Country Situation

Background Statistics

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<tbody>
<tr>
<td>Number new paediatric HIV infections</td>
<td>18,900</td>
<td>–</td>
<td>13,000</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
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<tr>
<td>Number HIV-associated maternal deaths</td>
<td>1,740 (2005)</td>
<td>760</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
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<tr>
<td>Percentage of under-5 deaths due to HIV</td>
<td>2% (2008)</td>
<td>2%</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>ART coverage among children (ages 0-14)</td>
<td>11%</td>
<td>–</td>
<td>19%</td>
<td>–</td>
<td>–</td>
<td>–</td>
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<tr>
<td>HIV incidence in women (ages 15-49)</td>
<td>0.04%</td>
<td>–</td>
<td>0.04%</td>
<td>–</td>
<td>–</td>
<td>–</td>
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<tr>
<td>Percentage of married women with unmet need for family</td>
<td>36% (2005)</td>
<td>25%</td>
<td>25%</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
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<tr>
<td>Parenting Rate</td>
<td>–</td>
<td>–</td>
<td>35%</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
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<tr>
<td>Maternal ARV coverage (prophylaxis and ART coverage,</td>
<td>8%</td>
<td>–</td>
<td>24%</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
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<tr>
<td>excluding single-dose nevirapine)</td>
<td></td>
<td>–</td>
<td>11%</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Breastfeeding ARV Coverage</td>
<td>2%</td>
<td>–</td>
<td>11%</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
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<tr>
<td>ART coverage among HIV+ pregnant women in need of</td>
<td>4%</td>
<td>–</td>
<td>24%</td>
<td>–</td>
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Although adult HIV prevalence (ages 15-49) estimates for Ethiopia are currently under revision, HIV prevalence among pregnant women (all ages) was estimated at 1.1% in 2009. In 2011, approximately 42,900 pregnant women living with HIV (PWLHIV) delivered. Between 2009 and 2011, Ethiopia has seen a 31% decline in the number of new paediatric HIV infections – from 18,900 to 13,000.

In 2010, PMTCT services were available in only 43% of all ANC facilities. Although HIV testing coverage among pregnant women increased from 2% in 2005 to 26% in 2010, it is still very low. In 2011, only 24% of PWLHIV received efficacious ART regimens for preventing mother-to-child transmission of HIV. The mother-to-child transmission rate, estimated at 30% in 2011, is still very high.

Ethiopia has developed an accelerated national EMTCT plan (2011-2015) and has adopted WHO Option A regimen for prophylaxis.

Reaching High Level Targets

Global 2015 Targets

- Reduce the number of new HIV infections among children by 90%
- Reduce the number of HIV-associated deaths to women during pregnancy, delivery or puerperium by 50%

Child Targets

- Reduce under-five deaths due to HIV by at least 50%
- Provide antiretroviral therapy for all children with HIV

Globally, an estimated 330,000 children were newly infected with HIV in 2011 – down 24% from the 430,000 new infections in 2009. New paediatric HIV infections rose consistently until peaking at 560,000 in 2002 and 2003. Despite the significant progress that has been achieved, much more progress is needed in order to achieve that Global Plan target of a 90% reduction in the number of new HIV infections in children by 2015.

Figure 1: Estimated number of new paediatric HIV infections globally (ages 0-14), 1990-2011, and 2015 target

Source: UNAIDS, unpublished HIV estimates, 2012
Key Points

According to facility data, the uptake of at least one ANC visit among pregnant women was good in 2010 (81%), yet only 10% of pregnant women in Ethiopia accessed skilled birth attendance in 2011, and the maternal mortality ratio in 2010 was high (350/100,000) [3]. In 2010, only 26% of pregnant women were tested for HIV and, in 2011, only 24% of PWLHIV received more efficacious regimens for PMTCT.
Program Status According to PMTCT Prongs

Global 2015 Target

- 90% of HIV-positive pregnant women in need of ART for their own health are started on lifelong ART

Background Statistics

<table>
<thead>
<tr>
<th>Percentage of HIV-infected pregnant women assessed with CD4 testing*:</th>
<th>&gt;95%</th>
<th>2010</th>
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<tr>
<td>Percentage of infants born to HIV-infected women started on CTX prophylaxis within 2 months of birth*</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Percentage of infants born to HIV-infected women tested for HIV within 2 months of birth*</td>
<td>4%</td>
<td>2009</td>
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Key Points

In 2010, most HIV positive pregnant women (>95%) were assessed with CD4 testing to determine if they were in need of treatment for their own health. Coverage of early infant diagnosis however is very limited at 4% as of 2009. Although coverage of paediatric ART increased from 11% in 2009 to 19% in 2011, it is still low. Among pregnant women with HIV who received ARVs for PMTCT in 2010, 14% received ART for their own health and maternal ARV regimens were not otherwise disaggregated (see Figure 3).

