Meeting the GTP Targets: The Contribution of the Population, Health and Environment Integration Approach
Ethiopia’s future is bright and full of opportunity. After many years of poverty and instability the country is making great progress in improving health, alleviating poverty, and investing in future economic growth. Ethiopia’s Growth and Transformation Plan (GTP) defines the pathway for Ethiopia to achieve the Millennium Development Goals and sets ambitious targets in the health, environment, energy, and economic growth sectors, among others. These targets are naturally interrelated, and each one contributes to the sustainability of the other.

This brief explores how an integrated approach to community development called the population, health and environment (PHE) approach can help Ethiopia meet the objectives of the GTP and ensure that Ethiopia is on the path to become a middle income country.

PHE Approach

The population, health and environment (PHE) approach recognizes the interconnected nature of the challenges communities face and works to support communities to overcome these challenges at the same time, leading to greater and more sustainable results. The PHE approach evolved from the recognition that communities cannot exercise adequate stewardship over their natural resources and environment if their health, nutrition and economic needs are not met and if they are not able to plan the spacing and number of their children. When these needs are not met, poor health, poverty, rapid population growth, and unsustainable resource use can lead to loss of habitat and natural resources, which often further deepens poverty and adversely affects health.

The PHE approach is a proven approach for increasing family planning use, rehabilitation of the natural resources and livelihood improvement and PHE implementers in Ethiopia have been working since 2007 to increase access to family planning services while also meeting the other development needs of communities such as environmental conservation, and livelihood improvement.

Population and Development

The population and development section of the GTP focuses on harmonizing Ethiopia’s population growth and distribution with the desired economic growth for the country’s development. With a population of 84.3 million in 2012, Ethiopia is the second most populous country in Sub Saharan Africa, after Nigeria. Ethiopia’s population is very young- 45% of Ethiopians are less
than 15 years old and each year an additional 1.2 million people join the national workforce. To ensure that all Ethiopians are able to find employment and contribute to the national economy, the GTP has set the following targets:

- support and strengthen population education in primary and secondary education programs,
- increase the percent of family planning users to 65% of married women of reproductive age (15-49) by the end of the plan period,
- enforce the family law provision of a minimum marriageable age of 18 years,
- establish the national population council which will be tasked with mainstreaming the population development agenda in every sector.

Organizations implementing the PHE approach in Ethiopia are working to ensure that Ethiopia is prepared for its demographic changes by increasing access to family planning services at the community level, while also increasing economic opportunities for women and young people by increasing access to alternative livelihood opportunities such as beekeeping and vegetable farming. For example, by linking family planning, environmental conservation and livelihood development, from 2007 to 2010,

### GTP Targets that PHE Addresses

- Increase contraceptive prevalence to 65% and enforce the age of marriage above 18 years old
- 14.2 million women will benefit from credit and saving services
- 5.5 million vulnerable children will be supported by social support systems.
- Decrease maternal mortality to 267 per 100,000 live births.
- Increase the area of land rehabilitated to 10.21 million hectares
- Distribute 9 million energy saving stoves by 2015.
- Reduce the 7.8 million safety net beneficiaries to 1.3 million by the end of the plan period
Ethio Wetlands and Natural Resources Association in conjunction with Metu woreda government and the community, increased contraceptive prevalence from 34% to 77% and increased the food security from five months to nine months.

**Gender and Development**

The main objectives for gender and development under the GTP are to ensure women’s active participation in the country’s economic and social development and political processes.

As with all sectors, the achievement of the GTP targets on gender development and children’s affairs requires the commitment of government and its civil society partners and integration and collaboration among many stakeholders. The GTP plans for 14.2 million women to benefit from credit and saving services and for 5.5 million vulnerable children to be supported by social support systems. PHE implementers are contributing towards these goals by establishing credit and saving schemes with women’s groups. For example, in two rural woredas of North Showa, Lem Ethiopia has supported over 180 women to start savings and credit schemes in conjunction with poultry management, and the Guraghe People’s Self-Help Development Association has supported another 180 women to develop savings and credit schemes in conjunction with selling energy saving stoves. In the PHE approach these savings and credit groups are both helping women take an active role in the economy of the household and also are serving to increase women’s role in household decisions that affect their

1.2 million youths joins labour force every year
health and the health and well-being of their families.

