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Center of Excellence for Reproductive Health at St. Paul's Hospital Millennium Medical College

INAUGURATION CEREMONY

SEPTEMBER 7, 2025



P.03 From Michu to National Pride: Addis Ababa, Ethiopia | September 7, 2025
Inauguration of the SPHMMC & SPIRHR Center of Excellence for Reproductive Health

On September 07, 2025, the inauguration of the new Center of Excellence (CoE) for Reproductive Health at....

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Infertility is defined by the World Health Organization (WHO) as the inability to achieve a clinical pregnancy after 12 months or more of regular unprotected sexual intercourse....

Editorial Message



It is with great pride and profound excitement that we present this special 10th Edition of the SPIRHR Bulletin, a special edition dedicated to a historic milestone in our institutional journey and in the advancement of reproductive health across Africa. On September 5, 2025, we witnessed the inauguration of the new Reproductive Health Building Complex at SPHMMC, a state-of-the-art facility envisioned to serve as a true Center of Excellence for Reproductive Health in Africa. The ceremony was graced by the presence of H.E. Dr. Mekdes Daba, Minister of Health of the FDRE, and Professor Senait Fisseha, Deputy Global Director of STBF, along with distinguished national and international guests who have long supported our mission.

This edition brings together thoughtful reflections, analytical pieces, and forward-looking perspectives on the transformative role that such a center will play in strengthening reproductive health services, advancing high-quality research, and shaping policy dialogue across the continent. The new center symbolizes far more than a building it represents a renewed commitment to excellence, innovation, and equity in reproductive health. It is envisioned as a regional hub for advanced training, a platform for cutting-edge research, and a catalyst for evidence-based advocacy that will influence policy and practice across Africa.

The inauguration of this center marks the culmination of a remarkable journey that began with the Michu Model Clinic—a modest but visionary initiative that, over the past decade, grew into a national model of integrated, person-centered reproductive health care. The evolution from Michu to this new, vibrant Center of Excellence reflects our collective dedication to scaling impact, responding to the needs of women and adolescents, and expanding access to high-quality RH services.

SPIRR and SPHMMC are deeply honored to see this long-awaited aspiration realized. We are confident that this facility will further elevate the visibility of our institution in the global arena and position us as a key contributor to Africa's reproductive health landscape. At a time when African women and families face emerging challenges and growing demands, institutions like this are both timely and essential. They deserve strong support from governments, partners, and regional bodies, and similar centers should be established across the continent to ensure that no woman is left behind. As we commemorate this milestone, we also reaffirm our commitment to producing research that matters, nurturing the next generation of RH leaders, and driving policy advocacy grounded in evidence and compassion. This 10th edition stands as a celebration of what we have achieved and as an invitation to envision what is yet possible.

Welcome to this commemorative issue. Welcome to the future of reproductive health in Africa.

Malede Birara MD, MPH, FCOG(ECSA),
Editor in Chief of the Bulletin

SPIRHR Updates

FROM MICHU TO NATIONAL PRIDE: Addis Ababa, Ethiopia | September 7, 2025 Inauguration of the SPHMMC & SPIRHR Center of Excellence for Reproductive Health

On September 07, 2025, the inauguration of the new Center of Excellence (CoE) for Reproductive Health at St. Paul's Hospital Millennium Medical College (SPHMMC) marked a bold statement: investing in women's health is investing in a nation, and African institutions can build the capacity to provide it.

Inaugurated by H.E. Dr. Mekdes Daba, Minister of Health, alongside hospital, St. Paul Institute for Reproductive Health and Rights (SPIRHR) leadership and partners, this B+G+4 facility marks the culmination of a journey that began with the humble "Michu Clinic."

For decades, the narrative in Sub-Saharan healthcare has focused on basic access—getting patients into clinics. However, access without quality remains a hollow victory. This region still accounts for roughly 70% of global maternal deaths, a statistic driven largely by a lack of specialized care and complications that basic clinics cannot handle.

The Center of Excellence challenges this status quo. By consolidating outpatient care, operating theaters, and inpatient units under one roof, it moves from fragmented service delivery to a holistic high-quality model.

One of the greatest challenges for professionals is access to quality and modern training opportunities. This new center fights that trend directly with its modern simulation lab and training halls. By offering state-of-the-art

simulation training locally, the Center ensures that residents and medical students gain world-class. It creates a self-sustaining ecosystem where experts are trained in Africa, for Africa. The center also integrates the SPIRHR Continuous Professional Development (CPD) center ensuring access to quality professional development opportunities for healthcare professionals in Ethiopia and beyond.