Key Challenges & The Bottom Line

Key Challenges

- Very limited availability of PMTCT services with only 43% of ANC facilities offering PMTCT despite good ANC coverage
- Low performing MNCH service delivery system with weak linkages between ANC, PMTCT, childbirth and ART resulting in high dropout across the maternal and child care continuum (ANC1+ 81 vs 10% SBA; 26% HIV T&C; 24% ARVs; 4% EID, 19% paediatric ART)
- Weak M&E systems with non-availability of data on some key PMTCT indicators at the national level, hindering tracking of progress towards EMTCT targets

The Bottom Line

If national EMTCT targets for Ethiopia are to be met by 2015, the following actions should be considered:

- Rapid scale up of PMTCT service delivery and paediatric HIV care and treatment in all ANC clinics and other relevant primary health care facilities
- Investments in building the capacity within MNCH services and communities (HR capacity building; equipment for MNCH and PMTCT including CD4; linkages/referrals mechanisms within/between facilities and with communities) for the provision of quality follow up care
- Strengthen monitoring systems at national and subnational levels to improve data collection, analysis and use

Figure 3: Percentage distribution of various regimens provided to HIV+ pregnant women to prevent mother-to-child transmission of HIV, 2010*

<table>
<thead>
<tr>
<th>Percentage of ART coverage in children 0-14 years</th>
<th>0%</th>
<th>10%</th>
<th>20%</th>
<th>30%</th>
<th>40%</th>
<th>50%</th>
<th>60%</th>
<th>70%</th>
<th>80%</th>
<th>90%</th>
<th>100%</th>
</tr>
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<tbody>
<tr>
<td>2009</td>
<td>4%</td>
<td>11%</td>
<td>19%</td>
<td>0%</td>
<td>10%</td>
<td>20%</td>
<td>30%</td>
<td>40%</td>
<td>50%</td>
<td>60%</td>
<td>70%</td>
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<tr>
<td>2010</td>
<td>86%</td>
<td></td>
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Figure 4: Percentage of infants born to HIV+ women tested for HIV at 2 months of birth (EID) & Percentage of children living with HIV receiving ART, 2009-2011

- % of infants born to HIV-positive mothers receiving a virological test within 2 months of birth*
- Estimated ART coverage for children 0-14 years*

*Single dose nevirapine
*More effective ARV regimens
*ART for HIV+ pregnant women eligible for treatment
*Uncategorized

Ethiopia
References:

13. Ethiopia Demographic and Health Survey 2011, Final Report

Notes:

* Please note that the corresponding country data for this indicator have not been revised and, therefore, refer to what was published in the *Global HIV/AIDS Response – Epidemic Update and Health Sector Progress Towards Universal Access, Progress Report 2011*. Revised country data for this indicator will be published towards the end of 2012.

– Data not available.

† Indicator calculated from ANC health facility data for numerators and estimates of need for denominators. Not comparable to survey data presented under *Background Statistics* or elsewhere in this fact sheet.

ª 2009 data are not directly comparable to later years. Definition changed in 2010 to exclude single-dose nevirapine.

Acronyms:

ANC: Antenatal care
ART: Antiretroviral therapy
ARVs: Antiretroviral prophylaxis
CTX: Co-trimoxazole prophylaxis
EID: Early infant diagnosis
EMTCT: Elimination of mother-to-child transmission of HIV
FP: Family planning
L&D: Labour and delivery
MMR: Maternal mortality ratio
MNCH: Maternal, newborn and child health
PMTCT: Prevention of mother-to-child transmission of HIV
PWLHIV: Pregnant women living with HIV
SRH: Sexual and reproductive health
WHO: World Health Organization