



City of Addis Ababa



The 1st Voluntary Local Review

**Tracking Progress on
SDGs 3, 4, 6, 8, 9, & 11**



Addis Ababa City Administration Strategic Programs Management Office

Addis Ababa's 1st Voluntary Local Review

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Mayor's Message

Mayor Adanech Abiebie

It is my immense pleasure to present this Voluntary Local Review (VLR), which reflects Addis Ababa's steadfast commitment to advancing the Sustainable Development Goals (SDGs) and contributing to Ethiopia's broader development vision. As the capital city and a key economic and diplomatic hub, Addis Ababa recognizes its pivotal role in translating global aspirations into tangible local action.

Aligned with Ethiopia's Ten-Year Perspective Development Plan (2019/20–2029/30) and the 2030 and 2063 Agenda, our city has embraced the localization of the SDGs as a central pillar of urban governance. Through integrated planning, institutional coordination, and inclusive stakeholder engagement, we are working to ensure that no one is left behind as we pursue sustainable and equitable urban development.

Our progress to date demonstrates both commitment and results. We have advanced initiatives in sustainable mobility, affordable housing, waste management, and urban resilience. Strategic investments in corridor development, green infrastructure, and service delivery improvements are helping to address the pressures of rapid urbanization while enhancing the liability of our city. At the same time, Addis Ababa continues to contribute significantly to the national economy, reflecting its importance as a driver of growth and innovation.

This VLR also highlights the challenges we must collectively confront. Rapid population growth, infrastructure deficits, unemployment, and environmental pressures, particularly climate-related risks such as flooding and water scarcity, remain pressing concerns. These challenges require adaptive governance, strengthened institutional capacity, and innovative financing mechanisms.

In response, Addis Ababa is reinforcing its commitment to data-driven decision-making, enhanced urban planning, and strengthened partnerships with national institutions, development partners, the private sector, and civil society. We are investing in youth empowerment, digital transformation, and green development pathways to build a resilient and inclusive city for present and future generations.

This review is not only a tool for measuring progress but also a platform for transparency, accountability, and shared learning. It reflects our determination to continuously improve, to address inequalities, and to accelerate the achievement of the SDGs at the local level.

I extend my sincere appreciation to UNECA, The SPMO and all other stakeholders who have contributed to this process. Together, we will continue to build a smart, resilient, and sustainable Addis Ababa that serves as a model for cities across Africa and beyond.





Message from the Head of the Strategic Programs Management Office

Dr. -Ing. Eshetayehu Kinfu

It is with great honor that I present findings of this study, which provides a comprehensive assessment of Addis Ababa's progress in advancing the Sustainable Development Goals (SDGs). This publication reflects the city's continued commitment to evidence-based planning, transparency, and accountability in its development efforts.

The study provides systematic insights into achievements across key sectors, including education, health, industry, urban infrastructure, service delivery, and broader economic domains that contribute to urban resilience. These findings highlight the necessity for sustained, coordinated, and integrated interventions to ensure that development outcomes are both inclusive and sustainable.

As the institution responsible for providing policy guidance and coordinating and monitoring priority programs, the Strategic Programs Management Office recognizes the critical role of empirical evidence in informing policy formulation and enhancing program performance. The results presented in this report constitute an essential resource for refining strategic priorities, strengthening implementation frameworks, and improving alignment with national and global development agendas.

Furthermore, this publication reinforces our commitment to fostering collaboration among government entities, development partners, the private sector, and the community at large. By sharing knowledge and lessons learned, we aim to contribute to broader efforts toward achieving the 2030 Agenda.

The Strategic Programs Management Office also extends its sincere appreciation to the technical team involved in the Voluntary Local Review (VLR) assessment for their expertise, dedication, and rigorous analytical contributions throughout the study. In addition, we gratefully acknowledge the United Nations Economic Commission for Africa (UNECA) for its technical and financial support, which was instrumental in the successful completion of this assessment.

We remain dedicated to utilizing the insights from this study to drive transformative actions that will support the development of a more resilient Addis Ababa.

**Message from Chief of Section, Eastern Africa Regional Integration & AfCFTA
Sub-Regional Office for Eastern Africa, UNECA
Atkeyelsh Persson, Ph.D.**



The Voluntary Local Review (VLR) of Addis Ababa City Administration marks a significant milestone in advancing the localization of the Sustainable Development Goals (SDGs) in one of Africa's most dynamic and rapidly growing urban centers. The United Nations Economic Commission for Africa (UNECA) is pleased to have supported this process as part of its commitment to promoting sustainable and inclusive urban development across the continent.

