

Background

The Ethiopian Public Health Association (EPHA) is a non-for-profit, voluntary, multidisciplinary Association of professionals with varying categories and levels of background and positions at different private, government and non-government organizations.

Established in 1989 EPHA has been implementing national and continental projects/programs for the last 30 years with the aim to promote better health services for the public and uphold professional standards through advocacy, active involvement and networking. According to the new proclamation number 1113/2011 EPHA has registered by the Ethiopian Agency for Civil Society Organization (ACSO) as a local organization.

Mission

To contribute to the national health development for sound policies and practices through mobilization and active engagement of its broad-based membership, networking and partnership, and improved competence of its members to ensure the attainment of high standard of health in Ethiopia.

Vision

To become a vibrant, self-reliant and iconic public health professional society with fully empowered and dynamic membership and authority in the field of public health policies and practices by 2030

Core Values

Integrity

Professional ethics

Innovativeness

Solidarity and complementarity

Inclusiveness

Proactive engagement

Societal responsiveness

Strategic Goals

- Increased, diversified, competent and fully engaged members;
- Established Center of Excellence of public health;
- Generation of high quality evidence that contributes to policies, strategies, regulatory standards and programs;
- ♣ Enhanced and active role in national, regional and global health initiatives/issues;
- ♣ Financially sustainable professional Association;
- Strong networking and strategic partnership with relevant stakeholders.

Governing Bodies of EPHA

The main organs of EPHA are the General Assembly, the Executive Board, the Advisory Council, the Secretariat and Chapters. Each of them has different level of mandates and accountability.

The General Assembly (GA) It is the supreme organ of authority of EPHA. It decides on policy matters, membership issues and adopts bylaws and elects the Executive Board members.

The Executive Board (EB) It is the second highest governing body of EPHA. Board members shall be elected by the GA and are responsible for appointing the Executive Director, ensuring the implementation of the annual work plan and programs, ensuring the availability of sufficient financial and material resources, generating policy ideas, and establishing, amending and approving policy and procedure manuals of the Association. Members of the Executive Board are appointed to serve for a period of two years with the possibility of re-election for another one term.

The Advisory Council (AC) It provides counseling and policy support to the Association and creates a mechanism for the expression of concerns and issues at the wider membership of the Association. This is composed of: members of the Executive Board, focal persons of regional and Diaspora, chapters, and members of previous EPHA Executive Committees/Boards.

The Secretariat It is the organ of EPHA that is responsible for the development and implementation of the operational activities of the Association. It consists of the Executive Director and the Deputy Executive Director, Directors and other staff members. The Secretariat has four departments namely:

- Membership, Chapters Affairs and Network Directorate;
- · Research and Publication Directorate;
- Professional Development & Training Directorate and
- Finance and Administration Directorate

Membership

EPHA has nearly 8,000 members with various professional categories and levels of training, distributed all over the country and abroad.

Types of membership

- regular (public health professionals),
- life members of individuals and institutions
- associate (non-public health professionals and undergraduate students) and
- honorary (those individuals who have made outstanding contributions to the community).

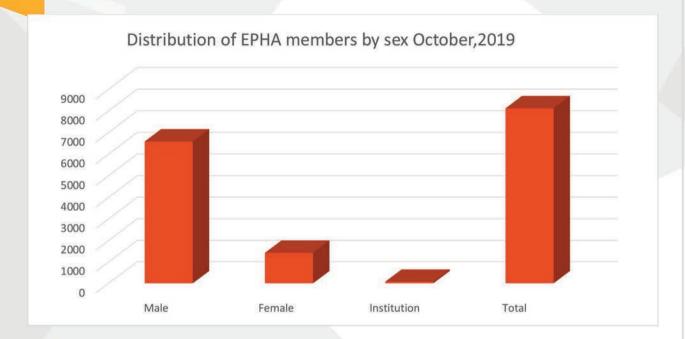
EPHA membership is open to all who has at least first degree and for undergraduate students attending public health and related fields. Currently, EPHA has 37 chapters and sub-chapters located in all regions and two Administrative cities of the country.