From "Michu" to Scalability

Perhaps the most encouraging aspect of this center is its origin story. It began as the "Michu Clinic"—a small unit ("Michu" means comfortable in Amharic). What started as a small clinic focused on comfort and family planning has scaled into a national hub.

For policymakers across the continent, SPHMMC demonstrates that with the right partnerships - like the one between SPHMMC and SPIRHR - small pilot programs can mature into national pillars of health.

A Call to Action

As the doors open, the real work begins. This Center is a beacon for what is possible when government, academia, and development partners align. SPIRHR calls upon the wider community to sustain this vision—ensuring that for every woman who walks through these doors, the promise of "Michu" (comfort) and excellence is kept.

Training Pillar

PSEA Training

A delegate staff attended a dedicated training on the Prevention of Sexual Exploitation and Abuse (PSEA), reinforcing the institutional commitment to safeguarding and ethical practice. The training covered key areas such as understanding power dynamics, identifying potential risks, and developing mitigation strategies. This effort aligns with broader institutional safeguarding policies.

LIFT Support Training on Simulation Technology

An online Laerdal simulation workshop was conducted with the aim of developing a simulation lab guideline. The session brought together experts and trainers working in clinical simulation and medical education. Discussions focused on standardizing simulation-based learning practices, scenario design, and incorporating Laerdal's high-fidelity mannequins and software into routine training and assessment.

An online LIFT (Laerdal Integrated Facilitator Training) support session was conducted focusing on live simulation mannequins and their application in teaching and evaluation. This training contributes to the Training and Education pillar by enhancing the capacity of facilitators and educators to deliver effective simulation-based instruction using evidence-based methods.

Research Pillar

The St. Paul Institute for Reproductive Health and Rights (SPIRHR) organized and conducted a training workshop on "Introduction to KoboToolbox: an electronic data capturing and management platform" from October 06 -07, 2025, at the RH COE CPD hall. The participants were OBGYN faculty, fellows, and residents from the Department of Obstetrics and Gynecology of St. Paul's Hospital Millennium Medical College. The workshop aimed to equip the participants with the skills and knowledge to use KoboToolbox, a free and open-source tool for electronic data collection and management.

Electronic data collection and management has several advantages over paper-based methods, such as being eco-friendly, cost-efficient, easy to export data to statistical softwares, easy to share with other collaborators or co-investigators, and enhancing data quality through real-time monitoring and analysis. Among others creating forms, deploying forms, collecting data, managing data, and analyzing data using KoboToolbox were the topics covered.

Following the training, participants gained a comprehensive understanding of KoboToolbox's features and functionalities with an increased awareness regarding the advantages of electronic data collection and management. They also improved skills in creating forms, collecting, managing, and sharing data using the platform.

In all, the participants were engaged in hands-on exercises and group discussions throughout the workshop. The feedback from the participants was positive and they expressed their appreciation for the opportunity to learn about KoboToolbox and showed enthusiasm about incorporating KoboToolbox into their research projects for enhanced data collection and management efficiency.

Advocacy Pillar

MARCH 8



SPIRHR held a Women in Health Science Panel Discussion on March 19, 2025 to commemorate March 8, 2025 (Women's Day) in collaboration with SPHMMC. The event celebrated the achievements of women in health science, particularly within St. Paul's Hospital and various other institutions. The event also provided a platform to recognize and appreciate the contributions of women in the medical field, inspire young women, and encourage high school girls to pursue careers in health sciences. The discussion showcased female leaders and experts who have made

remarkable strides in various health science fields, aiming to create a supportive environment for future generations. Representatives from SPHMMC leadership, MOH, high school students and women in health sciences were in attendance and had positive feedback towards the event.



Women's Health Week 2025

Women's Health Week was also organized by YeneHealth in collaboration with SPHMMC and MOH. SPIRHR was also a part of this critical event which was dedicated to advancing women's health, women's professional skills development, and overall wellness. The event was held at Entoto park with participants gaining access to live health screenings and consultations with wellness and healthcare professionals, interacting with health, nutrition

& fitness vendors, getting tips and advice on capacity building and professional development while connecting with other women and their families.

Adolescents and Youth Sexual and Reproductive Health for Health Professionals Digital media has become a more powerful tool for SRHR advocacy than ever before. The ease of use and accessibility of these platforms allows for open and candid discussions about topics such as contraception, pregnancy, and abortion. Because digital media is increasingly being used to share information and resources on SRHR, SPIRHR, recognizing the importance of this medium for better advocacy, has been collaborating with EngenderHealth and YetenaWeg to provide training for health professionals on Adolescents and Youth Sexual Reproductive Health.