UNECA's engagement commenced with the convening of the inaugural stakeholder workshop that formally launched the VLR process in Addis Ababa. This platform introduced the VLR guidelines, facilitated peer learning, and brought together cities that have undertaken similar reviews to share practical experiences and lessons. This inclusive and collaborative approach helped lay a strong foundation for the City's VLR journey.

The process that followed, including stakeholder consultations and the review of the City's progress report, reflects Addis Ababa's commitment to transparency, inclusiveness, and evidence-based planning. The prioritization of six SDGs within the City's strategic framework is both pragmatic and forward-looking, while also demonstrating the indivisible and interconnected nature of the Goals.

The VLR further highlights Addis Ababa's ongoing rapid urban transformation, driven by investments in infrastructure, service delivery, and institutional reform. A key pillar of this transformation is the strengthening and expansion of municipal fiscal space. In this regard, UNECA has supported the City through diagnostic work and targeted interventions aimed at increasing domestic resource mobilization by harnessing the City's full economic potential, alongside efforts to improve public financial management. These measures are essential to enabling Addis Ababa to sustainably finance its development priorities and respond to increasing urban demands.

The City's continued efforts to strengthen urban governance, promote accountability, and foster stakeholder engagement are equally commendable and essential for achieving resilient and inclusive development outcomes.

This Voluntary Local Review serves not only as a reporting mechanism but also as a strategic tool for learning and continuous improvement. UNECA commends Addis Ababa City Administration for its leadership and remains committed to supporting cities across Africa in accelerating progress toward the 2030 Agenda.

Graphical Summary

Localizing the 2030 Agenda for Sustainable Development

Evaluating Progress & Challenges in Addis Ababa



Measure
Performance



Identify
Bottlenecks



Promote
Transparency

Four-Tier Assessment Framework



Achieved
≥100%



On Track
≥70%



Accelerated Effort
Needed <70%



Needs Targeted
Intervention <30%

Focus on Six Priority SDGs



SDG 3
Health



SDG 4
Education



SDG 6
Water &
Sanitation



SDG 8
Economic
Growth



SDG 9
Industry
Innovation



SDG 11
Sustainable
Cities



75% Achieved
in Quality Education



**Maternal & Child
Mortality Reduced**
in Health



25% Targeted
Intervention in
Decent Work



57% Safe Drinking
Water Access in
Water & Sanitation

Key Challenges & Priorities



High Unemployment



Water & Sanitation Gaps



Climate Resilience
& Local Financing



List of Abbreviations

AGH: Addis Ababa General Maternal & Child Health Hospital	MMR: Maternal Mortality Ratio
ANC: Antenatal Care	MSE: Micro and Small Enterprises
ART: Antiretroviral Therapy	MVA: Manufacturing Value Added
AU: African Union	NDC: Nationally Determined Contribution
C/S: Cesarean Section	NICU: Neonatal Intensive Care Unit
CRGE: Climate-Resilient Green Economy	NMR: Neonatal Mortality Rate
DHIS2: District Health Information Software 2	ODA: Official Development Assistance.
ECD: Early Childhood Development	OECD: Organization for Economic Co-operation and Development
ETB: Ethiopian Birr	OHS: Occupational Health and Safety
GCP: Gross City Product	PM2.5: Fine Particulate Matter
GDP: Gross Domestic Product	PSNP: Productive Safety Net Program
GPI: Gender Parity Index	RTA: Road Traffic Accident
HEP: Health Extension Program	SBFR: System Bottlenecks Focused Reform
HEW: Health Extension Workers	SDG: Sustainable Development Goal
HIV: Human Immunodeficiency Virus	SRH: Sexual and Reproductive Health
HMIS: Health Management Information System	SUD: Substance Use Disorder
HSDIP: Health Sector Development and Investment Plan	TB: Tuberculosis
HSTP II: Health Sector Transformation Plan II	TVET: Technical and Vocational Education and Training
ICT: Information and Communications Technology	TYDP: Ten-Year Development Plan (2019/20–2029/30)
IG: Immunoglobulin (specifically Hepatitis B immunoglobulin)	U5MR: Under-five Mortality Rate
IWRM: Integrated Water Resource Management	UNECA: United Nations Economic Commission for Africa
LB: Live Birth	VLR: Voluntary Local Review
MDSR: Maternal Death Surveillance and Response	VNR: Voluntary National Review
	WASH: Water, Sanitation, and Hygiene
	WHO: World Health Organization

1. Introduction

1.1. Ethiopia's Journey Towards the SDGs

Ethiopia has placed the Sustainable Development Goals (SDGs) at the center of its national development agenda-effectively integrating them into its core policy frameworks. This commitment is evidenced by the alignment of the country's 10-year perspective development plan (2019/20-2029/30) with the 2030 Agenda. An institutional framework, including a national task force co-chaired by the Ministry of Planning and Development and the UN Resident Coordinator, has been established to guide the implementation. Through this mechanism, Ethiopia has also actively participated in global accountability processes, such as the Voluntary National Reviews (VNRs), where it reports on its progress and challenges to the international community.