Rights and Obligations of Members

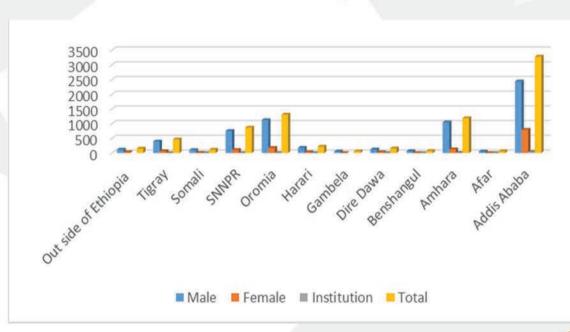
Members of the Association have the right to:

- Vote, elect and be elected to the various organs of the Association (only for regular and life members)
- Participate in all activities of the Association;
- Receive the Association's publications free of charge during annual conferences;
- Uphold the expected professional ethics in their daily practices;
- Comply with the constitution and the rules and regulations of the Association as well as the decisions of the General Assembly, and

The obligation is to pay membership fees regularly.







1. EPHA Experience on Projects Management

EPHA has several roles in dealing with various public health issues in the country through research and dissemination, capacity development of health workforce and networking of health professionals to attain its mission.

The Association is closely working with different partners including governmental organizations (Federal Ministry of Health, EPHI, Federal HAPCO, Regional Health Bureaus, Ministry of Science and Technology, Ethiopian Academy of Sciences, Food Medicine and Healthcare Administration and Control Authority, Universities,) and NGOs including WHO, CDC, USAID, the David and Lucile Packard Foundation, etc. to facilitate and expedite activities of prior public health issues of the country.

1.1 Implemented Projects

Table 1: List of Projects Managed by the Ethiopian Public Health Association

S. N	Title of the Project	Region and Settings	Partners	Status	
		Addis Ababa and all regions	RHBs, CDC, AAU- SPH, FMoH	Completed	
2	Bio-behavioral survey of most at risk population	In major 10 urban settings of Ethiopia	EPHI, CDC	Completed	
3	CSWs mapping and size estimation	In major 120 towns of Ethiopia	PSI	Completed	
4	Health and demographic surveillance system	Amhara, Oromiya, SNNPR, Tigray and AA	Universities and CDC	Completed	
5	Evaluation of HIV/AIDS workplace interventions	Amhara, Oromiya, SNNPR, Tigray and Gabmella	World learning	Completed	

6	Evaluation of HIV/AIDS community based strengthening and response project using MSC tool	Amhara, Oromiya, SNNPR, Tigray Afar, Somalie, Benishangul, and Gabmella	PATH and Westat	Completed
7	Seroprevalence of STIs and TB and Behavioral risk factors among men having sex with men (MSM)	Addis Ababa	CDC, AAU-SPH	Completed
8	Assessment of Khat and Alcohol consumption and its association with HIV/AIDS in Ethiopia	All regions	CDC, HAPCO, Addis Continental Institute of Public Health	Completed
9	Assessment of Post Abortion Care in the primary Health care units	Oromiya	Oromiya RHB, IPAS, FMoH	Completed
10	Operational researches on reproductive health and family planning services	Amahara and SNNPR	Packard foundation, FMoH	Completed

11	HIV opportunistic infection assessment study	In 80 public health facilities (health centers and hospitals) in Ethiopia	CDC, FMOH	Completed
12	Active Disease Screening to decrease TB, HIV & STI surveillance / Prison health in Addis Ababa - Addis - VP study project	Ethiopian Federal Prison Administration, Kality Prison	CDC, USD	Completed
13	Pediatrics effective testing and enrollment survey	In 8 health facilities of Amhara and Addis Ababa	CDC, EPHI, FMOH, AARHB, ARHB	Completed
14	Managed Filed Epidemiology Training Program, in round bases	All regions	CDC, universities, RHBs	Completed
15	Managed leadership strategic information trainings, in round bases	All regions	CDC, universities, RHBs	Completed
16	Managed public health research methodology and ethics trainings, in round bases	All regions	CDC, universities, RHBs	Completed

