

Ethiopia

December 2017

In 2017, more than **1,100,000** consultations were conducted in primary health care centres while more than **148,000** refugees were counselled and tested for HIV More than **4,900** patients were referred to secondary health facilities for further diagnostics and treatment More than **17,200** mothers delivered with the help of skilled birth attendants in 2017

HIGHLIGHTS

- Forty-four primary health care centers and health posts provide services free of charge for refugees and host communities in all 26 camps where health programmes are implemented jointly with the Government of Ethiopia's Administration for Refugee and Returnee Affairs (ARRA) and NGO partners. Close linkages have been established with the Ministry of Health (MoH) and UN partners to enable refugees to benefit from national health programmes.
- In 2017, a total of 1,104,188 consultations were given in all health centers, 10.5% of whom were members of the host communities. 37.6% of the consultations were conducted for children under five years of age.



- Major health problems in the refugee operation are upper respiratory tract infections, diarrhea, lower respiratory tract infections and malaria. The health facility utilization rate reached 1.2 consultations per refugee per year against the standard of 1-4 consultations. The mortality rate in children under five is 0.2/1,000/month and remains within the expected range
- New health service initiatives: Cervical cancer screening combined with treatment of pre-cancer lesions will be rolled out in all refugee camps as part of UNHCRs global initiative and in line with the strategic priorities of the Ethiopian Ministry of Health. The cost-efficient service will contribute to the early detection of cervical cancer and reduce mortality and referral costs.
- Refugee camps are included in the national HIV "test and treat campaign"; large-scale awareness raising campaigns and voluntary testing and counselling are conducted in all camps with 148,247 refugees tested so far. Altogether, 447 persons were identified as HIV positive, more than 90% started ART treatment immediately in line with the country's health policy.



STRATEGIC PRIORITIES

- The Ethiopia Refugee Programme Public Health Sector Strategic Plan 2014 2018, covering health (including HIV &reproductive health), nutrition & food security and WASH, forms the basis of programme planning and implementation in all regions where refugees are hosted.
- Key objectives of the public health response are to improve access to quality primary health care; strengthen
 disease prevention and health promotion; improve childhood survival; ensure access to integrated prevention of
 non-communicable diseases incl. mental health; reduce transmission of HIV and facilitate universal access to
 antiretroviral therapy; improve access to comprehensive reproductive, maternal and newborn health.
- Linkages: Strengthen the multisectoral approach between health, nutrition, WASH and livelihood programmes for cross referral to enhance the intake of complimentary services, as well as preventive health services. Presently community based outreach activities are being reviewed with the aim to have a united outreach workforce addressing topics in health, nutrition and WASH to reduce existing overlaps and enhance efficiency of the programmes.
- Enhancing health service quality: Trainings on emergency preparedness, HIV/ TB, pharmacy management and the Health Information System are conducted in several locations for health practitioners from all refugee camps. An electronic pharmacy management system is being introduced in all camps. Assessments of the quality of care in the health centres are being conducted several camps using UNHCR's revised Balance Score Card.

CHALLENGES



External / Donors Relations

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