With a goal of reaching to professionals and establishing collaboration between EngenderHealth Inc and YetenaWeg to advocate for improved attention to SRHR, create awareness, identify areas for research and policy dialogue, and make long-lasting change on areas of SRHR and gender equality in Ethiopia. This partnership is part of the ongoing efforts of all parties on health promotion to increase public awareness, to build the capacity of health professionals (competency and skill) and create an enabling environment.

The virtual training continued throughout the remainder of the year, totaling seven cohorts. The sessions were commended by the participants for the innovative approach of delivery and the timeliness of the topics raised.

In 2024 we had a total of 7 cohorts and delivered the training to more than 150 SRH service providers. In 2025 we have improved on our previous experiences and have already delivered to 4 Cohorts, nearly 100 professionals. The accreditation of the course is also underway and the course being re-evaluated by the delivery team.

Clinical Service Pillar

Dissemination Workshop on Abortion Capacity Building



A workshop was held to disseminate research findings related to abortion care capacity building. The event was attended by 45 stakeholders, including representatives from the Ministry of Health, NGOs, Addis Ababa University, family planning fellows, and researchers. The workshop included an opening message from the Ministry of Health (MOH), research result findings, oral abstract presentations and poster presentation,

comments on the results and next steps and ended with a closing speech by the MOH.

Articles

SRHR and *Male* Participation

Sexual and Reproductive health services are seen to include women primarily. It is common to see educational training and services focusing on women solely. This can be due to women being more specifically influenced in relation to SRH issues. Although the lack of such services for women will indeed threaten women's health, specifically via increasing the chance of unintended pregnancy and unsafe abortion, increased chance of STI, and increasing maternal morbidity and mortality, it doesn't dispose of the need for men's engagement in SRHR. Consideration of male SRHR awareness and service is equally vital not only because of the need to address their neglected need for SRH awareness and service but moreover because it will augment women's. When men do not share the burdens of SRH women bear the responsibility for their own and their family's SRH and eventually the society's. Addressing the SRHR awareness needs of young men as early in life as possible can affect life-long attitudes and behavior pattern formation towards the issue achieving just that, men who share the burden of maintaining SRH of family. Engaging men and boys is thus central to building more equitable societies.

In the predominantly traditional society we live in, men tend to be primary decision-makers on social, economic, and domestic fronts. This key role can be utilized in influencing SRHR awareness and service-seeking behavior of families/couples. Therefore, recognizing the fact that the role of head of household is

families/couples. Therefore, recognizing the fact that the role of head of household is important and men tend to be the decision-makers and utilizing it in influencing health-seeking behavior in families and as partners in women's SRH health is important. This comes with its challenge. One of the main challenges with exploiting the role of the decision-maker to increase SRHR awareness and service-seeking behavior is impeding women's right to make decisions for themselves. In consideration of this challenge, the WHO suggests a "Gender-transformative approach."

What is a "Gender-transformative approach"?

WHO characterizes a gender-transformative approach as 'an approach that addresses the root causes of gender-based health disparities through interventions that challenge and change harmful and unequal gender standards, roles, and unequal power relations that benefit men over women. There are six interrelated standards of the gender transformative approach. These are Human rights, Power, Norms and values, Gender and diversity, Empowering women and girls, and Engaging men and boys in SRHR. The role of GTA in SRHR is engaging men and tending to harmful masculinities to improve SRH services. The center of this approach is tending to gender imbalance and challenging gender power relations while also addressing SRHR issues. Programs and interventions involving men and boys have to be deliberate in advancing gender equality by unequivocally focusing on destructive gender norms, including harmful standards surrounding masculinity and

An example of a GTA approach-based intervention could be community conversations and training activities targeting school-aged and adolescent boys and girls. Such conversations will be thought-provoking for children and young adults and allow unlearning of harmful gender-based inequalities at a much earlier age. Age is an important factor in the transformative approach, as children and young adults are yet to form a firm attitude towards gender issues, while adults have a long-held belief that will be difficult to unlearn as compared to the younger age group.

The conversations should address disparities and inequalities starting from the household scale to the community and beyond, to learn and shift constraining gender norms at each level.

