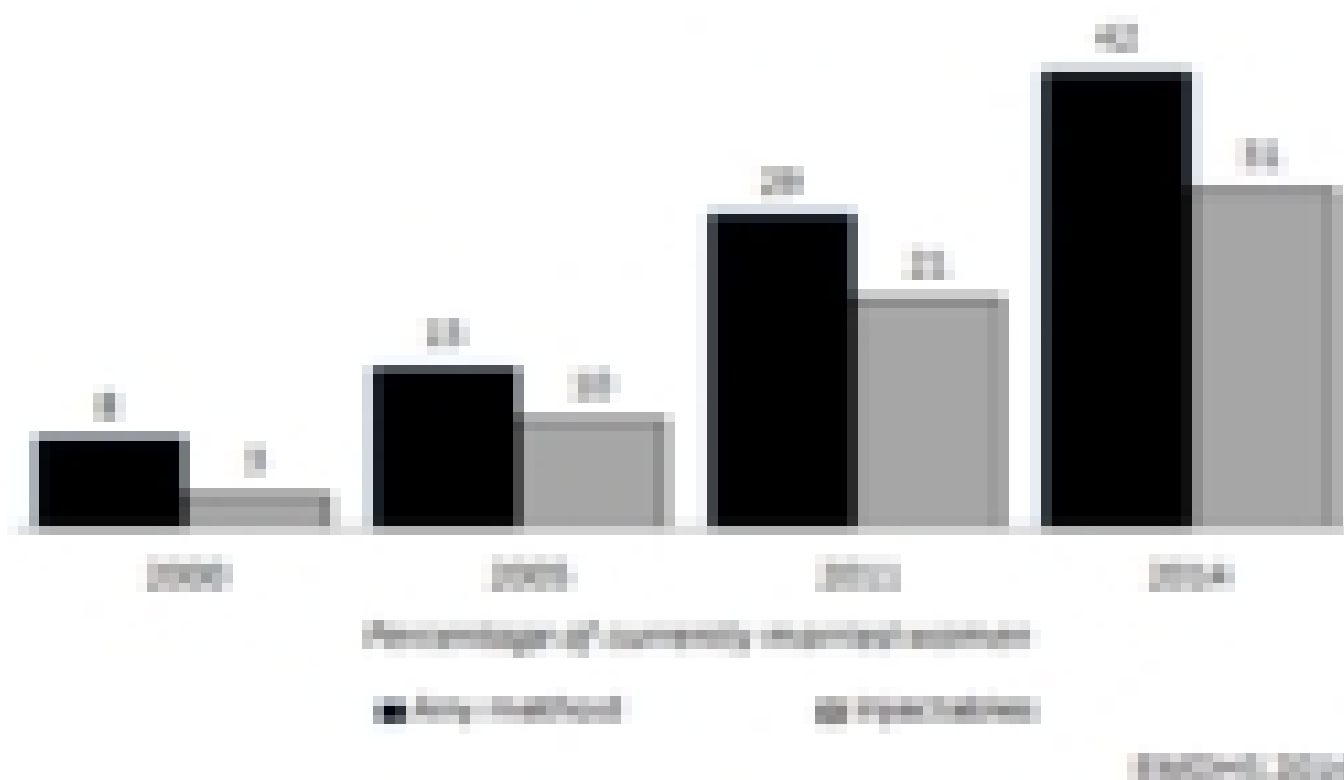


Total Fertility Rate for the 3 years preceding the survey

Source: DHS



Figure 3.1 Trends in Current Use of Contraceptive Methods, 2000-2014



High lights of 2013..

- Ethiopia selected to organize international FP conference in 2013 and shared best experiences on FP/RH >3000 international community
- Parliament at similar occasion shared Ethiopian RH laws ,policies and implementations to EU delegate parliamentarian and some African parliament who were participants of the conference
- We also shared our best experiences in RH/FP law implementation and parliamentary function to Kenya Parliament delegates

Experience sharing to Kenya parliament



Commitments

- 1. Tracking the FP budget release and utilization**
2. Ensure Sustained FP budget increase to meet the demand in the FY 2014/15



Commitment 1:

➤ **Tracking the FP budget release and utilization**

- ❖ The activities performed were:
 - ✓ Through plan orientation and discussion and
 - ✓ Quarterly report review of the executive organs(ministers)
- ❖ over sighting was conducted in 4 states with regard to track budget utilization and related RH activities to monitor implementation of MDG & GTP .
- ❖ All the budget allocated were utilized properly for commodity, capacity building of professionals and improve quality of FP at all health facilities

Discussion on Quarter Review



Comm.1 cont'd



Discussion with MOH on RH,FP on trucking budget





Committee Members On Oversight





Over sight and discussion with health facility team on RH/ FP





Lessons learned from over sighting

- ❖ Health development army established and functioning to improve maternal and child health among other health extension packages
- ❖ **Institutional Maternal Death Audit** launched country wide and started in all hospitals and health centers including community (**CMDSR**)
- ❖ One or two ambulance were provided for each of district per pupation size.