The country's dedication to the SDGs has yielded significant, tangible results across several key areas. Ethiopia has achieved a

notable reduction in poverty rates (SDG 1), with the Productive Safety Net Program (PSNP) playing a crucial role in providing support to vulnerable populations. In the health sector, there have been impressive gains, with improved life expectancy and a substantial decline in maternal and child mortality (SDG 3). Furthermore, Ethiopia has made significant investments in infrastructure and energy, with large-scale projects like the Grand Ethiopian Renaissance Dam (GERD) expanding access to electricity, directly contributing to SDG 7 (Affordable and Clean Energy) and SDG 9 (Industry, Innovation, and Infrastructure).

Despite this progress, Ethiopia faces climate shocks such as droughts and floods that are disrupting food systems and livelihoods, while regional instability and new threats like cyber risks add layers of complexity. Despite ambitious national climate policies, the country's access to adequate adaptation finance remains a major obstacle, a situation compounded by a global decline in Official Development Assistance (ODA) and geopolitical tensions.

To address these multifaceted challenges, Ethiopia is implementing a strategic approach focused on strengthening its resilience and capitalizing on opportunities. Key priorities include adaptive governance and the full operationalization of an integrated sustainable financing strategy. The country is promoting SDG localization through regional planning and Voluntary Local Reviews and advancing peacebuilding through the Pretoria Peace Agreement and a new Transitional Justice Policy. Investing in youth employment, digital skills, and green industrialization are also seen as crucial for leveraging SDG implementation. By expanding early warning systems, implementing updated NDCs, and advocating for fairer global financing and debt relief, Ethiopia is committed to safeguarding its development gains and accelerating its path towards the realization of 2030 Agenda.

1.2. Addis Ababa City Profile

Addis Ababa is located at 9°N latitude and 39°E longitude, spans an area of 43,086.22

hectares and sits at an average altitude of 2,355 meters above sea level. As the capital city of Ethiopia, it serves as a political, cultural, and economic hub. Addis Ababa is

home to the headquarters of the African Union (AU) and the United Nations Economic Commission for Africa (UNECA), making it the third-largest global diplomatic city. This status underscores its strategic importance on the regional and global arena.

The city, with 11 sub-cities and 119 woredas, is Ethiopia's primate city, housing 25% of the country's urban population and experiencing a growth rate of 2.1%. Its urban economy is dominated by the service sector (76%), followed by industry (23%) and other sectors (1%).

Addis Ababa contributes approximately 29% of Ethiopia's GDP, which translates to about 59.5 billion dollars in 2024. This figure highlights the city's significant role in the national economy and urban development.

Addis Ababa also boasts a large youth population, driving its dynamic and fast-evolving landscape. High demand for housing, infrastructure, and essential services reflects the pressures of urbanization and the aspirations of its residents.

Currently, Addis Ababa is undergoing a massive transformation aimed at reshaping it into a smart, resilient city that caters to the needs of its people. These efforts are focused on enhancing the city's livability while maintaining its regional and global competitiveness. As the Ethiopian Airlines, the largest and most popular airline in Africa with over 150 destinations worldwide is based in Addis manifesting the role of Addis in serving millions of passengers daily and in connecting Ethiopia to the rest of the world. This dual focus on modernizing the city and retaining its global significance positions Addis Ababa as a leader in urban innovation and a cornerstone of Ethiopia's holistic development.

1.3. Addis Ababa's Commitment Towards Sustainable Development

Addis Ababa, has made a firm commitment to sustainable development, aligning its urban growth with both national strategies and the global Sustainable Development Goals (SDGs). The city recognizes its critical role in achieving the 2030 Agenda, particularly SDG 11, which focuses on sustainable cities and communities. This commitment is evidenced by the city's proactive approach to localizing the SDGs, integrating them into key urban development frameworks, and participating in global urban forums. This strategic alignment is essential for ensuring that the city's rapid transformation is managed in a manner that is both equitable and environmentally sound.

The city's efforts have concentrated on several key areas to address its unique urban challenges. A primary focus is on enhancing urban resilience and manage the pressures of rapid population growth. This includes developing plans to mitigate issues like urban flooding and water scarcity. In terms of sustainable mobility, it embarked on corridor development as a strategic solution to reduce traffic congestion and carbon emissions. Additionally, the city is implementing projects aimed at providing affordable housing and improving waste collection and disposal systems to improve public health and environmental quality.