Table 2: List of Projects Accomplished in Collaboration with Sub Grantees

s. N	Sub-grantee	Project	Budget Source	Status	Period
1	Ethiopian Society of Obstetrician and Gynecologists (ESOG)	Expand HIV/AIDS prevention, care and treatment in private health institutions in Ethiopia	CDC/PEPFAR	Completed	2002-2008
2	Addis Ababa University, School of Public Health	Butajira Health and Demographic Surveillance Survey site	CDC/PEPFAR	Completed	2007-2018
3	Addis Ababa University, College of Health Sciences	Addis Ababa AIDS Mortality Surveillance Program	CDC/PEPFAR	Completed	2002-2008
4	Mekelle, Arbaminch, Harumia, Gondar, Jimma University	Health and Demographic Surveillance Survey site	CDC/PEPFAR	Completed	2009-2018

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5	Save Your Generation, Ethiopia	Prevention of Multiple concurrent sexual partners among school youth: HIV prevention in youth	CDC/PEPFAR	Completed	20 <mark>07-2012</mark>
6	Amhara, Tigray, SNNPR, Somali, oromia Regional Health Bureau	Field Epidemiology Training Program: Field base for residency activities	CDC/PEPFAR	Completed	2010-2018
7	Ethiopian Public Health Institute	Field Epidemiology Training Program: Field base for residency activities	CDC/PEPFAR	Completed	2010-2018
8	Ethiopian Public Health Laboratory Association	Strengthening Public Health Laboratory System	CDC/PEPFAR	Completed	2009-2018
9	Ethiopia Medical Association and Ethiopian Pediatrics Society	Integrated Approach to Empower Health Care Facilities on Immunization/ Global Alliance on Vaccine International	FMoH and Global Alliance on Vaccine International	Completed	2014-2018

10	Ethiopian Nurses Association	Infection Prevention Training	CDC/PEPFAR	Completed	2007-2009
11	Ethiopian Medical Association	Infection Prevention Training	CDC/PEPFAR	Completed	2007-2009
12	Ethiopian Public Health Institute	Trainings in the area of lab information and management, the role of lab on ART	CDC/PEPFAR	Completed	2002-2008
13	African Population and Health Research Center	Policy analysis for African Constituencies	Melinda and Gates Foundation	Completed	2015-2018
14	Federal Ministry of Health / Ethiopian Public Health Institute (FMOH/EPHI),	Population based HIV impact assessment survey /EPHIA/	ICAP	Completed	2017-2018
15	Federal Ministry of Health	Integrated approach to empower Health Care facilities on immunization	GAV CSO	Completed	2015-2017
16	Fed <mark>eral Ministry of Health</mark>	FMoH Clarification and implanon NXT	FMoH	Competed	April 2018- May 2018

17	Massachusetts institute of Technology	Reduce intimate partner violence & HIV in rural Ethiopia (Butjera project)	MIT	Completed	2013-2017
18	Federal Ministry of Health	Strengthening Malaria Control in Ethiopia through Training & Monitoring	FMOH	Completed	2016-2018
19	Harvard TH CHAN school of public health	External Evaluation of the disaster & Emergency preparedness program (DEPP)	CHAN	Completed	2017- 2018
20	Addis Ababa University School of Public Health	Survey on health facility for the availability of FP/Maternal health commodity and survey AAU (PMA2020)	PMA	Completed	2015- 2019
21	JHUSPH	Future Health system Delivering Effective Health services	JHU	Completed	2016 - 2018

1.2 Ongoing Projects

1.2.1 Care and Support (National Assessment on Retention Status of PLHIV)

Project Period: 2014 -2019

Project Budget: USD 7,579,639

Project Donor: CDC

Project Goal:

The overall goal is to contribute to the improvement of HIV/AIDS care and support program of the country through evidence based decision making.

Project Objectives

The project objective is to conduct a study to assess the retention status of PLHIV through cascade of HIV testing and linkage into clinical care, engagement and retention in to HIV/AIDS continuum of care in Ethiopia.

Implementation Location Thirty Nine (39) HIV high case load facilities (PEPFAR priority settings) in Addis Ababa (8); Amhara (12); Diredawa (1); Oromia (14) and Tigray (4).

1.2.2 The David and Lucile Packard Foundation Supported RH/FP Project

Project Period: 2016 -2019

Project Donor: Packard Foundation

Project Budget: USD 1,470,000.00

The incoming project of Packard Foundation is on increasing access.

