

EDITORIAL**Is Neonatal Mortality Rate in Ethiopia Going from Bad to Worse?****Abraham Haileamlak, MD, Professor of Pediatrics and Child Health**DOI: <http://dx.doi.org/10.4314/ejhs.v32i3.1>

Children face the highest risk of dying in their first month of life at an average global rate of 17 deaths per 1,000 live births in 2020 (1). According to the Sustainable Development Goal (SDG)- 3 targets, by 2030, all countries in the world are expected to end preventable deaths of newborns thereby reducing neonatal mortality to as low as 12 per 1,000 live births. Ethiopia as one of the member countries is expected to achieve the above target by 2030 (2).

In doing so Ethiopia indicated neonatal health targets in the Health Sector Transformation Plan (HSTP) aimed to reduce neonatal mortality to 10 per 1000 live birth by the end of the plan period (3). Under the umbrella of the HSTP-I, National Newborn and Child Survival Strategy was developed and implemented where seventeen cost-effective interventions were identified and prioritized to improve neonatal survival (4).

Despite the package of interventions during HSTP-I, there have been no significant reductions in neonatal mortality. On the contrary, an increasing trend of neonatal mortality is being observed (5). The neonatal mortality rate in Ethiopia lagged by 23 neonatal death per 1000 livebirth from the HSTP-I target. Although several factors including the rampant security issue in the country could be possible hinderances, by all measures the achievement so far is unsatisfactory.

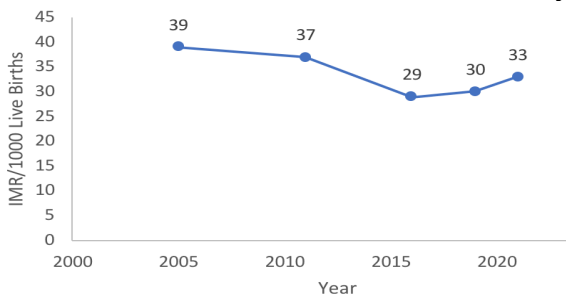


Figure 1. Infant Mortality Rate Trend in Ethiopia (Data source: EDHS and HSTP-I situational analyses).

While the plan was to bring rapid decline in neonatal mortality, attaining a stagnant or even increasing trend, it appears that the sustainable development goal targets are far to reach in Ethiopia unless strong interventions are made at all levels. The upcoming National Newborn and Child Survival Strategy need to identify and prioritize more evidence-based and cost-effective interventions to narrow the gap. Above all, adequate preparation and commitment at all levels is required to properly implement the interventions.

The current issue of the Ethiopian Journal of Health Sciences, the third regular issue for the year 2022, contains an editorial and twenty-one original articles. Two of the original articles one way or in other talks about neonatal conditions.

I invite readers to read through these articles and appreciate or utilize the contents. I also urge readers to forward comments and suggestions to the editor or the corresponding authors.

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