Ethiopia

Country Focus Areas

- Add GFF and World Bank resources into SDG Pool funds with 10 other partners that the Ministry of Health can use to purchase drugs and medical supplies for health facilities at regional levels and implement the HSTP / Investment Case and support improvement of RMNCAH results.
- Support the government's efforts to increase the budget share for health from 7 percent in 2015 to 11 percent in 2020.
- Improve equity in public **spending** by increasing the proportion of functioning communitybased health insurance schemes from 23 percent in 2017 to 53 percent in 2021.
- Support public financial management reforms to improve budget execution and increase domestic resource mobilization.
- Strengthen private sector engagement, support publicprivate sector dialogues, and build capacity and opportunities for collaboration.
- Strengthen monitoring, supervision, and safe storage of civil registration documents, and support advocacy and awareness campaigns.

RMNCAH-N Core Indicators

Maternal mortality ratio: 412 per 100,000 live births

Neonatal mortality ratio: 30 per 1,000 live births

Under-five mortality ratio: 55 per 1,000 live births

Adolescent birth rate: 80 per 1,000 women

Percent of births <24 months after the preceding birth: 21.7%

Stunting among children under 5 years of age: **37%**

Moderate to severe wasting among children under 5 years of age: 7%

Health Financing Core Indicators

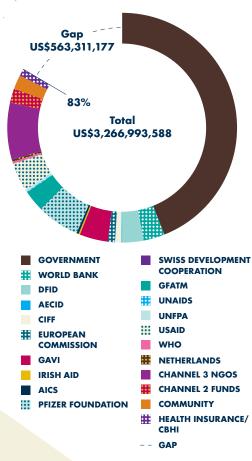
Health expenditure per capita financed from domestic sources: **US\$10.60**

Ratio of government health expenditure to total government expenditures: 8.1%

Percent of current health expenditures on primary/outpatient health care:

Incidence of catastrophic and impoverishing health expenditures: 4.91% catastrophic 0.95% impoverishing

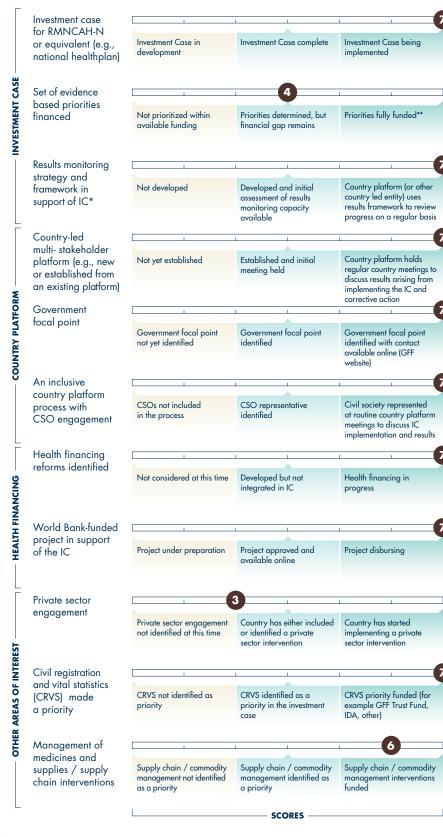
Resource Mapping



Community represents the free labor contribution of the community converted in monetary value.

The resource mapping presented here is for FY 2018 to 2019. There are currently over 15 external partners, in addition to the Ministry of Health, who are aligned with and invested in financing the IC. Ethiopia has conducted a thorough resource mapping, including community contributions that have been converted into monetary value. Additionally, they have estimated the contributions of Community Based Health Insurance (CBHI) scheme, which subsidizes the primary health care package. Ethiopia also has two additional funding flows that are not typically documented in other countries; Channel 2 funds refer to financing that is on-plan, but not on-budget, while Channel 3 funds refer to financing from NGOs to the health sector that do not flow through the government system.

Monitoring the Country-Led Process



- * Both included in the IC document or a separate document
- ** Meaning that funding was allocated, disbursed and released payment done
- *** ANC4 = four antenatal care visits

ART = antiretroviral therapy; ARV = antiretroviral; DTP3 = vaccination for Diphtheria. Tetanus, and Pertussis: ORS = oral rehydration solution: PMTCT = prevention of mother-to-child transmission; PNC = postnatal care.