

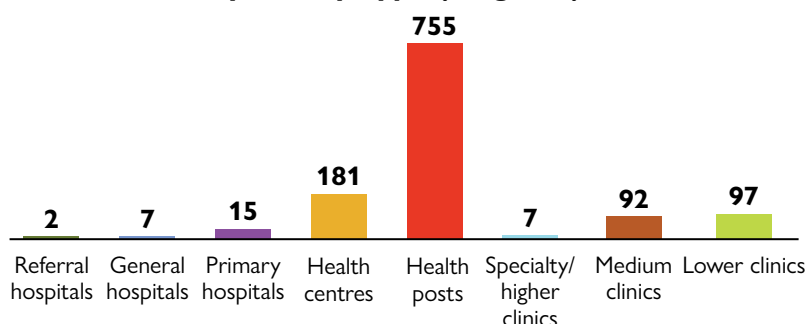
2021-22 Ethiopia Service Provision Assessment (ESPA)

The 2021-22 Ethiopia Service Provision Assessment (ESPA) is the second survey of its kind following the 2014 ESPA+. The survey was designed to collect information from health facilities in Ethiopia with the aim of providing information on the general performance of facilities that offer maternal, child, and reproductive health services, services for specific infectious diseases, such as sexually transmitted infections (STIs), HIV/AIDS, tuberculosis (TB), and malaria, as well as the functions of the various components of the health system that may affect the quality of services. The 2021-22 ESPA collected data from 1,158 facilities throughout all of Ethiopia excluding the Tigray region. The results of the assessment are presented by facility type, managing authority, and region.

SAMPLE

1,158 health facilities were surveyed.

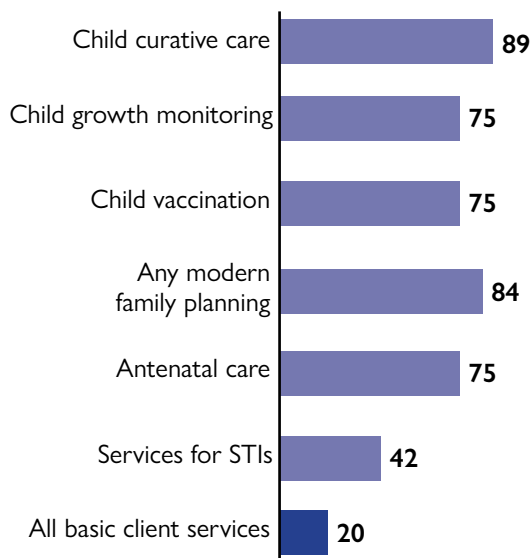
Number of Facilities Surveyed in the 2021-22 ESPA by Facility Type (weighted)



AVAILABILITY OF BASIC CLIENT SERVICES AND AMENITIES

Availability of Basic Client Services

Among all facilities (N=1,158), percent offering indicated basic client services

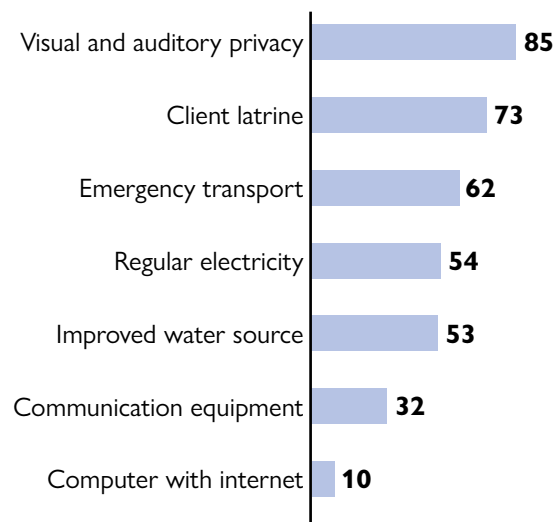


1 in **5** health facilities offer all basic client services.

Visual and auditory privacy is the most commonly available amenity at health facilities in Ethiopia.