... Lessons Learned

- ❖ All RH services including delivery service are exempted
- ❖ Health facility administrative board in place for all health centers and hospitals
- ❖ Commitment to fulfill health professionals and medical supplies is improving
- ❖ Budget allocation for RH is improving at all local government level



... Lessons Learned

- ❖ Due to raised awareness of MPS on SRH **collective effort on advocacy observed**
- ❖ **Community mobilization** on SRH carried out in respective constituency



Commitment 2 :

- **Ensure sustainable budget allocation to meet the demands of FP for 2014/15**
 - ❖ The National **Budget allocation system gives priority to pro poor sectors** in which health is included
 - ❖ Government is committed to improve the health through ownership by community for their own health



. . . Commitment 2 on Progress

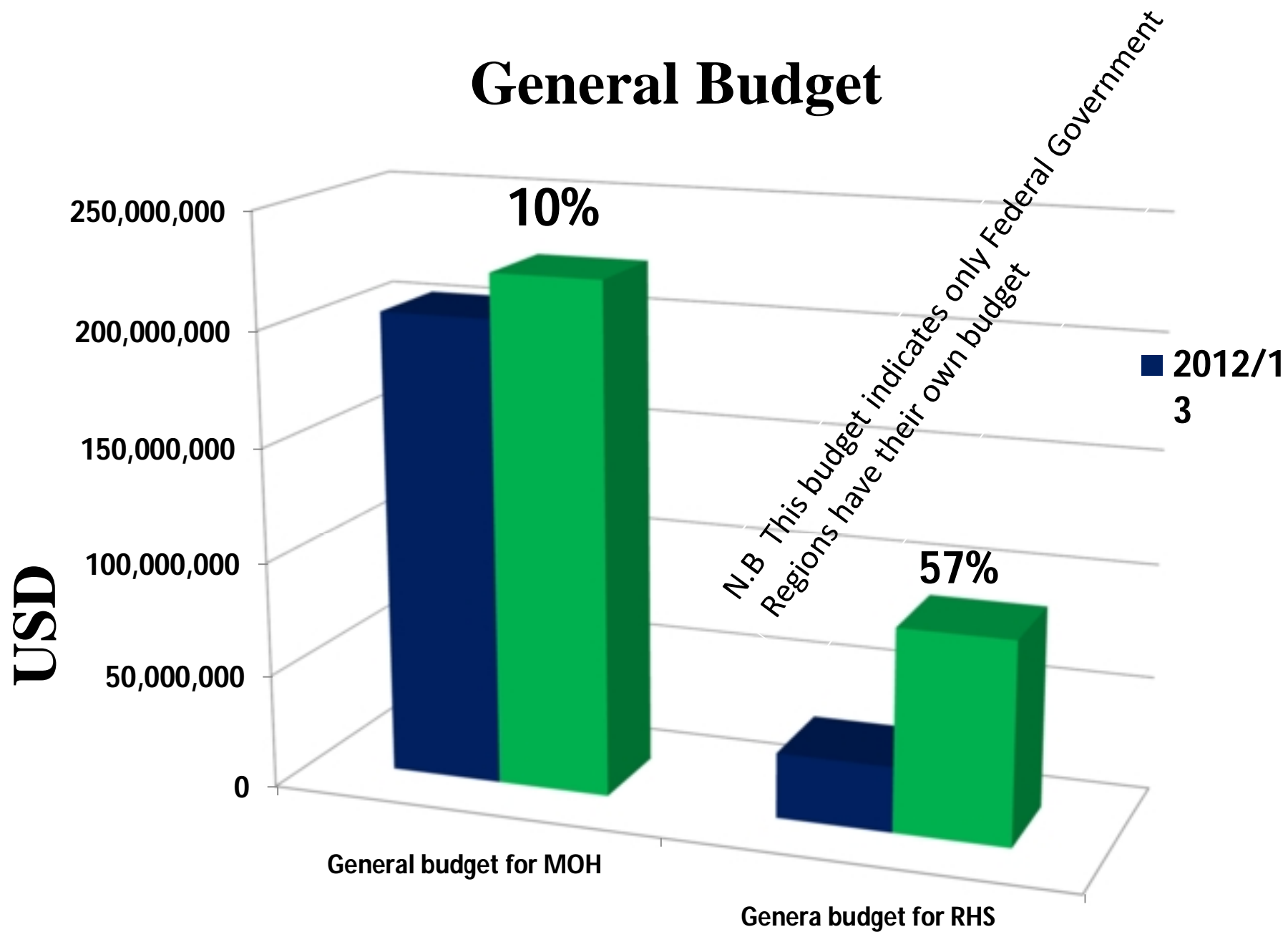
- ❖ During orientation of annual plan of the Ministries **feedbacks were given regarding health budget and share for FP commodity as priority**
- ❖ Standing committees during over sighting insisted relevant ministers **for budgetary increase/sustainability of over all health sector and reproductive health/FP.**

progress



- Because of strong follow up by MPs and above mentioned reason the budget for health sector has increased by 10% (from 4.5 billion in 2013 to 4.6 billion in 2014)
- RH/family planning budget increased by 57% (from 30 million USD in 2013 to 47 million USD in 2014)

General Budget



Lessons learned



- It is important to have government commitment to improve maternal and child health to develop ownership by community
- community participation is mandatory in organized manner
- Oversight function of members help to identify best performances and identify gaps among regions
- There is improving commitment among regions in allocating finance for family planning commodity and RH service quality improvement.

Lessons continued



- Women caucus become the pioneer in advocating for RH/FP issues in the house
- MPs become a front figure to advocate and donate blood for saving mothers life

FP discussion with caucus





The House Speaker And Social Standing Committee Chairperson Donating Blood



Caucus while donating blood



challenges



- Private participation not at the stage of expected
- Acceptance rate at pastoralist community is still the challenge
- Competing priorities in scarce resource allocation



No mother should die while giving
life !



Thank you so much!