

2007 Country Profile: Ethiopia

National HIV prevalence rate among adults (ages 15-49): between 0.9 and 2.5 percent¹
Adults and children (ages 0-49) living with HIV at the end of 2005: Range: 420,000 – 1,300,000¹
AIDS deaths (adults and children) in 2005: Range: 38,000 – 130,000¹
AIDS orphans at the end of 2005: Range: 280,000 – 870,000¹

Ethiopia is one of the Emergency Plan's 15 focus countries, which collectively represent approximately 50 percent of HIV infections worldwide. Under the Emergency Plan, Ethiopia received more than \$48 million in Fiscal Year (FY) 2004, more than \$83.7 million in FY 2005, and approximately \$123 million in FY 2006 to support comprehensive HIV/AIDS prevention, treatment and care programs. PEPFAR is providing \$241.8 million in FY 2007.

Recognizing the global HIV/AIDS pandemic as one of the greatest health challenges of our time, President George W. Bush announced the President's Emergency Plan for AIDS Relief (Emergency Plan/PEPFAR) in 2003 — the largest international health initiative in history by one nation to address a single disease. The United States is changing the paradigm for development, rejecting the flawed “donor-recipient” mentality and replacing it with an ethic of true partnership. These partnerships are having a global impact and transforming the face of our world today.

Partnership to Fight HIV/AIDS

Working in partnership with the people of Ethiopia, the U.S. Government (USG) is strongly committed to the “Three Ones” principles: one national HIV/AIDS action plan, one national monitoring and evaluation system, and one national coordinating authority. The Strategic Framework for the National Response to HIV/AIDS in Ethiopia for 2001–2005 guides HIV/AIDS programming, and an expanded Government of Ethiopia “Road Map” for 2007–2008 is currently under development. To improve program effectiveness under the new strategic plan, the government has moved all of its HIV/AIDS coordinating bodies under the direction of the Ministry of Health.

Key activities under the Emergency Plan include:

- Leveraging and complementing resources of international partners and Ethiopia's public and private sectors, including the Global Fund to Fight AIDS, Tuberculosis and Malaria and the Ethiopian Ministry of Health;
- Expanding work with new partners, particularly non-governmental, community-based and faith-based organizations, to maximize coverage and foster sustainability;
- Mobilizing private health care providers for high-quality prevention, treatment and care services;
- Supporting the development of national prevention, treatment and care guidelines and protocols, establishment of structures and systems for effective implementation of the HIV/AIDS program, and human capacity-building through training and site level support;
- Strengthening Ethiopia's military and police HIV/AIDS response with program services for active duty personnel and their dependents, as well as civilian communities living around rural military health establishments; and
- Fostering supportive environments by encouraging bold leadership, advocating for policy changes, increasing community awareness, and engaging in partnerships with senior government officials and local leaders.

Emergency Plan Results in Ethiopia

# of individuals receiving antiretroviral treatment as of September 30, 2007	81,800
# of HIV-infected individuals who received palliative care/basic health care and support in FY2006 (including TB/HIV) ^{1,2}	310,800
# of orphans and vulnerable children (OVCs) who were served by an OVC program in FY2006 ¹	173,300
# of pregnant women receiving prevention of mother-to-child HIV transmission (PMTCT) services since the beginning of the Emergency Plan ^{1,4}	77,800
# of pregnant women receiving antiretroviral prophylaxis for PMTCT since the beginning of the Emergency Plan ^{3,4}	3,500
# of individuals receiving counseling and testing (in settings other than PMTCT) in FY2006 ^{1,3}	516,800
# of individuals reached with community outreach HIV/AIDS prevention programs that promote Abstinence and/or Being Faithful in FY2006 ⁵	12,397,400
# of individuals reached with community outreach HIV/AIDS prevention activities that promote Condoms and related prevention services in FY2006 ⁵	1,035,000
# of USG condoms shipped in Calendar Year 2006	8,580,000

Note: Numbers may be adjusted as attribution criteria and reporting systems are refined. Numbers above 100 are rounded to nearest 100.

¹ Total results combine individuals reached through downstream and upstream support. ² In Ethiopia the reported number of HIV-infected clients receiving care/treatment for TB disease dropped by 67% compared to the previous year's report. This was primarily due to underreporting. Last year partners were able to collect information directly from the delivery sites. This year national numbers are reported directly by the MOH and the USG team reports that these numbers are greatly underestimated. The team is currently working with the MOH and other USG partners to collect the unreported information and improve the reporting mechanism. ³ It is possible that some individuals were counseled and tested more than once. ⁴ It is possible that some pregnant women received antiretroviral prophylaxis more than once over the two-year period, e.g. HIV positive women who were pregnant more than once. ⁵ Number of individuals reached through downstream site-specific support includes those receiving services at U.S. Government-supported service delivery sites.



