### Breakdown of catalytic funding by priority area (US$ and % of budget)

<table>
<thead>
<tr>
<th>CRVS</th>
<th>MDSR</th>
<th>Monitoring Results</th>
<th>eHealth Innovation</th>
<th>Resource Tracking</th>
<th>Reviews</th>
<th>Advocacy</th>
<th>Total distributed</th>
</tr>
</thead>
<tbody>
<tr>
<td>125,000 (50%)</td>
<td>--- (-%)</td>
<td>--- (-%)</td>
<td>--- (-%)</td>
<td>50,000 (20%)</td>
<td>--- (-%)</td>
<td>75,000 (30%)</td>
<td>250,000</td>
</tr>
</tbody>
</table>

### Progress Summary

**Achieved or on track**

- **Civil registration, vital statistics (CRVS) assessment completed, plan developed**
  - Ethiopia revitalized its national CRVS system with the Ministry of Justice as the lead government authority.
  - The country enacted legislation and undertook a rapid national assessment in 2012 with technical and financial support from development partners.
  - Implementation of the Health Management Information System (HMIS) has been supported and scaled up.
  - A costed national strategic plan for the vital events registration agency was developed.
  - Through support from UNECA and WHO and in line with the national strategic plan, an investment plan was developed and submitted for donor support.

- **Maternal death surveillance and response (MDSR) system in place**
  - The national working group has finalized the MDSR guideline tools, and regions have started implementing facility-based death reviews.
  - Addis Ababa, Harari, Diredawa and Tigray regions are now implementing facility-based reviews at full scale.
  - 16 zones in Amhara, Oromia and SNNPR regions have initiated implementation.
  - Further roll-out to the remaining zones in these regions will continue throughout the year.
  - Nationwide data quality assessment of the Health Statistic Informational Portal was completed and an improvement plan developed.

- **IHP+ compact or equivalent partnership agreement**
  - Ethiopia joined IHP+ in 2007. A country compact was signed in 2008 by the Ministry of Health, the Ministry of Finance and 13 development partners.
  - In 2009, the Government of Ethiopia and partners signed a Joint Financing Arrangement (JFA) to support the MDG Fund.
  - In May-June 2014, joint monitoring of progress on IHP+ commitments was conducted at country level.

- **National health sector review**
  - A health sector review was carried out with wide stakeholder participation.
  - Current work is focused on developing/implementing a mechanism to compile all quantitative and qualitative information to inform annual reviews.
  - Annual National Health Strategy (NHS) reports were prepared and disseminated; annual reviews were held based on the health sector strategic plan.

**Continued efforts required**

- **Available core 11 indicators monitored**
  - The 11 core indicators are currently being monitored as part of the national health sector performance monitoring and evaluation framework.
  - Data quality checks are done twice a year using the multi-indicator tool.

- **Political leaders engaged in RMNCH**
  - Media coverage of MNCH issues is supported, with a focus on regular joint media briefings on RMNCH.

- **National eHealth strategy**
  - An inclusive eHealth strategic plan has been developed.
  - The application of mHealth MCH services was piloted in selected regions and districts of the country.

- **Country reporting on health expenditure by financing source**
  - Data collection and analysis were completed and the report of National Health Accounts 2012 finalized and disseminated for wider policy use. Institutionalization is under way, starting with building the technical and institutional capacity of the federal MOH and the regional health bureaus.
  - Public expenditure tracking has been done.
Future needs

1. CRVS: operationalization of the CRVS at sub-national level through extensive and cascading training to local staff and to health workers on ICD 10 adoption.

2. Monitoring of results: 1) Support quality improvement of HMIS data; 2) Prepare and disseminate the annual National Health Statistics Report 2014-15; 3) Support for further facility based surveys (SARA) and data quality self-assessment to inform the annual reviews that are based on the goals and targets of the national health sector strategic plan (HSDPV).

3. Monitoring resources: supporting institutionalization of the NHA through detailed analysis.

