

**Opening Remarks by
H.E. Dr. Kebede Worku, State Minister of Health
Federal Democratic Republic of Ethiopia**

**4th CORPORATE AFRICA BUSINESS COALITION PARTNERSHIP FOR PREVENTION AND CARE
AFIRCA HEALTH CONFERENCE**

08 February 2011, Addis Ababa, Ethiopia

Dignitaries

Distinguished Guests,

Colleagues,

Ladies and Gentlemen

Good Morning! On behalf of the Federal Ministry of Health and the Government, I would like to extend my warmest welcome to all of you.

I am honoured to welcome you to Addis Ababa and to this 4th Corporate Africa Business Coalition Partnership and Care Africa Health Conference - your presence here is highly valued. I would also appreciate the privilege you have given me to say a few words in this opening session of an important deliberation.

Ladies and Gentlemen,

Please allow me to take this opportunity to thank you personally for taking the time to be here today, for your exemplary leadership and commitment to strengthening public and private partnerships in our fight against the three diseases and improve the health conditions of citizens across the Continent.

It is evident that our respective successes in the health sector so far, have been due to partnerships between governments, development partners, civil society, affected communities and the private sector. It is greatly inspiring and encouraging to witness such unwavering commitment from this coalition you formed to the fight against our common problems, especially at a time of global economic slowdown as well as consequent natural and political unrests.

I am being honest in saying that it is truly impressive to see individuals like you, who are keen to invest their time and energy in our efforts to mobilise resources, including capacity building and technical assistance for AIDS, Tuberculosis and Malaria programmes in Africa.

Ladies and Gentlemen,

The first step indicator of the 'Partnership Index' states 'Alignment of Objectives'; and that is exactly what we are doing in the Ethiopian health sector - harmonisation and alignment of efforts and support. Through the Health Sector Development Programme (HSDP), together with our partners, we are making real progress in building our health system, expanding our service delivery and scaling-up our responses to our health challenges.

More than ever, the Government of Ethiopia fully recognises the strong linkage between health improvement and economic prosperity. The HSDP forms part a comprehensive national strategic plan that covers all aspects of policy, planning, implementation, monitoring and evaluation of the health sector. With a time horizon of twenty years, the health sector development strategy relies on consecutive five-year-plans - each phase has recorded significant achievements with their own implementation challenges from which lessons can be learned for further planning. Since 1997 Ethiopia has gone through three phases of health sector development programme and we just recently started to rollout the 4th phase, which is also part of the bigger national Growth and Transformation Plan.

The investments that the Ethiopian Government is making in the six main health system building blocks - expansion of access to services, strengthening of the health workforce and health information systems, fortifying the health commodity procurement and supply systems, building up the health financing capacities and placing effective governance mechanisms are bearing some fruit in our lands. Our efforts towards a decentralised and democratised health care system also seeks to ensure universal access to primary health care to all citizens, promoting inter-sectoral collaboration, enhancing wider input from development partners, NGOs, communities and the private sector to achieve our national and international health targets.

Ladies and Gentlemen,

28 HIV infections per 1,000.

Please allow me to present you with some of the encouraging results we have managed to register and the challenges we are facing particularly in the areas of TB, HIV/AIDS and Malaria....

...g and testing for all, prevention of mother-to-child transmission (PMTCT), and the

provision of anti-retroviral therapy, and access to all these three services have expanded. As you are well aware, over 50 million Ethiopians live in malaria prone areas and its burden remains heavy in our country. Cognisant of this, the Government launched ambitious malaria control scale-up since 2005, which comprises various malaria controlling mechanisms, including the use of newly developed artemisinin-based drugs, rapid diagnostic tests that allows for the identification of malaria without microscope, long-lasting insecticide bed-nets and indoor spraying of pesticides.

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To date, we have managed to distribute more than 36 million bed nets (including the replacements and about 4 million is being shipment) and had indoor spraying within 5.1 million households. These efforts led our nation to a substantial decrease in malaria morbidity and mortality rates - making Ethiopia the third highest bed net coverage achiever in sub-Saharan Africa after Togo and Sierra Leone. And in recognition of Ethiopia's performance, the Global Fund to Fight AIDS, TB and Malaria has repeatedly provided financial support for our malaria programmes. It is with great determination and vision that I tell you that by 2015, Ethiopia hopes to eliminate malaria completely from less-endemic regions and achieve near zero transmission in other parts of our land.

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But our efforts are not without challenges and we acknowledge that more should be done in terms of increasing indoor residual spraying coverage, environment management for vector control, adherence to rapid diagnostic test and educating our communities (especially by pregnant women and children under five) about appropriate usage of bed nets to pre-empt malaria epidemics.

Distinguished Guests,

In terms of HIV and AIDS, with adult prevalence rate of 2.3%, HIV/AIDS have been successfully controlled in Ethiopia in comparison to other sub-Saharan African countries. However, given the enormous health and social costs of the epidemic, it remains a top priority for the Government. In the next five years, we plan to halve the new HIV infection rate - by 2015

there should be fewer than 14 new HIV infections per 1,000 persons as opposed to the current 28 HIV infections per 1,000.

The national campaign against HIV focuses on the provision of three services - voluntary counselling and testing for all, prevention of mother-to-child transmission (PMTCT), and the provision of anti-retroviral therapy; and access to all these three services have expanded greatly in the past five years. The Federal Ministry of Health in collaboration with its health sector development partners currently provides antiretroviral treatment to 207,733 Ethiopians with HIV, representing the steepest increase in antiretroviral drug coverage in the African continent.

Recent data from UNAIDS shows, that Ethiopia is on the right track in terms of progress towards the universal targets set in the 'Millennium AIDS campaign', that is antiretroviral treatment care, and support for people living with the virus, counselling and testing programmes to support orphans and vulnerable children. Increased use of antenatal services in recent years is also helping to better integrate mother-to-child prevention or PMTCT into maternal, neonatal and child health programmes.