Project Period: 2019-2022

Project Budget: USD 1.4,000,000

Project Goal

To contribute to the attainment of the regional family planning related targets through expanding quality & comprehensive FP service to health post level.

Project Objectives

- To increase the family planning service coverage in project implementation zones of Oromia region by 2019.
- ♣ To improve the quality of Family Planning (CFP) services provision at health post level by 2019
- To generate and disseminate evidences in the area of LAFP service provision through conducting operational research, based information generated and disseminated

Project Implementation Sites

The current project is being implemented in six zones of Western Oromia region namely; Jimma, Illubabor, Buno-Bedele, West Wollega, East Wollega, & West Shewa. The project has included 150 Health posts (HPs) in 37 Woredas.

1.2.3 Developing Compassionate, Respectful and Caring (CRC) Health Workforce

Ethiopian Public Health Association, Public Health Officers Association of Ethiopia, Ethiopian Medical Association, Ethiopian Nurses Association, Ethiopian Anesthetists Association, Ethiopian Medical Laboratory Association and Ethiopian Midwives Association form a consortium to work on the development of compassionate, respectful caring (CRC) health work force at national level.

Project Objectives:

- 1. To build/strengthen the capacity of health work force
- 2. To develop the concept of CRC among pre-college and high school students.
- 3. To strengthen/establish Health Science Students' Association in Universities
- 4. Provide CRC training for health science college instructors
- 5. To Create public awareness on their rights and responsibilities towards health service provision
- 6. To improve positive images of health professionals

Project Period: November 2018 to November 2020

Source of Fund: Ministry of Health Project Budget: ETB 2,450,326.59

Intervention: National level

Table 3: Financial & Logistics Facilitation to Different Ongoing Projects

S/N	Name the of project	Duration of the project	Project Donor	Project allocated budget	Percentage of indirect cost agreement to EPHA
1	PMA/Reinvestment Ethiopian prototype project	2018- 2019	JHU	USD 2,224,879	15%
2	PMA/Family planning by Choice (FPbC)	March 2019, Dec 2019	MSIE /DFID	GBP 1,450,126	15%
3	Community Cause of Death study linked to maternal & child health (IDRC)	2016- 2020	IDRC	ETB 7,9 million	13%
4	Country Coordination Mechanism (CCM)	2017- 2019	Global fund	USD 253,876	5%
5	FMoH/AFENET/TETANUS	2018- 2019	AFENET	USD 55,485	10%
6	FMoH/ AFENET/GID	2018-2019	AFENET	USD 134,100	10%
7	FMoH/ AFENET /PMA	2018-2019	AFENET	USD 217,500	10%

Financial Managements

EPHA has been implementing various projects and non-project based activities in collaboration with many partners to facilitate and accelerate activities on the country's priority public health issues. In carrying out these diversified projects EPHA has been managing its own and donor resources. EPHA financial management entails planning, organizing, controlling and monitoring the financial resources of the Association

EPHA has an up-to-date accounting manual where accounting policies, procedure and systems are well documented. These guidelines provide sets of operating and reporting financial standards and practices which comply with internationally accepted accounting standards, including the International Public Sector Accounting Standards (IPSAS).

The Association uses accrual base Accounting system. Thus, it provide guidance for the Finance unit for the orderly execution of their respective responsibilities.

Currently, EPHA has 14 (Fourteen) separate project specific bank accounts in Government & private owned banks. All bank accounts operated by at least two bank co signatory (persons). The Executive board & the Ethiopian Agency for Civil Society Organization (ACSO) approval is mandatory to open new banks accounts.

Internal Control System

EPHA has sufficient internal control system to minimize the possible misuse of funds. The authorization and approval procedure are in place. There is sufficient segregation of duties & responsibilities in the payment approval cycle.

Financial Reporting

EPHA has the practice of preparing financial & progress activity reports for donors, internal and external information's users (Executive Board, Program/Project Directors, and partners). Report to donors meeting deadlines, produce accurate and verifiable figures, informing variations and challenges are the priority focuses of the association.

