Ethiopia
NCD Joint programming mission,
13-17 November 2017

Key mission findings

1. There is significant concern from almost all ministries about the impact of NCDs on the country’s economy and productivity. There is the will to adopt a multisectoral approach to tackle NCDs.

2. There is high level political commitment from the First Lady, Mrs. Roman Tesfaye Abneh, (Aug. 2012- Apr. 2018) who champions women and children’s health through improved education, nutrition, cancer control and women’s empowerment, all of which significantly impact NCD prevention and control.

3. There have been national health sector strategies for NCDs and mental health however, both strategies expired in 2016 and are in the process of being updated. There is continued commitment to develop the first multisectoral NCD strategy.

4. While there is no national multisectoral NCDs committee, there are examples of national committees in other areas such as tobacco control, nutrition, road safety and cancer.

5. The WHO Framework Convention for Tobacco Control was ratified in 2014 and a tobacco control directive was issued in 2015.

6. There is limited expenditure dedicated to addressing NCDs. Health only accounts for 4.9% of government expenditure and only 8% of the Ministry of Health budget goes towards NCDs and mental health.

Key adult NCD mortality and risk factors*

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<tr>
<th>Risk Factor</th>
<th>Probability/Prevalence</th>
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<tr>
<td>Probability of premature mortality from NCDs</td>
<td>18% (2016)</td>
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<td>10% of adult men and 17% of adult women are insufficiently physically active (2016)</td>
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<td>4% of adult men and 4% of adult women have raised fasting blood glucose (2014)</td>
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<td>23% of adult men and 24% of adult women have raised blood pressure (2015)</td>
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<td>8% of men and 0.3% of women (aged &gt;= 15 years) smoke tobacco (2016)</td>
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<tr>
<td>12% of adult men and 24% of adult women are overweight (2016)</td>
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<td>Pure alcohol per capita consumption: 2.8 litres per year (population 15+, 2016)</td>
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<td>98% of adults do not consume sufficient amounts of fruits and vegetables (2015)</td>
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“We must continue to address maternal and child health as well as communicable diseases, but we must also protect our population from NCDs and ensure access to quality prevention and treatment services.”

H.E Professor Yifru Berhan Mitke, Minister of Health of Ethiopia
Key recommendations

1. Ensure that the package of basic health services includes early diagnosis and treatment of NCDs, mental disorders and injuries.

2. The Government should develop a clear plan for financing the country’s response to NCDs, mental health and injuries.

3. Convene a high-level national summit on NCDs with the aim of establishing a high-level multisectoral coordination committee. The mechanism should include government, regional authorities, the UN system, development partners, the private sector and civil society.

4. Scaling up the health system response through: a) developing the skills and capacity of health care workers in the area of NCDs and mental health; b) scale up the availability of essential diagnostic equipment and treatment; c) maximize the impact of government and development assistance programs that can strengthen the NCDs response; and d) accelerate implementation of the national cervical cancer programme.

5. Increase excise taxes on tobacco products in line with global

Next steps

1. The high-level forum on NCDs jointly organized by the United Nations Resident Coordinator’s office, Ministry of Health and the World Health Organization will be held in mid-2018 to establish a national coordination mechanism for NCDs.

2. A national multisectoral plan will be developed following the establishment of the national coordination mechanism for NCDs.

3. Through the Resolve to save lives project Scale-up the WHO-PEN strategy taking hypertension as an entry point for cardiovascular risk assessment at PHC level.

Adding value: actions taken following the mission

1. The UNIATF Mission findings and recommendations were presented to the Minister of Health, United Nations Resident Coordinator and Development Assistance Groups (DAG) Ethiopia.

2. A seed fund awarded by the government of Japan was received through UNIATF to take forward activities for strengthening multi-sectoral NCD responses.

3. The United Nations Resident Coordinator’s office, the Ministry of Health and The World Health Organization are jointly working to conduct a high-level forum on NCDs for the establishment of a national multisectoral coordination mechanism that would be co-chaired by the highest government authority and the United Nations Resident Coordinator.

4. In order to leverage UN Country Team support for the Government of Ethiopia, an existing working group; UNDAF Health and nutrition result group has been mandated to work on NCDs and is currently working to develop a joint program on NCDs across the UN system.

“We recognize that many of the solutions to NCDs lie in the domain of sectors beyond health, for example finance, urban planning, housing, education, and labour”

H.E Professor Yifru Berhan Mitke, Minister of Health of Ethiopia

“NCDs impact Ethiopia’s development on multiple fronts, from lost productive capacities to out-of-pocket spending impoverishing families and children dropping out of school to care for a sick relative.”

Ahunna Eziakonwa-Onochie UN Resident Coordinator, UNDP Resident Representative and UN Humanitarian Coordinator in Ethiopia

Additional information on the status of NCDs in Ethiopia can be found on the WHO NCD DataFinder app.