However, Addis Ababa's path towards sustainable development is not without significant hurdles. The city's rapid, often unplanned spatial growth continues to strain existing infrastructure and services, making it difficult to keep up with the demands of its expanding population. Challenges such as high unemployment rates, inadequate sanitation, and persistent traffic congestion remain significant obstacles to achieving a high quality of life for all residents. These

issues underscore the complex nature of managing a fast-growing urbanization.

Despite these challenges, Addis Ababa is actively collaborating with national and international partners to secure the necessary investments and technical expertise. The city government is focused on strengthening its institutional capacity and improving data collection and analysis at the local level. This will enable better-informed decision-making and more effective monitoring of SDG progress. The ultimate goal is to ensure that the city's future growth is not only rapid but also inclusive, resilient, and truly sustainable, benefiting all residents and serving as a model for other African cities.

1.4. Policy and Enabling Environment

Addis Ababa operates within a national policy context that actively supports the implementation of the Sustainable Development Goals (SDGs). At the national level, the Government of Ethiopia has aligned its development planning frameworks including the Ten-Year Development Plan (TYDP, 2019/20–2029/30) with the agenda 2030 and 2063, ensuring that SDG priorities such as inclusive economic growth, environmental protection, and social inclusion are embedded into core policy and budget processes.

Specific national strategies further enhance the enabling environment for SDG implementation in Addis Ababa by addressing key development and sustainability challenges. For example, Ethiopia's Climate-Resilient Green Economy (CRGE) strategy sets the foundation for sustainable and low-carbon growth by integrating climate adaptation and mitigation into development planning, contributing directly to SDGs such as Goal 13 (Climate Action) and Goal 7 (Affordable and Clean Energy) through sectoral interventions in agriculture, energy,

and forestry. The Nationally Determined Contribution (NDC) Implementation Plan (2024-2030) operationalizes climate commitments and strengthens cross-sectoral coordination for resilience, further enabling Addis Ababa's urban sustainability initiatives.

A national SDG taskforce with both steering and technical committees was established to guide implementation, facilitate inter-agency coordination, and monitor progress across sectors, which enhances coherence among federal, regional, and city administration efforts.

At local and regional levels, the strong integration of national policies obliges the city administrations like Addis Ababa to prepare tailored plans that reflect local development realities while advancing SDG targets. This systemic alignment, combined with multi-stakeholder engagement involving private sector actors, civil society, and development partners, fosters an environment conducive to collaborative SDG action. Moreover, flagship programs such as the Green Legacy Initiative, which mobilizes citizens for large-scale tree planting and landscape restoration, demonstrate how coordinated policy frameworks translate into concrete contributions toward environmental sustainability goals within urban and rural contexts alike.

1.5. Localization of SDG

Addis Ababa has been actively engaged in localizing the Sustainable Development Goals (SDGs), a crucial process for translating global targets into specific, actionable plans at the city level. As the political and economic hub of Ethiopia, the city's success in this endeavor is vital for the country's overall progress towards the 2030 Agenda. Its approach involves a strategic and integrated effort to embed the SDGs into its urban planning and development frameworks, ensuring that the city's rapid growth is both sustainable and inclusive.

2.2. Data Collection Method

The data collection process was designed to gather comprehensive and reliable information to assess the city's progress towards the Sustainable Development Goals (SDGs). The initial step in the data collection process was mapping the data sources for the prioritized indicators. This involved identifying both internal and external partners who possess relevant data on SDG indicators. Then after, the strategic planning documents of Addis Ababa, particularly the city's ten-year transformative plan, were also reviewed as a starting point for data collection. These documents provided a framework for the city's SDG-related priorities, outlining sector-specific strategies that guide implementation.

To ensure a balanced approach, both primary and secondary data sources were employed to assess the implementation status of the prioritized indicators. Primary data on the implementation status of the indicators were gathered through stakeholder consultations. Secondary data was obtained from various federal and city administration offices, including the Ethiopian Statistical Service (ESS), National Bank of Ethiopia, Ministry of Education, Ministry of Health, Ministry of Industry, as well as the Addis Ababa Health Bureau, Education Bureau, Water and Sewerage Authority, Plan and Development Bureau, Labor and Skills Bureau, Industry Bureau, Transport Bureau, Cleansing Agency, Police Commission, Beautification and Green Development Bureau, and the Fire and Disaster Risk Management Commission, among others. These offices have provided with both quantitative and qualitative data.

Finally, desk-based research was employed to collect factual information and hard data, complementing data gathered through other methods.