However, we recognise that we need to work more towards our access and utilisation of PMTCT services as such our 4th HSDP gives high priority to the aggressive scale-up of PMTCT services over the coming years.

Other non-clinical supports for people living with the virus are also established to ease the socio-economic pressure of the disease. Various associations of PLHIV are organised under the umbrella of the 'Networks of Positive Ethiopians' (NEP+), to ensure citizens living with HIV receive nutritional, educational and shelter support as well as benefit from numerous income-generating activities.

Distinguished Guests,

As far as TB control is concerned, it has remained one of the major global public health problems and our country is not immune to this problem. Its linkage with HIV/AIDS brings further strain to our health care system. Therefore, our subsequent health sector

development programmes focused on enhancing the detection rate and completion of treatments as the main strategy for the prevention and control of TB.

Ethiopia adopted the 'Directly Observed Treatment Short-Course' (DOTS) system in the year 1991 and by the year 2009/10, 35.4 per cent of all the health facilities (i.e. 3,465 out of the 14,329 - hospitals, health centres, clinics, and health posts) provided TB-DOTS service and 879 (7 per cent) health facilities were implementing TB/HIV collaborative activities.

I must admit that we are lagging behind with our TB detection rate and therefore, we are currently revamping our efforts to reach the 85% target set internationally. Over the next five years, the Ministry plans to reduce the TB mortality rate by 2/3 and double the TB case detection rate in the community to ensure timely diagnosis and treatment to all TB patients.

So much being said on our efforts, I want to highlight few points with regard to strengthening partnership and particularly private-public partnership - a core element of our work, which brought all of us here today.

The steadfast Government leadership on health continues to foster solid collaboration among diverse partners. The substantial results our country has registered towards the health MDGs in recent years would not have been possible without the sustained contributions of these partners, which include longstanding bilateral and multilateral agencies, non-governmental and faith-based organisations, civil society, as well as the private sector.

From the overall joint governance of the health sector to, financial and technical assistance, capacity building and support, to the provision of universal primary health care services at the local levels, the engagement of country partners has been substantial and wide-ranging.

As I mentioned earlier, harmonisation and alignment of partners' support has been a key priority pursued proactively by the Government. In August 2008, Ethiopia became the first country to sign a Country Compact within the framework of the International Health Partnership (IHP+). The Ethiopian IHP Compact serves as the overarching framework for coordinating all official development assistance (ODA) to the country's health sector and at its core lays a joint ambition to accelerate progress towards the health-MDGs.

Under the leadership of the Federal Ministry of Health, partners are making steady progress towards the harmonisation objectives, and the vision of 'one-plan, one-budget, one-report' based on country-led processes, and harmonised funding mechanisms - a clear indication of our understanding of the importance of partnership to tackle our common obstacles and bring about sustainable development.

The Ministry has embarked on the implementation of the newly designed business process re-engineering (BPR) - a sectorwide reform that aims to bring about a fundamental transformation to the way we serve our citizens. This radical and ambitious reform would allow us to move away from 'business as usual' way of working concept to a set of 'customer-oriented' business disciplines, which underline efficiency, principles of 'one-stop-shopping' and clear results based on 'end-to-end' accountability structures, cascaded down to each staff member of our health care delivery system.

The public-private partnership is further highlighted in our efforts to ensure sustainable health financing mechanisms - through a comprehensive health insurance system.

The legal framework of the social health insurance component for formal sector employees, which includes the private sector, was endorsed unanimously by the Parliament last year - historical breakthrough for the country and one that stands to bring about a big change in the health and living conditions of millions of families over the coming years. The community-based health insurance mechanism of this initiative is also being piloted in a number of districts and experts expect to refine and scale-up this scheme in the near future.

Our newly developed *Growth and Transformation Plan* also encourages the private sector to invest in the sustainable development of our country and the people. Apart from the substantial investments made in various sectors of the country, which contribute to the wellbeing of our nation, ample investments have also been made in public health. For example, out of the current 181 hospitals operating in the nation 57 are owned and managed by the private sector. You will also be able to notice the booming of specialised private clinics and pharmacies during your stay in Addis. Number of pharmaceutical plants has increased from 1 to ~~14~~ 14 in the last 19 years as a result of declaration of free market economy. The country has immense opportunities in the areas of pharmaceuticals and hospital service investments: the sustained double digit economic growth in the last seven years, capital of

AU and seat for many diplomatic & international communities, our Airlines connecting many African countries using Addis Ababa as its hub, government's incentives for investors, and others.

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And to achieve the national target of universal primary health care coverage, both the Federal Ministry of Health and Regional Health Bureaus have prioritised health centre expansion for which the active involvement of the private sector is necessary.

Disruptive Goals

Ethiopia's requirements for medical supplies, medical technology, infrastructure, and health care facilities are also priority areas, and interested individuals and companies are encouraged to work with the Government and the health sector in general.

Good Morning On behalf of the Federal Ministry of Health and the Government, I would like

I would therefore urge the business community to commit to producing relevant and innovative means of partnering with the Government to help secure investment and reduce insecurity within the health sector. We all must play a significant role in health policies, mobilising resources and providing strategic direction for our fierce battle against AIDS, Tuberculosis, Malaria and beyond.

opening section of an important deliberation.

Ladies and Gentlemen,

Ladies and Gentlemen,

We are really counting on your help to foster stronger and more cohesive engagement of African countries in our efforts to see a healthy, productive and prosperous Africa. Once again a very warm welcome to all who came from abroad- I wish you fruitful deliberations and a very pleasant stay in Addis Ababa.

of citizens across the Continent

Thank you.
