IN 2022

2022 was impacted by both the direct and indirect consequences of the conflict in northern Ethiopia, in the Tigray Region, as well as the ongoing global crisis and the consequences of drought, which caused severe damage and triggered internal migration flows. The country’s economic situation worsened, with continued currency devaluation and high inflation.

Nevertheless, CUAMM’s work continued and, indeed, expanded to new areas of Ethiopia. We carried out a project in Addis Ababa in partnership with the local health authorities of Kolfe Keranio sub-city to increase vaccination coverage and contain the spread of COVID-19. We also implemented activities in partnership with the Ethiopian Ministry of Health and the Ethiopian Diabetes Association to improve diabetes services (DMT) in 34 hospitals nationwide.

At the St. Luke Catholic Hospital in Wolisso, in the South West Shoa Zone, we ensured the presence of clinical staff to support key services such as internal medicine, pediatrics, and health management, but the difficult financial situation, high inflation, and resulting restrictions greatly reduced people’s access to the services, adding heavily to costs.

In the South Omo Zone, our maternal and child health intervention with the Jinka and Turmi Hospitals came to an end, while we bolstered our intervention in the Gambella Region in support of South Sudanese refugees living in the Nguenyiel, Tierkidi, Kulle and Jewi camps with the aim of ensuring their access to basic health services by improving infrastructure and equipment and making available trained staff.

Our health intervention proceeded in the Somali Region’s Harawa District, and we sent mobile clinics to the southern part of the region, to Liben Zone, to support IDPs who had fled their homes due to the drought.

In the Tigray Region, despite some interruptions due to a renewed flareup of the conflict in the summer of 2022, we were able to provide support to 3 health facilities and the ambulance referral system. On 12 November 2022, a peace pact was finally signed to end the bloody two-year conflict.

Last but not least, we launched a new project in support of IDPs in the Ahmara Region in Debre Birhan that involved mobile health and nutrition clinics.
WHERE WE WORK

AMHARA REGION
1 IDP camp (Debre Birhan)
1 district
300,000 population served

GAMBELLA
2 hospitals (Gambella and Gambella Primary Hospital)
16 districts
6 health centers
104,120 population served
4 refugee camps (Nguenyiel, Tierkidi, Kulie and Jewi)
295,958 refugees

TIGRAY
1 hospital (Kidet Merkem Hospital)
2 health centers
3 districts
112,797 population served

SOMALI
4 health centers
3 districts
120,746 refugees
688,680 population served

SOUTH WEST SHOA ZONE
2 hospitals (St. Luke Catholic Hospital and Ameya)
1 district
300,000 population served

SOUTH OMO ZONE
2 hospitals (Turmi and Jinka)
2 districts
3 health centers
560,603 population served

RESULTS ACHIEVED

MATERNAL AND CHILD HEALTH
54,196 prenatal visits conducted
32,540 deliveries attended
296,218 under-5 children examined
2,500 trips provided for obstetric emergencies
73,384 vaccinations administered

NUTRITION
595 children treated for severe acute malnutrition

INFECTIOUS DISEASES
1,490 patients diagnosed with tuberculosis
202,597 patients treated for malaria
1,002 patients treated with antiretroviral therapy

CONTINUAL TRAINING
446 community agents
289 nurses and midwives
145 doctors
676 others

CHRONIC DISEASES
3,144 visits for diabetes
3,261 visits for hypertension
139 patients with diabetes
22 patients with cerebral ischemia

SURGICAL PROCEDURES
2,802 major surgical procedures, incl. 222 orthopedic ones
3,058 minor surgical procedures, incl. 334 orthopedic ones
972 physiotherapy sessions provided

HUMANITARIAN RESPONSE
127,812 emergency room visits
134 obstetric and neonatal emergencies transferred
959 deliveries attended
1,569 prenatal visits conducted
173 health workers trained