Availability of Basic Amenities for Client Services

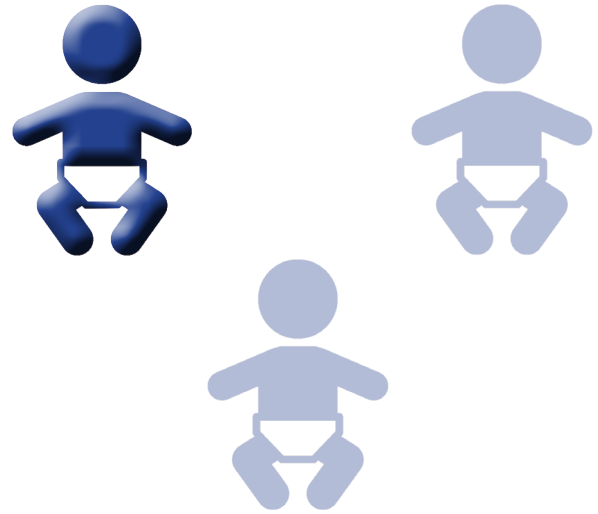
Among all facilities (N=1,158), percent with indicated amenities considered basic for quality services



ASSESSMENT OF SICK CHILDREN

1 in **3**

observed consultations with sick children (N=3,742) included an assessment of **all 3 main symptoms of childhood illness**—cough or difficulty breathing, diarrhoea, and fever.



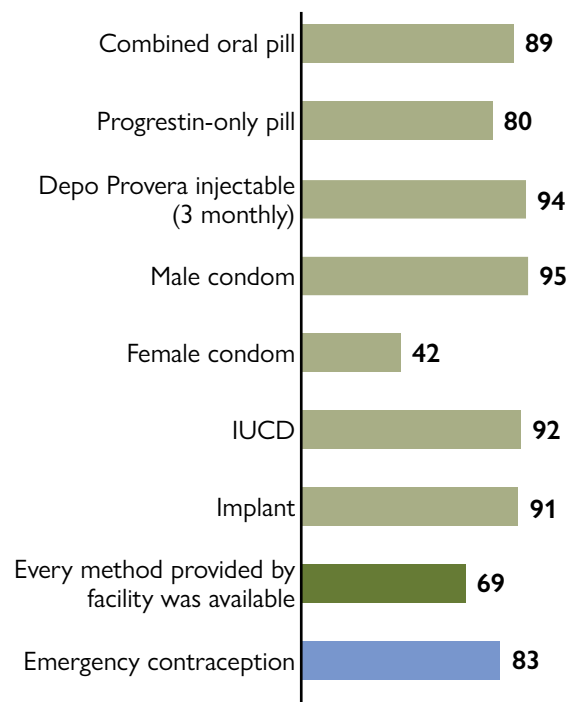
FAMILY PLANNING COMMODITIES

Overall, **84%** of all health facilities offer any modern method of family planning. The most common methods are **injectables** and **combined oral contraceptive pills**.

More than **9** in **10** facilities that provide injectables, male condoms, IUCDs, and implants had these methods available on the day of the survey.

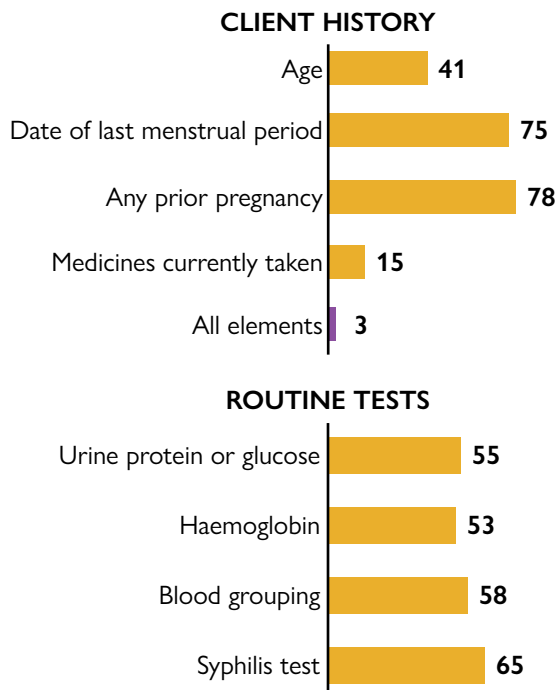
Availability of Family Planning Commodities

Among facilities that provide the indicated modern method of family planning, percent where the method was available on the day of the survey



Observed Elements of Client History for First-visit ANC Clients

Among observed consultations with first-visit ANC clients (N=2,181), percent that included:



ANTENATAL CARE (ANC)

Only **3%** of observed first-visit ANC consultations included **all elements of the client history**.

Over half of first-visit ANC clients had a routine test. Syphilis tests were most common (**65%**).

