This document reflects the country context, opportunities, challenges, and priorities developed by FP2020 focal points for Ethiopia in collaboration with the FP2020 Secretariat and other partners during the Anglophone Africa Focal Point Workshop in Kampala, Uganda in April 2016. FP2020’s focal point representatives are from the government and two donor organizations, usually UNFPA and USAID, and serve as the key representatives of FP2020 in-country. They coordinate with each other, the government, partners and other stakeholders, and the FP2020 Secretariat to drive progress on the country’s family planning goals. These opportunities, challenges, and priorities serve as the foundation of the shared agenda of action across the next 12- to 18-month horizon.

**PRIORITIES**

1. Increase the number of skilled health care providers in FP, especially in LARCs.
2. Provide technical input into the GFF investment case, focusing on commodities.
3. Develop guideline and operational manual for PPP in FP.

**OPPORTUNITIES**

**Priority 1: Increase the number of skilled health care providers in family planning (FP), especially in LARCs.**

- The Health Extension Program and upgrading of the HEWs to level IV (Diploma equivalent); Task shifting/sharing
- Women Health Development Army
- Accelerating the midwifery program
- Integrating supportive supervision
- Health facility expansion

**Priority 2: Provide technical input into the GFF investment case, focusing on commodities.**

- Tax-exemption for FP commodities
- Presence of development partners supporting FP program

**Priority 3: Develop guideline and operational manual for postpartum public-private partnership (PPP) in FP.**

- Existence of private sector as a platform for increased FP services
- Introduction of community based and social health insurance, which could include FP and other MCH interventions for sustainability

**Other Overarching Opportunities:**

- Political will and policies: MCH services, including FP, are among the top government priorities
- Free FP service at public facilities
- Increased media coverage
- Integration with other health services
CHALLENGES

Priority 1: Increase the number of skilled health care providers in FP, especially in LARCs.
- Quality of FP services, counseling in not optimal
- Sub-optimal service availability and readiness at health facilities
- Missed opportunities for essential health interventions due to limited focus on integrated service delivery
- Inequity of service provision for population groups requiring attention: youth, pastoral community, minority groups, etc.
- Myth and misconceptions about contraceptive methods

Priority 2: Provide technical input into the GFF investment case, focusing on commodities.
- Donor dependence for resources and slow pace on domestic financing

Priority 3: Develop guideline and operational manual for PPP in FP.
- Limited engagement of the private sector (sub-optimal public-private-partnership in coordination, mistrust, reporting)

Other Challenges:
- Social/gender inequality and religious/cultural barriers
- Weak coordination across sectors, such as among health, education, women affairs, youth, and sports.
- Inequality across regions
- The restrictive law that limits the engagement of NGOs on advocacy
- Suboptimal use of evidence for timely decision making (mainly at point of generation)
- Inadequate quality assurance actions
- Managing supply chain (stock outs) and method mix