

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 Federal Ministry of Health (FMOH) 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) 2021, 70 percent of CDC funding went to local partnerships, including the FMOH, Ethiopian Public Health Institute (EPHI), 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 422,000 people living with HIV (PLHIV) (PEPFAR 2021). 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 (VL) monitoring and clinical management.

Prevention of Mother-to-Child Transmission (PMTCT): In FY21, CDC-supported PMTCT sites where 11,745 HIV-positive pregnant/breastfeeding women received ART to prevent HIV transmission to their children. Approximately 9,885 infants subsequently received an HIV test in the first 12 months after birth, providing an estimated early infant diagnosis coverage of 84 percent (PEPFAR 2021).

HIV and Tuberculosis Co-Infection: During the COVID-19 pandemic, implementing innovative, patient-centered approaches ensured the continuity of TB health services, including TB preventive therapy (TPT). In FY21, CDC supported TPT provision (including the scale-up of shorter regimens) for 34,349 PLHIV, of whom 84 percent completed therapy. In FY22, CDC supported the introduction of urine LF-LAM for TB diagnosis among PLHIV; currently, more than 3,000 health care workers have been trained on its use. In FY21, CDC implemented a package of infection prevention and control (IPC) activities at triage source control, inpatient cohorts and isolation, and health care worker screening at 27 high-volume facilities. Presently, the scale-up of IPC implementation activities continues at nearly 100 facilities.

Key Population (KP) Friendly Services: CDC technical assistance strengthens confidential and high-quality KP HIV prevention and treatment services in the public sector. Between 2019-2021, 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 2021).

Voluntary Medical Male Circumcision (VMMC): VMMC is an HIV prevention strategy that reduces HIV acquisition. Between 2009-2021, CDC supported the national program to provide safe and effective VMMC to over 200,000 males ages 15+ through serial VMMC campaigns (PEPFAR 2021).

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. By FY 2021, 76 percent of eligible clients received viral load testing (PEPFAR 2021). CDC supports strengthening laboratory personnel capacity, quality assurance systems, and specimen referral networks, as well as improving recovery efforts in conflict affected regions. CDC helps assure the laboratory availability, quality, and safety of HIV rapid tests, detection of recent HIV infection, early infant diagnosis, and TB diagnosis and management.

HIV Case-based Surveillance and Response: CDC Ethiopia supports developing and implementing a national HIV case-based surveillance system. This includes introducing recent infection testing for all newly identified cases and response activities for any identified clusters of new infections.

Key Country Leadership

Prime Minister:
Abiy Ahmed

Minister of Health:
Lia Tadesse

Chargé d'Affaires
Tracey Jacobson

CDC/DGHT Director:
Caroline Ryan

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

Per Capita GNI:
\$960 (2021)

Population (millions):
117.88 (2021)

Under 5 Mortality:
48.7/1,000 live births
(2020)

Life Expectancy:
67 years (2020)

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

Estimated HIV Prevalence
(Ages 15-49): 0.8% (2021)

Estimated AIDS Deaths
(Age ≥15): 9,700 (2021)

Estimated Orphans Due to
AIDS: 280,000 (2021)

Reported Number
Receiving Antiretroviral
Therapy (ART) (Age ≥15):
465,081 (2021)

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

Estimated TB Incidence:
132/100,000 population
(2020)

TB Patients with Known HIV-
Status who are HIV-Positive:
6.5% (2020)

TB Treatment Success Rate:
90% (2019)

DGHT Country Staff: 76

Locally Employed Staff: 69
Direct Hires: 7
Fellows & Contractors: 00

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

September 2022 | The CDC Division of Global HIV & TB activities are implemented as part of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR); non-HIV related TB activities are supported by non-PEPFAR funding.