DELIVERY AND NEWBORN CARE

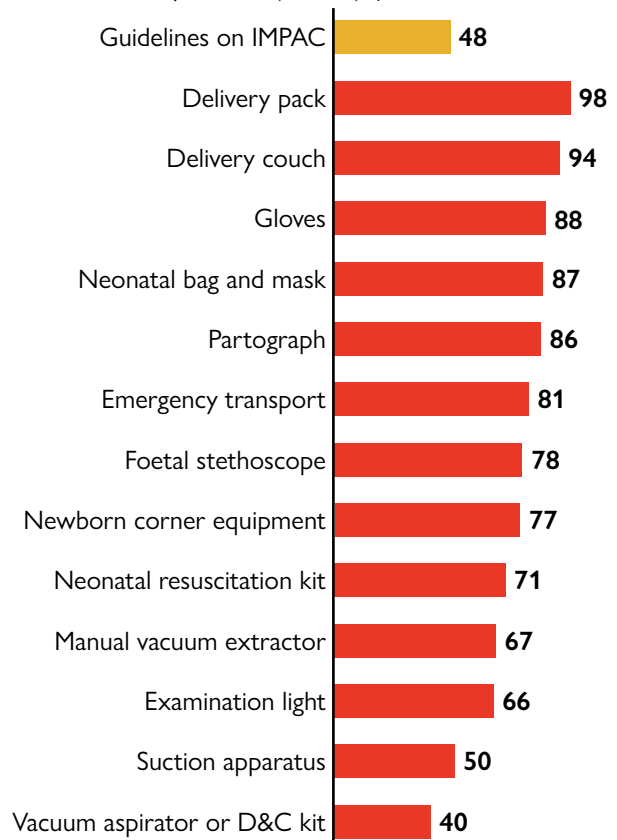
54% of all facilities excluding health posts offer **normal vaginal delivery services**

and **6%** offer **Cesarean delivery services**.

48% of facilities offering normal vaginal delivery services have **guidelines for Integrated Management of Pregnancy and Childbirth (IMPAC)**.

Guidelines and Equipment for Delivery Services

Among facilities excluding health posts offering normal vaginal delivery services (N=216), percent that have:



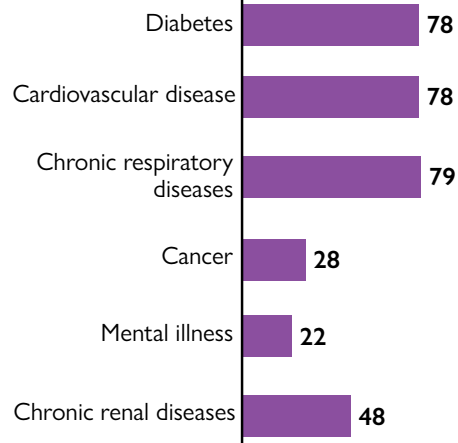


NON-COMMUNICABLE DISEASES AND MENTAL HEALTH

Nearly **8 in 10** facilities excluding health posts offer services for **diabetes, cardiovascular disease, and chronic respiratory diseases.**

Availability of Non-Communicable Diseases and Mental Health Services

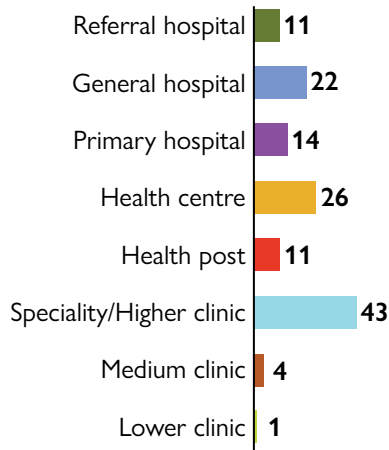
Among all facilities excluding health posts (N=403), percent offering indicated services



MALARIA

Malaria Diagnostic Capacity by Facility Type

Among facilities offering curative care for sick children (N=1,034), percent that have malaria diagnostic capacity on the day of the survey



7 in 10 health facilities (N=1,158) offer **malaria diagnosis and/or treatment services.**

Only **12%** of facilities that offer curative care for sick children had **comprehensive malaria diagnostic capacity.***

*Including unexpired rapid diagnostic test (RDT) kits or a functioning microscope with relevant stains and glass slides, staff member recently trained in RDT or microscopy, and a malaria RDT protocol available.

The 2021-22 ESPA received funding from the Government of Ethiopia (GoE) and the United States Agency for International Development (USAID). The Ethiopian Public Health Institute (EPHI) implemented the survey in collaboration with the Ministry of Health (MoH). ICF provided technical assistance through The DHS Program, which assists countries in the collection of data to monitor and evaluate population, health, and nutrition programs.