2.3. Participatory Process

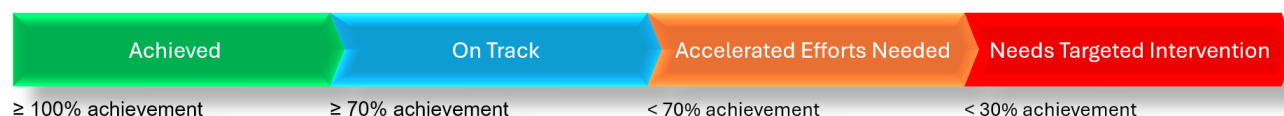
A series of Stakeholders' workshops were convened with participants gathered from civil society and NGOs working in health, education, and urban services to solicit their direct observations on how well the health system had expanded, whether schools were inclusive and accessible, or whether sanitation and water infrastructure served low-income neighborhoods. Academics and research institutes contributed by reviewing data, providing evidence-based evaluations, and identifying gaps in infrastructure, innovation, and economic growth. Youth associations and women's groups were especially invited to share lived experience for instance about quality of education, job opportunities, safety in public spaces, and access to clean water ensuring gender and generational perspectives were incorporated. Professional associations (engineers, urban planners, health professionals) were asked to judge technical adequacy, especially under SDG 9 and 11, in terms of infrastructure resilience, innovation adoption, and sustainable urban planning. Public consultation provided spaces for these diverse voices to express perceptions on the implementation status of the prioritized SDG indicators. This inclusive process (Leaving No One Behind) has validated and ensured that the VLR not only measured indicator progress but also reflected how these achievements were felt on the ground, guiding more responsive future planning.

2.4. Data Analysis Method

The data analysis involved a systematic examination of the data collection to evaluate the city's progress towards the SDGs. The collected data was analyzed using both quantitative (descriptive Statistics) and qualitative methods (Content analysis). Quantitative data were processed to generate measurable indicators that demonstrate progress on the prioritized indicators. Qualitative data from participatory consultations were also analyzed to gather insights on local experiences and perceptions of SDG implementation. This qualitative analysis helped to contextualize the quantitative data and provided a deeper understanding of the challenges and opportunities in achieving the SDGs at the local level.

The methodology for the Voluntary Local Review (VLR) of Addis Ababa's SDG implementation involved a systematic

assessment of progress across prioritized indicators using a four-tier performance classification framework. Each indicator was evaluated and categorized into one of four performance bands. Indicators classified as **"Achieved"** were those that met or exceeded the 2030 targets, reflecting an achievement of 100% or more. Indicators considered as **"On Track"** demonstrated strong and sustainable progress, achieving at least 70% of the target. Those under **"Accelerated Effort Needed"** showed partial progress, requiring additional action to meet the intended targets, with achievement levels below 70%. Finally, indicators falling into the **"Needs Targeted Intervention"** band exhibited minimal progress, with less than 30% achievement, signaling the need for urgent and focused attention. This performance-band approach enabled a clear, evidence-based assessment of the city's SDG implementation, highlighting areas of success as well as those requiring prioritized intervention.



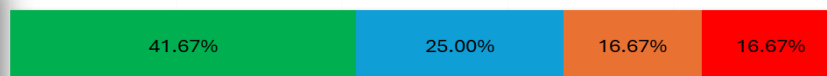
The analysis was also presented through charts and figures to make the findings more accessible and visually impactful. These visual representations make it easier for readers to grasp the trends, progress, and gaps in Addis Ababa's SDG implementation. The final analysis not only showcase the city's achievements but also provided an actionable recommendation for future interventions, ensuring a data-driven approach to SDG planning and implementation in Addis Ababa.

3. Status of SDG Implementation in Addis Ababa

3.1. SDG 3: Good Health and Well Being



■ Achieved ■ On Track ■ Accelerated Efforts Needed ■ Needs Targeted Intervention



3.1.1. Indicator No. 3.1.1: Maternal Mortality Ratio Trend

The Maternal Mortality Ratio (MMR) is a key indicator of maternal health outcomes and the performance of the healthcare system. It measures the number of maternal deaths per 100,000 live births and serves as an important benchmark for assessing progress toward

national and global maternal health targets. In Addis Ababa, the target for 2030 is set at 35 maternal deaths per 100,000 live births. As revealed in Figure 1, the trend observed between the fiscal years 2015/16 and 2023/24 reflects a combination of progress and setbacks, highlighting both achievements and continuing systemic challenges.