SRHR and Fertility Care

Infertility Care in Ethiopia: Navigating constraints

By Dr Selam Yihun, Assistant Professor of Ob/ Gyn
Reproductive Endocrinology and Infertility Fellow at
SPHMMC

Infertility is defined by the World Health Organization (WHO) as the inability to achieve a clinical pregnancy after 12 months or more of regular unprotected sexual intercourse. It affects 10-15% of couples globally. In resource-limited settings, the consequences of infertility extend beyond medical concerns to include profound social, psychological, and economic repercussions, particularly for women. Despite these impacts, infertility care has received scant attention in national reproductive health agendas, including in Ethiopia, where maternal health, contraception, and infectious diseases remain dominant priorities.

In Ethiopia, despite growing awareness of reproductive health issues, infertility care remains marginalized within the broader healthcare system. This article explores the multifaceted challenges impeding effective infertility care in Ethiopia.

1. Limited Access to Diagnostic and Treatment Services

Infertility services in Ethiopia are largely concentrated in a few urban centers, with specialized care available solely in the capital city and mostly in limited private facilities. Public health institutions rarely provide comprehensive infertility evaluations and

Public health institutions rarely provide comprehensive infertility evaluations and there is a single public institution available for advanced assisted reproductive technologies. Basic diagnostic tools such as hysterosalpingography, semen analysis, and hormonal profiling are inconsistently available, especially outside Addis Ababa. Furthermore, the lack of standardized referral systems leads to delays in diagnosis and management.

2. Shortage of Trained Professionals and Infrastructure

The field of reproductive endocrinology and infertility is nascent in Ethiopia. There are few specialists trained in the diagnosis and management of infertility. This workforce deficit is exacerbated by the shortage of training programs within the country. Moreover, infertility clinics require specialized infrastructure, which is often too costly for public institutions and beyond the reach of most private investors in the Ethiopian healthcare market.

3. Financial Barriers

Infertility care, particularly ART, is prohibitively expensive in Ethiopia. With no insurance coverage or public subsidy, patients must bear the full cost of evaluation and treatment, which can run into thousands of Ethiopian birr. This makes infertility care inaccessible to the majority of the population, deepening inequities in reproductive health access. Even where basic services are available, the indirect costs—such as transportation,

Infertility carries significant stigma in many Ethiopian communities, often resulting in social ostracism, marital discord, or gender-based violence. The burden of blame is disproportionately placed on women, regardless of the underlying etiology. As a result, many women delay or avoid seeking care due to fear of discrimination. Cultural expectations that equate womanhood with motherhood further compound the psychological distress associated with infertility. In such a context, silence and denial often prevail over open discussion and timely intervention.

5. Policy and Programmatic Gaps

Despite global calls to recognize infertility as a public health issue, Ethiopia has yet to incorporate infertility services into its national reproductive health policy. The country's Health Sector Transformation Plans (HSTP) have made commendable strides in maternal and child health, yet infertility remains absent from key strategic documents. The lack of data on the prevalence, causes, and outcomes of infertility further hampers evidence-based planning. Without policy recognition, there is limited institutional commitment to resource allocation or program development in this area.

To advance infertility care in Ethiopia, a multidimensional approach is necessary including integration into Reproductive Health Policy, capacity building, infrastructure development, financial Protection and community engagement.

Infertility care is not a luxury; it is a fundamental part of reproductive health. In Ethiopia, addressing the barriers to fertility treatment is not only a matter of equity but also of human rights. As the country moves toward universal health coverage, infertility must not

be left behind. As demand continues to grow, a coordinated national response is essential to ensure that all individuals and couples have the opportunity to build the families they desire.



About St. Paul Institute for Reproductive Health and Rights (SPIRHR)

SPIRHR was established and registered by the Federal Democratic Republic of Ethiopia Agency for Civil Society in September 2019 as a local non-governmental organization with the vision of strengthening and facilitating effective and quality sexual and reproductive health and rights programs at St. Paul's Hospital Millennium Medical College (SPHMMC). SPIRHR is an independent institution targeting to ensure the project's implementation in the most efficient and effective way while ensuring accountability and transparency. Since its inception, SPIRHR has continued supporting the implementation of major program activities that were jointly planned with SPHMMC Ob/GYN faculties while taking the lead in the administration and coordination of RH infrastructure development as per a collaborative framework outlined by a memorandum of understanding. Through the collaborative effort of SPHMMC and SPIRHR, SPIRHR will continue to invest in four key priority areas of intervention: training, research, advocacy, and clinical services. SPIRHR aim to reduce maternal mortality and morbidity through coordinated sexual reproductive health and rights and enable girls and women to reach their full potential.