Health

The core elements of the GTP health strategy are: decentralization of the health care system, development of the preventive, promotional and curative components of health care, assurance of accessibility of health care for all segments of the population and the promotion of private sector participation in the health system. The highest priority areas are: maternal and newborn care, child health, and halting and reversing the spread of major communicable disease such as HIV/AIDS, tuberculosis, and malaria.

Ethiopia has made great progress in health over the last ten years. From 2005 to 2011, contraceptive prevalence increased from 14.7% to 28.6%. However, there is still much work to be done. Maternal mortality has remained unchanged at 676 per 100,000 live births over the same time period, still only 9.9% of women are delivering in a health facility. Achieving the goal of 65% contraceptive prevalence and a maternal mortality ratio of 267 per 100,000 births will require approaches that address the root causes of women not delivering in health facilities and accessing family planning services. Currently, 25% of women who want to space their births or have no more children, are not using a modern method of family planning. These women, referred to as having an unmet need for family planning, are not using modern contraceptives for a variety of reasons, and the 2011 Ethiopian Demographic Health Survey identified the highest unmet need among the youngest women and women in rural areas.
PHE projects in Ethiopia are principally implemented in rural areas with a focus on youth and are working to understand the diverse reasons why women and young people aren’t using family planning. PHE implementers are trying to reach these people with the services and information they need through bringing the different stakeholders together to collaborate and coordinate their efforts from the grassroots level to policy level.

**Environment and Climate Change**

Natural resources play a vital role in Ethiopia’s sustainable development. Building a green economy and implementing Ethiopia’s existing environmental laws are critical for conserving these resources and are among the key strategic directions of the GTP. In conjunction with the GTP, the government of Ethiopia developed the climate resilient green economy (CRGE) plan to ensure Ethiopia has zero carbon emissions by 2025. This is not an easy task— it will require a coordinated and sustained effort by all parts of the Ethiopian society – the government, civil society, academia and, most importantly, the public. Building climate resilience is a huge and urgent challenge for the country. Climate change is of critical strategic importance to Ethiopia. It has the potential to hold back economic progress, or reverse the gains made in Ethiopia’s development and could exacerbate social and economic problems. Climate change also has the potential to destabilize the Horn of Africa and bring more fierce competition for water and other resources throughout the Nile Basin and other basins.
At the same time, climate change and the international response bring opportunities for Ethiopia such as additional funds for climate adaptation and mitigation. PHE partners are addressing climate issues by implementing projects that build the resilience of communities by harmonizing the relationship between environment and human being in the Woredas they are working. For example, in addition to their health and livelihood activities, Ethio Wetlands and Natural Resources Association is implementing a participatory forest management project in Oromiya region in Illubabor Zone Metu Woreda has slowed deforestation and rehabilitation of Wichi wetland within the project intervention area and thus is protecting carbon emissions and sequestration of forest and wetland resources of southwest Ethiopia.

**Strengthening the GTP**

GTP sets ambitious targets across the range of sectors with an overall goal of contributing in making Ethiopia a middle income country. For a country like Ethiopia, with huge natural resources and population, upon which the majority of the communities rely on, development must integrate social, economic and environmental outcomes in order to benefit all Ethiopians in a sustainable development way.

**PHE Ethiopia Consortium calls for the government and its development partners to build on the cross-sector nature of the GTP to address the integrated needs of Ethiopians as a system and encourages use of the integrated PHE approach to meet Ethiopia’s ambitious GTP targets.**
Conclusion

To successfully implement the GTP, people from all sectors need to work together using an integrated approach. Experiences from PHE efforts in many parts of the world indicate that programs can be integrated to include livelihoods, environmental stewardship, gender equity and health, including family planning. This integration will ensure the targets are achieved in a way that addresses the interconnected needs of communities. To achieve this, we must take immediate action to integrate reproductive health/family planning and environmental issues across all sectors. This will require strengthening coordination between local administrators, health extension workers development agents and teachers to educate the community about integration in a way the GTP is accelerated at kebele and woreda levels and there is strong coordination between the line ministries at the federal level and in the different bureaus at the regional level for joint achievement of the national targets through joint indicators for the common national outcomes of the country.

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