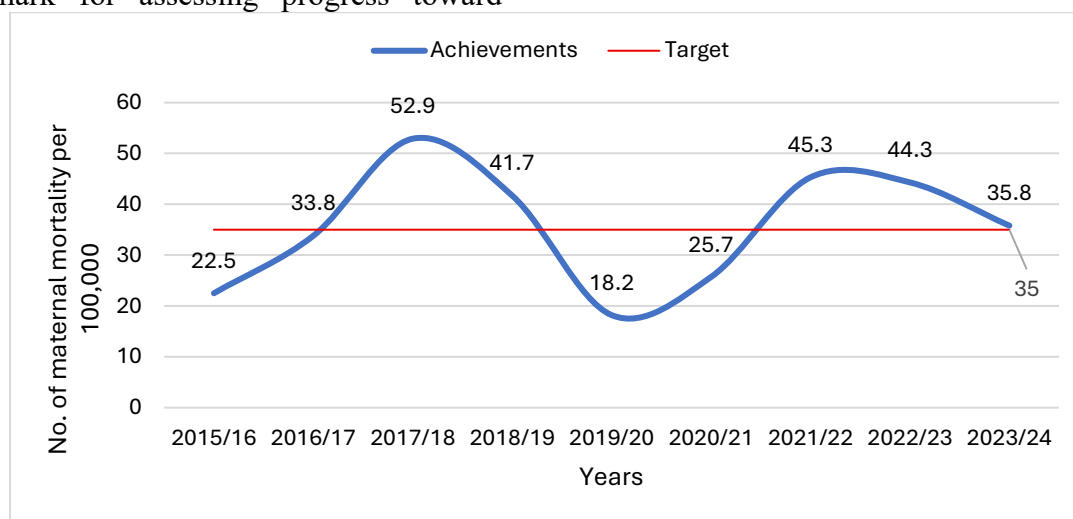


Figure 1: Maternal Mortality Ratio/ 100,000

In 2015/16, Addis Ababa recorded an MMR of 22.5, a figure significantly below the 2030 target. However, this relatively low value may partly reflect gaps in reporting, as not all maternal deaths may have been properly documented or registered during that period. In the following years, the ratio increased considerably, reaching 33.8 in 2016/17 and

peaking at 52.9 in 2017/18. These increases suggest challenges in maternal healthcare service delivery, including limitations in access to skilled birth attendants, delays in emergency obstetric care, and weaknesses in referral systems. Although the ratio declined to 41.7 in 2018/19, it remained above the target level.



Abebech Gobena MCH hospital



In 2019/20 and 2020/21, the MMR was reported at 18.2 and 25.7 respectively, remaining below the city's target. However, during 2019/20 and 2020/21 the COVID-19 pandemic significantly affected healthcare-seeking behavior. Many individuals preferred to remain at home rather than visit health facilities due to concerns about infection. As a result, some maternal deaths may have occurred outside health institutions and may not have been fully captured in official health facility records.



The newly constructed Akaki Health Center in Akaki Kaliti Sub-city

The MMR increased again to 45.3 in 2021/22 and slightly declined to 44.3 in 2022/23. These increases may partly reflect disruptions caused by the pandemic, which placed considerable pressure on the health system and affected access to routine maternal health services. By 2023/24, the ratio significantly declined to 35.8, indicating renewed progress and approaching the city's target. This improvement reflects the cumulative impact of expanded maternal health interventions. The strengthening of the Health Extension Program (HEP) contributed to increased antenatal care follow-up, improved referral of high-risk pregnancies, and greater awareness of institutional delivery. Expanded family planning services also helped reduce unintended and high-risk pregnancies. In addition, improvements in health infrastructure including the construction of

new health centers, hospital renovations, and the expansion of cesarean section services enhanced access to life-saving obstetric care.



Graduates of parental coaching under Addis Ababa's Early Childhood Development Program

3.1.2. Indicator No. 3.1.2: Proportion of births attended by skilled health personnels

The proportion of births attended by skilled health personnel is directly linked to improved maternal and neonatal outcomes by ensuring safe delivery practices and enabling timely management of complications. In line with Sustainable Development Goal (SDG) 3.1.2, as revealed in Figure 2, Addis Ababa has set an ambitious local target of achieving 100% skilled birth attendance by 2030.