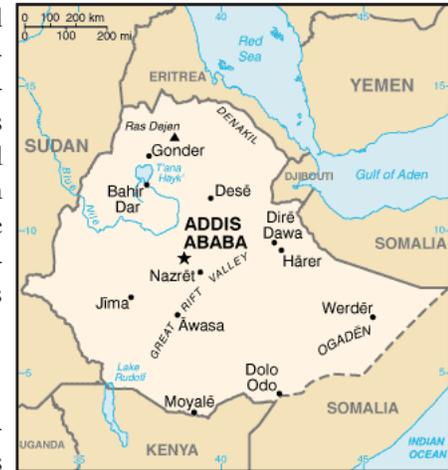
Emergency Plan Activities in Ethiopia

HIV/AIDS in Ethiopia

Ethiopia faces a mixed epidemic among sub-populations and geographic areas, with an estimated overall HIV prevalence rate between 0.9 and 2.5 percent among adults ages 15 to 49.¹ While previous estimates were higher, expansion of surveillance data and improved analyses resulted in significantly lower estimates for 2005. Based on antenatal clinic surveillance data, HIV prevalence has declined to about 10.1 percent in urban areas and has stabilized to an estimated 1.8 percent in rural areas. The primary mode of HIV transmission in Ethiopia is heterosexual contact. Young women are more vulnerable to infection than young men; urban women are three times as likely to be infected as urban men, although in rural areas the difference between genders is negligible. Populations at higher risk for HIV infection include people in prostitution, police officers and members of the military.

Challenges to Emergency Plan Implementation

Ethiopia has a large and extremely vulnerable population of 74.7 million, with an estimated 50 percent of the population living below the poverty line.² HIV/AIDS remains one of the key challenges for the overall development of Ethiopia, as it has led to a seven-year decrease in life expectancy and a greatly reduced workforce.³ Reduced productivity, civil conflict, poor farming conditions, and recurrent droughts leave six to 13 million people at risk of starvation each year.³ In the health sector, there is a shortage of health workers and counselors, in addition to poor access to sparse health services, inadequate sanitation, inefficient procurement systems, and weak monitoring and evaluation systems.³ Conflict, famine and drought have led to widespread population movements, adding to displacements caused by cross-border tensions. As of January 2007, there were an estimated 97,300 refugees in Ethiopia.



Critical Interventions for HIV/AIDS Prevention:

- Conducted on-the-job training and provided mentoring to health care workers in prevention of mother-to-child HIV transmission services.
- Trained youth, teachers, parents and community leaders to provide behavior change communication messages promoting abstinence and faithfulness for youth, and expanded prevention activities in workplaces and private health facilities.
- Provided HIV prevention education, counseling and testing, and support to HIV-affected families along the transport corridor between Addis Ababa and Djibouti.
- Supported efforts by the Ministry of Health and Ethiopian Red Cross Society to strengthen blood transfusion services in the country.
- Engaged with the Ethiopian Orthodox Church, Ethiopian Muslim Development Agency and other faith-based organizations to work with men to address harmful social norms and practices that increase the vulnerability of women and girls to HIV infection.

Critical Interventions for HIV/AIDS Treatment:

- In collaboration with the Global Fund to Fight HIV/AIDS, Tuberculosis and Malaria, supported procurement and distribution of antiretroviral drugs to health facilities across the country providing antiretroviral treatment (ART) services. Supported strengthening of procurement and supply chain management systems for all HIV/AIDS commodities. Provided technical assistance at federal, regional and site levels to ensure immediate and long-term ART program implementation.
- Initiated and supported innovative approaches to meet human resource needs, including twinning initiatives, in-service and pre-service training, task shifting, and new cadres of health workers.
- Enhanced involvement of people living with HIV/AIDS in treatment activities through professional associations and peer education programs.
- Established one national monitoring system for ART and supported sites to build capacity to collect, analyze and use data to improve the quality of ART services.

Critical Interventions for HIV/AIDS Care:

- Provided technical assistance to the Ethiopian Ministry of Health in expanding quality palliative care and TB/HIV services at public and private health facilities.
- Supported efforts of the Ethiopian Ministry of Health to implement a community counselors program through recruitment, curriculum development, training and mentoring.
- Strengthened HIV counseling and testing efforts at public and private facilities, workplace clinics, mobile and service sites.
- Supported efforts of the Ministry of Health to update existing national HIV counseling and testing guidelines.
- Prioritized food and nutrition, safe water, education, protection, and health care in services for orphans and vulnerable children. Established links with Title II Food For Peace and the World Food Program to expand service coverage for these children.

¹ UNAIDS, Report on the Global AIDS Epidemic, 2006.

² CIA, World Factbook-Ethiopia, 2007.

³ World Food Programme, Draft Country Programme Document for Ethiopia (2007-2011), 2006.