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IANPHI

NPHI CASE STUDY Profile of Creation and Growth

Ethiopia Public Health Institute (EPI)

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Director General, Ethiopia Public Health Institute; reports to Minister of Health

“Development a strategic plan is crucial, in order to establish a common vision.”

Dr. Amha Kebede

Dr. Amha Kebede, MSc, PhD, served as the Director General of EPHI prior to the creation of EPHI, and continues to serve in that role in the newly established institute. Dr. Kebede's career includes over 25 years working in public health at EPHI, and he also serves as an IANPHI Executive Board Member.

Date of creation: January 2013

Precursor Organizations EPHI was created from one primary precursor organization, the Ethiopian Health and Nutrition Research Institute (EHNRI), but is the final result of nearly 90 years of evolving public health institute arrangements in Ethiopia.

CREATION OF THE NPHI Ethiopia's Institute first began as the George Memorial Hospital in 1930, and then was led by Italians until 1935. Soon after independence from the Italian occupation, the Institute was established as the Imperial Medical Research Institute in 1940. In 1952, it was again re-established with a bilateral agreement with the French, as Institute of Pasteur d' Ethiopie. By 1965, it came to be the Imperial Central Laboratory, and focused primarily on laboratory referral services.

The turning point as a proper health research institute materialized in 1986 when the then National Research Institute of Health was formally established. Subsequently, the Ethiopian Health and Nutrition Research Institute was established in 1996 after the merger of three independent institutes: National Research Institute of Health (NRIH), Ethiopian Nutrition Institute (ENI) and the Department of Traditional Medicine Research of FMoH. In 2013, with the establishment of regulation 301/2013, EPHI was established as an autonomous Institute with a legal entity accountable to the Federal Ministry of Health (FMoH) of Ethiopia by the Council of Ministers.

Process of Reorganization As part of a major restructuring exercise in the general civil service of Ethiopia, EHNRI was required to undergo business process reengineering (BPR) in 2010. The process enabled the Institute to critically examine its activities. Through this process, EHNRI recognized that most of its research was not based on priority public health problems, implementation capacity was insufficient, monitoring and evaluation were poorly organized, and dissemination of research outcomes was severely limited and not well utilized by stakeholders and communities to influence health policy.

According to the former regulation, the major objective of EHNRI was research focused on major health and nutrition problems, as well as traditional and modern medicine. Immediately after the restructuring, the research transitioned towards a more comprehensive public health approach. With this new, comprehensive approach, other objectives were identified, including the need for national coordination of research and a central database; the institute's responsibility for public health emergency management; a national mandate for strengthening the laboratory system; and the inclusion of new mandates for technology transfer, health system, and environmental health research. These additional responsibilities and mandates called for a new regulation that would make it easier for the institute to achieve its new mission and vision more efficiently.

BENEFITS OF THE INSTITUTE

The establishment of EPHI has provided a number of benefits to the state of public health in Ethiopia. One of the great advantages of having a dedicated national public health institute like EPHI is the establishment of clearly defined public health mandates, leadership, and lines of authority. Additionally, it provides opportunities for clarity of mission and focused objectives. In other words, creation of an independent national level institute makes it possible to be in a strong position to act in a more coordinated manner – in the best interest of public health – and to adapt to changing priorities. Furthermore, it will create an environment conducive to the clarification and consolidation of legal authorities for many activities such as conducting surveys and surveillance, mounting responses to public health emergencies, and developing a national reference laboratory.

Creating a strong national public health institute like EPHI is an important step forward in conducting, translating, and adapting scientific evidences into policies and program implementation, thereby protecting the public's health. Strengthening Ethiopia's national public health institute enables better prevention and control of infectious and non-infectious diseases, including injuries. Success of EPHI will depend on accurate collection, analysis, and dissemination of data to implement and monitor evidence-based programs. In the long run, this will also reduce dependency on external expertise and support, and at the same time, it increases country ownership and sustainability of national public health programs.

SELECTED CORE FUNCTIONS

As a public health institute, EPHI closely works with FMoH and other stakeholders in many areas. It provides evidence-based information through research findings, handles public health emergency management, conducts health and health-related surveys and surveillance, supports the national laboratory system, and produces vaccines and diagnostic testing.

A number of issues were identified as bottlenecks in carrying out the Institute's responsibilities efficiently, highlighting the need for a comprehensive national public health institute as a way of strengthening the national health system. The new regulation, as powers and duties of the new EPHI, gives a clear legal framework regarding public health research in 10 of its 21 sub-sections. Therefore, as a public health institute, EPHI's legal mandate is to ensure availability of critical epidemiologic and interventional scientific evidences through research for informed public health decision-making. The data generated will be critical

to formulating appropriate health policy, designing and implementing safe and effective interventions, and discerning where and how to invest human and financial resources. In addition to this, the recurrence of epidemics and the fragmented approach in their handling presented another problem, which led to the identification of public health emergency management as an area in which EPHI should be engaged. From a public health emergency management standpoint, sub articles 11 to 16 clearly address the powers and duties of the Institute. As a public health institute, EPHI is now in a better position for prevention, preparedness, early warning, response, and recovery from any natural or man-made disaster. The new regulation has also allowed for implementation of new focus areas including technology transfer, health system research, vaccine and diagnostic production, and both short-term and long-term trainings in collaboration with universities.

CHALLENGES TO THE INSTITUTE

Throughout EPHI's development process, Dr. Kebede and his team addressed various challenges. One of the greatest challenges has been recruiting and maintaining highly trained professionals to work at the Institute. Additionally, the timely procurement and delivery of essential items has been difficult.

As EPHI underwent its initial development stages, the Institute worked closely with a number of both domestic and international partners. Working to harmonize and align the work of the Institute with its partners was challenging, but has also been beneficial to the successful establishment of EPHI.

RECOMMENDATIONS FOR OTHERS WHO ARE CREATING NPHIS

Development of the strategic plan is crucial, in order to establish a common vision. The strategic plan is also a key step for identifying outputs and activities, allocating resources, standardizing operational plans and reports, and facilitating communication.

Reviewing the existing organizational structure in line with the requirements of the strategic plan is highly recommended to facilitate the plan's implementation.

Continuous consultation of partners and other relevant stakeholders in planning, implementation, and performance reviews is highly recommended to ensure ownership, facilitate implementation of the strategic plan, and ensure the utilization of its outputs.

Alignment of research, surveys, and surveillance with nationally prioritized areas, such as prevention of diseases and other key issues, is critical for ensuring the effectiveness of health programs and strategies.

Improving human resource management to retain and attract research staff; streamlining procurement processes to reduce delays in the purchasing of required inputs for survey and surveillances; and strengthening efficiency through communication and collaboration with relevant stakeholders is essential.

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