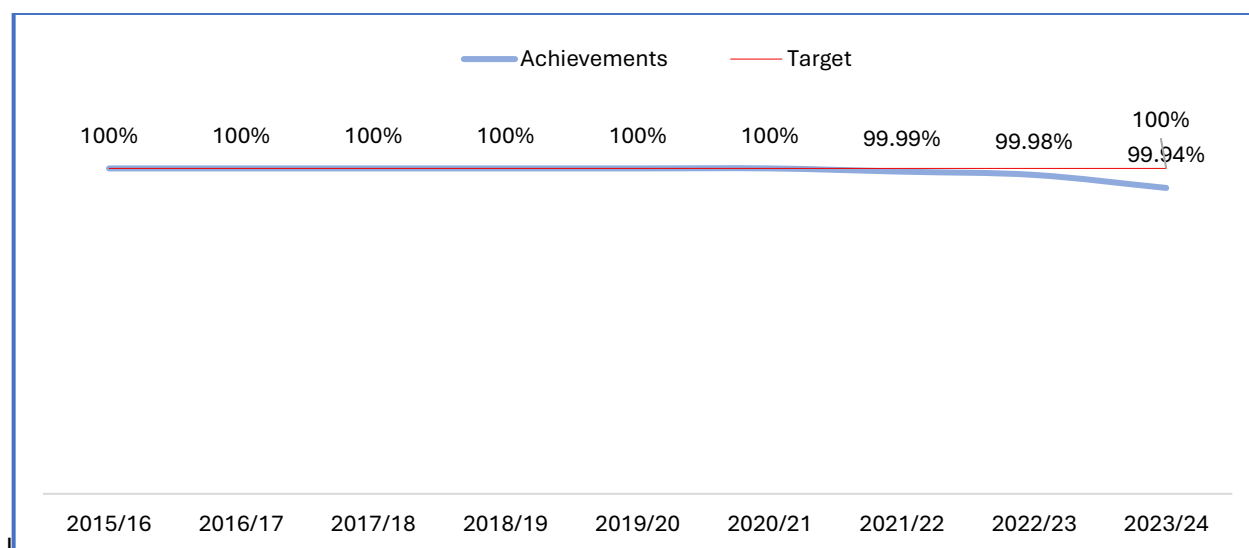


Figure 2: Proportion of births attended by skilled health personnels

This five-year period of full coverage highlights the city's strong health service delivery, high levels of facility-based delivery, and sufficient human resources in maternal care. These achievements reflect the success of the Health Extension Program (HEP), where Health Extension Workers (HEWs) promoted antenatal care, encouraged institutional deliveries, and identified high-risk pregnancies for referral.



Healthcare support for mothers

The availability and accessibility of healthcare facilities were also instrumental in sustaining this achievement. Over the last decade, 28 new health centers were constructed, four hospitals underwent major renovations, and a General Maternal & Child Health Hospital (AGH) was established, now handling more than 1,000 deliveries monthly. Additionally, 20 new health centers began offering cesarean section

(C/S) services, reducing delays in accessing emergency obstetric interventions. Importantly, skilled birth delivery has been provided free of charge for the past ten years, removing financial barriers and encouraging women to seek institutional care.

Despite these structural improvements, a very slight decline in coverage was observed starting in 2020/21, with skilled birth attendance marginally declined to 99.99%, followed by 99.98% in 2021/22, and further to 99.94% in 2023/24. Although these figures remain impressively high and still among the best in the region, the consistent marginal decline in recent years should not be overlooked.

At the same time, the overall quality of maternal health care has been improving. The proportion of women completing the full continuum of care including antenatal care (ANC), skilled delivery, and postnatal care has increased by an average of 10% annually. This comprehensive coverage helps reinforce the near-universal rate of institutional delivery and reduces risks associated with fragmented care.

3.1.3. Indicator No. 3.2.1: Under Five Mortality Rate Per 1000 Live Birth

The under-five mortality rate (U5MR) per 1,000 live births reflect both the quality of healthcare services and the broader socio-economic environment affecting child well-being. In Addis Ababa, the local target for U5MR has been set at 25 per 1,000 live births. As revealed in Figure 3, the data covering the period from 2015/16 to 2023/24 shows that the city has consistently achieved rates far below the local benchmark, demonstrating substantial progress in reducing child mortality.

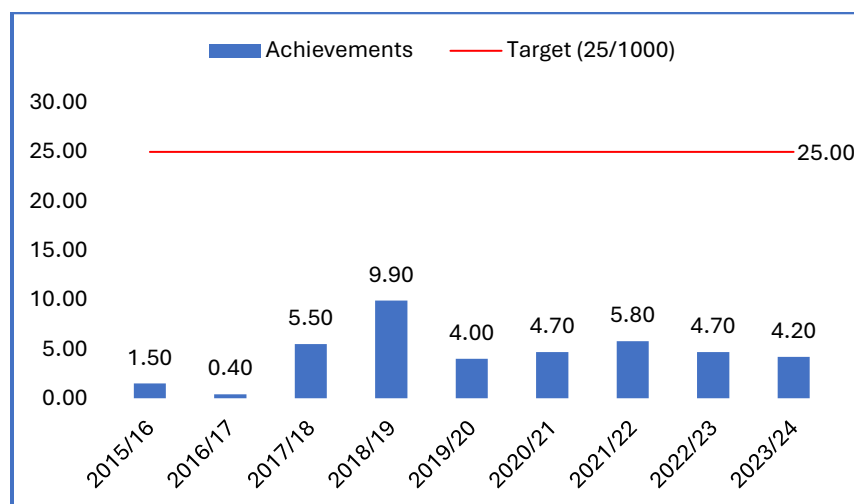


Figure 3: Under Five Mortality Rate (Per 1000)

In 2015/16, the U5MR was recorded at 1.5 per 1,000 live births, significantly lower than the target of 25. This early figure suggests a relatively strong baseline performance. In the subsequent year (2016/17), the rate dropped even further to 0.4, indicating outstanding child health outcomes during this period. However, by 2017/18, the U5MR rose to 5.5, and continued increasing to 9.9 in 2018/19 the highest rate recorded within the nine-year span. This temporary surge points to challenges in maintaining consistently low mortality rates, possibly linked to COVID 19 outbreak and other socio-economic stressors.