External Audit

In order to enhance the credibility of the financial statement all program /project accounts and the annual financial statement are subjected to external audit. The annual financial statement of the grant should be audited by an independent audit firm. The audit of the project will be carried out in accordance with the grant agreement, EPHA financial policy & procedure manual, ACSO requirement & as per the international audit standard. The general purpose (statutory Audit) & project specific audit are common practices of EPHA.

Human Resource

EPHA senior management has six members. The human resource administrative manual is an internal document prepared with the intention of providing systematic personnel rules & procedure essential for the proper function of the association.

This guideline provides staff employment, staff training and development, staff performance evaluation, disciplinary measures, employee salary and benefits as well as leave management.

Currently EPHA has 37 (Male 18 & Female 19) well experienced and skilled staff.

Institutional Review Board (IRB)

The EPHA-IRB is established by the initiative of both the board and secretariat of EPHA with the objective of increasing the quality of public health research by facilitating a "neutral" team of professional review public health researches that are conducted by any institution in Ethiopia.

EPHA-IRB registered on 31 October 2006, in order to provide independent guidance, advice, and decision in the form of "approved", "approved on conditions" and 'disapproved" on health research or other specific research protocols involving human subjects.

Currently, EPHA has got "level A" research ethics review license from Federal Ministry of Science and Technology (MoST). Several protocols were approved and certified by EPHA-IRB. The IRB committee consists of 7 members from both internal and external professionals.

The board has standard operating procedures /Terms of Reference (TOR)/ which provides the framework for constitution, responsibilities and activities.

Facility Management

Currently, EPHA has rented G+4 building. Fully equipped with all necessary accommodation including Broadband and Wi-Fi internet access. It also has seven vehicles for office & fieldworks.

EPHA Printing House

EPHA has its own printing house to publish various public health issues including research findings, policy briefs, innovations in public health, projects' results etc. though different outlets. It helps for the dissemination of evidence-based information to the members, stakeholders and the general public at large.



EPHA Library and e-learning Services

EPHA has Library and e-learning center to provide library services to the EPHA members and others through creating space for reading, availing books and internet services.



Income Generating Activities

In accordance with the new Charity and Civil Societies Proclamation No 1113/2019 Article 63(1) (b), EPHA is planning to engage itself on income generating activities. Hence, the revised organizational structure considered the income generating business unit separately. Printing service & Renting office building are supposed to be the major business unit of the Association.

EPHA's National and International Presence

Internationally, EPHA is a member of the World Federation of Public Health Associations (WFPHA). In 2008, EPHA was selected by the General Assembly of the WFPHA to host the 13th World Congress on Public Health with the theme "Towards Global Health Equity: Opportunities and Challenges". The Congress took place from April 23-27, 2012 in Addis Ababa and was concluded successfully. Participants from 120 countries have attended the international conference.

The EPHA Secretariat works closely with the African Federation of Public Health Associations (AFPHA) seated in Addis Ababa, Ethiopia within the premises of EPHA since September 2011. Through this collaboration, EPHA has made significant contribution for public health development in Africa including strengthening national public health associations and institutions in the continent.

Among others EPHA achievements regarding policy advocacy include:

- Made an influence in the legislations related to road traffic accident (use of seat belt, no mobile phone use while driving etc.);
- Contributed in the development and ratification of a framework on tobacco control at the level of the parliament;
- Contribute in the ratification of alcohol advertisements;
- Serves as an active member of FMoH professional licensing council;

EPHA's Building

EPHA's own house is under construction on 885m² plot of land secured through lease base agreement from the Municipality of City Government of Addis Ababa. The construction work is estimated to cost ETB 103 million.

The construction work of EPHA building has started in 2014. It is to be recalled that a cornerstone for the construction of the EPHA house was laid on September 14, 2013.

The house, which is being built around a place locally called 'Kebena' in Addis Ababa, is expected to serve as a Public Health icon, center of excellence for learning, research and development as well as capacity building and publications.

It is also expected to be an open place for public health professionals and sister organizations to network themselves, deliberate and exchange information and experiences that are of paramount significance to the enhancement of public health agenda in the country.

Executive Board Members of EPHA

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Dr. Mirgissa Kaba
Dr. Kidist Lulu
Dr. Adamu Addissie
Mr. Workneh Kassie
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