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Prime Minister Meles Zenawi said income inequality has been recognized as a major threat to global macro-economic and social stability. Speaking at the opening of the 13th World Congress on Public Health here on April 23, Meles said inequality in incomes results in massive inequality in access to health services and health outcomes. He said one of the most debilitating outcomes of increased income inequality could, therefore, be an even higher level of inequality in health. Ethiopia tried to tackle the problem from both the income and health services end. For the past eight years, Ethiopia has achieved an average growth rate of a little more than 11% per annum. Interestingly, Meles said, the benefit of the growth in GDP has been broadly shared. The latest UNDP report suggested that Ethiopia has the most equitable distribution of income in Africa and is one of the ten countries in the world with the most equitable distribution in income. Meles said all development efforts in the health sector have concentrated on providing free primary health care services to all Ethiopians, particularly those in the rural areas, and on prevention through health extension program. As a result of the efforts and the remarkable support of partners, 90% of Ethiopians have now access to primary health care services (*State media, April 23*).

A lack of awareness of the importance of skilled hospital deliveries in Ethiopia, cultural beliefs, and transport challenges in rural areas are causing a high number of deaths during childbirth, say officials. Only 10% of deliveries take place within health facilities, according to the Ethiopia's latest (April) Demographic Health Survey results. Nevertheless, the figure is a significant improvement on 6% in the previous 2005 survey. Many women prefer delivering at home in the company of known and trusted relatives and friends, where customs and traditions can be observed, according to a 2011 study published in the Ethiopian Journal of Health. - About 80% of all maternal deaths in Ethiopia, are due to haemorrhage, infection, unsafe abortion, hypertensive disorders, and obstructed labor, along with HIV/AIDS and malaria, said a senior Health Ministry maternal health expert. The maternal mortality ratio in Ethiopia is 676 for every 100,000 births. This compares to an average of 290 per 100,000 births in developing countries, and 14 per 100,000 in developed countries, according to the UN World Health Organization (*IRIN, April 25*).

At least seven people were reportedly killed in a new wave of Muslim protests against a government campaign to indoctrinate their community with Ahabashism ideology. Ethiopian police shot dead seven Muslims in Assasa town in Arsi province of Oromia regional state. Witnesses say the Muslim victims fell when Ethiopian security forces surrounded a mosque to arrest Sheikh Su'ud Aman on accusations of prompting „terrorist“ ideology. When worshippers tried to stop the Sheikh's arrest, security forces opened fire, killing seven Muslims. Scores of people were also reportedly injured in the incident (*Onislam, April 29*).

About 1,287 km south of this Egyptian city where the Nile river pours into Egypt, construction has begun on a massive dam being built in Ethiopia that could destabilize Egypt, analysts say. If constructed at specifications revealed last year, the Grand Ethiopian Renaissance Dam would result in cuts in electricity, a reduction in agricultural lands and water shortages across major cities in Egypt, new studies say. Mohamed Nasr El Din Allam, who was Egypt's minister of water and irrigation until early last year edited a book-length collection of studies on the dam published last month. – Those dire forecasts stem from Ethiopia's decision last year to announce an increase in the size of the dam, which is already under construction 40km from the Sudanese border. Ethiopian officials revealed the depth of the dam would be enlarged to 150 m from 90m, alongside plans to boost electricity production and use water pooling behind the dam to irrigate more than 500,000 ha of new agricultural lands (*The National, April 23*).

Lack of rainfall is placing Ethiopia at risk of a severe hunger crisis in the coming months. What is called the "Belg" rains in parts of Ethiopia were late in arriving this year. Crops have not been able to get planted in time. A report from the UN World Food Programme (WFP) says in Amhara region, "the area covered with *Belg* crops so far is less than 10% of the planned area... There is high probability for near total failure of *Belg* production in most *Belg* dependent areas of the country, especially those in Tigray, Amhara, and central and eastern Oromia regions." The World Food Programme (WFP) helps provide school meals in Ethiopia. WFP just earned a grant of 26m \$ for Ethiopia from the U.S. Department of Agriculture's (USDA) McGovern-Dole school meals program. However, these supplies can take as much as 6 months to arrive (*Examiner.com, April 23*).

According to information from the Ethiopian Shipping Enterprise, Ethiopia is having nine cargo ships built in China. This is in addition to the eight ships it already possesses. The country plans to build a new railway network stretching from Djibouti to Addis Ababa in order to cut on transport costs. Rail and railway networks are also planned to be built linking the port of Berbera in Somaliland, Port Sudan and Lamu in Kenya. Although Ethiopia is a country without ports, which it lost after the 1998 war with neighboring Eritrea, its ships operate freely in Red Sea ports. Last year, the Ethiopian Shipping Enterprise made a profit of 40m \$ by transporting 45% of the products. Besides transporting the country's import and export products, the enterprise has established a maritime university in Bahr Dar to train maritime staff. In the next ten years, it plans to train 5,000 maritime engineers and deploy them in various countries (*Mesenazeria, April 24*).

Prime Minister Meles Zenawi vested an honorary citizenship on Founder and Owner of the Fistula Hospital, Dr. Catherine Hamlin, in recognition of the outstanding humanitarian services she provided to fistula patients. Meles said Dr. Hamlin was awarded the citizenship for serving the fistula patients for more than five decades by establishing a fistula hospital in the country. Meles said Dr. Hamlin has been able to rescue thousands of fistula patients, which, he said, is very commendable. Speaking for her part, Dr. Hamlin said, "Although I was not born in Ethiopia, I love the country very much." She said she was very happy to be given the honorary citizenship in recognition of her humanitarian services. Dr Catherine Hamlin, née Nicholson, was born in Sydney, Australia and graduated from the University of Sydney in 1946 (*State media, April 26*).