

STRATEGIC FOCUS

The U.S. Centers for Disease Control and Prevention (CDC) established an office in Ethiopia in 2001. CDC Ethiopia works closely with the Government of Ethiopia (GOE) through the Ministry of Health (MOH) and other partners to save lives by strengthening HIV and tuberculosis (TB) prevention and control efforts through support from the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR).

Reaching and Sustaining HIV Epidemic Control: In coordination with other U.S. agencies supported by PEPFAR, CDC partners with the GOE to achieve and sustain HIV epidemic control. Through strategic partnerships, CDC focuses on improving HIV and TB case finding, care and treatment services, performance monitoring, data for decision-making, and strengthening systems for disease surveillance, laboratory, and health workforce.

Building Local Partner Capacity: CDC collaborates with the GOE at federal, regional, local, and site levels by providing technical, financial, and program management assistance. In fiscal year (FY) 2022, 70 percent of CDC funding went to local partnerships, including MOH, Ethiopian Public Health Institute, and Regional Health Bureaus.

KEY ACTIVITIES AND ACCOMPLISHMENTS

HIV Treatment Services: By partnering with the GOE, CDC supports antiretroviral therapy (ART) services for more than 459,887 people living with HIV (PLHIV) (PEPFAR 2022). To attain epidemic control, the national strategy focuses on improving case finding, durable linkage of newly identified clients to care and treatment services, and patient-centered treatment, including differentiated service delivery for treatment continuity. Additionally, the strategy focuses on optimizing ART options and enhancing HIV viral load monitoring and clinical management, as well as cervical cancer prevention services.

Prevention of Mother-to-Child Transmission (PMTCT): In FY22, CDC-supported PMTCT sites where 11,340 HIV-positive pregnant/breastfeeding women received ART to prevent HIV transmission to their children. Approximately 10,038 infants subsequently received an HIV test in the first 12 months after birth, providing an estimated early infant diagnosis coverage of 94 percent (PEPFAR 2022).

TB HIV Prevention and Control: The CDC supports a package of evidence-based interventions and services to help reduce TB incidence and mortality among PLHIV. In FY22, 53,372 TB patients were enrolled, and 50,972 were tested for HIV at CDC-supported sites. The CDC provided TB preventive treatment for 38,570 PLHIV, scaled up the use of shorter regimens, and achieved an 84% completion rate. Moreover, the CDC continues to encourage the scale-up of lateral flow urine lipoarabinomannan assay (LF-LAM) to assist in the diagnosis and prompt treatment of persons with TB.

Key Population (KP) Friendly Services: CDC technical assistance strengthens confidential and high-quality KP HIV prevention and treatment services in the public sector. Between 2019-2022, CDC implementing partners supported over 100 KP-friendly clinics in public health facilities, including providing comprehensive HIV clinical services to over 30,000 female sex workers (PEPFAR 2022).

Voluntary Medical Male Circumcision (VMMC): VMMC is an HIV prevention strategy that reduces HIV acquisition. Between 2009-2022, CDC supported the national program to provide safe and effective VMMC to over 250,000 males ages 15+ through serial VMMC campaigns and routine services (PEPFAR 2022).

Strengthening Laboratory Systems: CDC supports the national scale-up of routine HIV viral load monitoring, a critical tool in improving treatment quality and individual health outcomes for PLHIV. 82 percent of eligible clients received viral load testing (PEPFAR 2022). CDC supports strengthening laboratory personnel capacity, quality assurance systems, and specimen referral networks and improving recovery efforts in conflict-affected regions. CDC assures availability and quality of HIV testing, recent HIV infection testing algorithm, early infant diagnosis, human papillomavirus, and TB diagnosis.

HIV Case-based Surveillance and Response: CDC Ethiopia supports the implementation of the national HIV case-based surveillance, violence against children survey (VACS), an annual HIV estimation and projection exercise.

Key Country Leadership

Prime Minister:
Abiy Ahmed

Minister of Health:
Lia Tadesse

Ambassador
Ervin Jose Massinga

DGHT Program Director
Tekeste Damena (Acting)

Country Quick Facts
(worldbank.org/en/where-we-work)

Per Capita GNI:
\$1,020 (2022)

Population (millions):
123.37 (2022)

Under 5 Mortality:
46.8/1,000 live births (2021)

Life Expectancy:
65 years (2021)

Global HIV/AIDS Epidemic
(aidsinfo.unaids.org)

Estimated HIV Prevalence (Ages 15-49): 0.8% (2022)

Estimated AIDS Deaths (Age ≥15): 9,800 (2022)

Estimated Orphans Due to AIDS: 310,000 (2022)

Reported Number Receiving Antiretroviral Therapy (ART) (Age ≥15): 490,004 (2022)

Global Tuberculosis (TB) Epidemic
(who.int/tb/country/data/profiles/en)

Estimated TB Incidence: 119/100,000 population (2021)

TB Patients with Known HIV-Status who are HIV-Positive: 5.2% (2021)

TB Treatment Success Rate: 86% (2020)

DGHT Country Staff: 76
Locally Employed Staff: 68
Direct Hires: 5
Fellows & Contractors: 00

Our success is built on the backbone of science and strong partnerships.