Following this peak, there was a notable improvement in 2019/20 when the U5MR declined to 4.0 per 1,000. This positive trend was maintained in 2020/21, with a modest rise

to 4.7, and 2021/22, when the figure increased slightly further to 5.8. The fluctuation during these years may be associated with the indirect effects of the COVID-19 pandemic, which strained the health system, limited access to essential health services, and disrupted immunization and nutrition programs. Nevertheless, even during this period, Addis Ababa's U5MR remained well below the target.

By 2022/23, the U5MR returned to 4.7 per 1,000, and in 2023/24, it further decreased to 4.2, showing renewed progress toward stabilizing survival outcomes. The consistent performance across the latter years demonstrates the resilience of the city's health system and its ability to mitigate the adverse impacts of systemic shocks.



Integrated vaccination campaign launch programs

The analysis suggests that Addis Ababa is not only on track but has already surpassed its child survival goals for under-five mortality. Going forward, the focus should be on sustaining these gains by addressing the factors behind the occasional spikes, particularly ensuring uninterrupted access to child health services during public health emergencies and strengthening surveillance and response systems. Such efforts will be critical to maintaining Addis Ababa's position as a leader in child survival within Ethiopia and aligning with global Sustainable Development Goal (SDG) 3.2, which calls for ending preventable deaths of newborns and children under five.

3.1.4. Indicator No. 3.2.2: Neonatal Mortality Rate Per 1000 Live Birth

Neonatal mortality, defined as the death of a newborn within the first 28 days of life, is one of the most sensitive indicators of the quality of maternal and newborn care. It reflects both the effectiveness of healthcare systems and the broader environment in which women and newborns receive services. In alignment with the Sustainable Development Goals (SDG 3.2.2), Addis Ababa has set a local target of reducing neonatal mortality to 12.5 deaths per 1,000 live births by 2030. Figure 4 illustrates the city's performance on this indicator between 2015/16 and 2023/24.

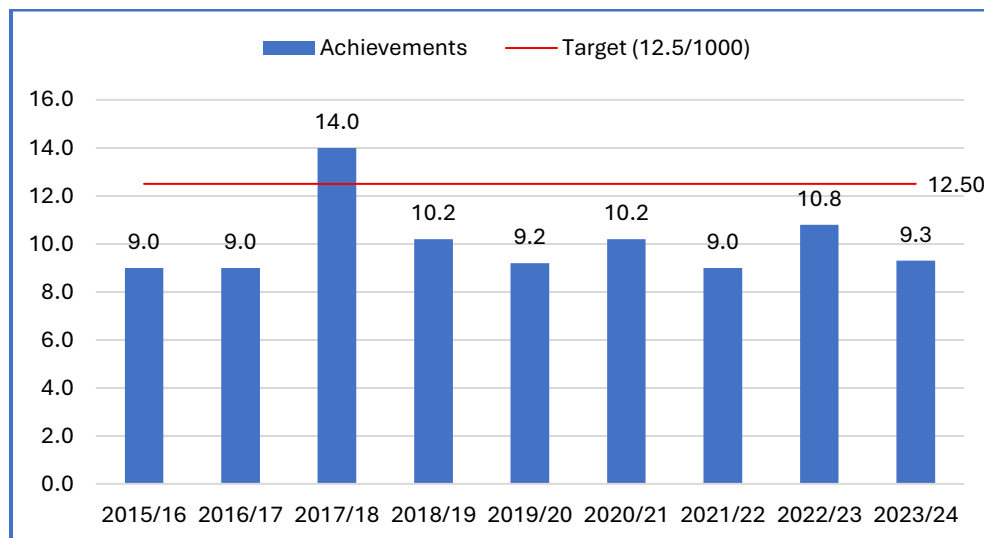


Figure 4: Neonatal mortality rate per 1000 LB

During the initial years, Addis Ababa demonstrated strong results, maintaining a neonatal mortality rate (NMR) of 9.0 per 1,000 live births in both 2015/16 and 2016/17. These figures placed the city well below the 2030 target, reflecting positive outcomes in newborn survival and effective early integration of maternal and newborn care. However, in 2017/18, an increase occurred, with the NMR rising to 14.0 the highest rate in the nine-year period temporarily pushing the indicator above the SDG target. This spike likely reflected systemic challenges such as increased service demand, shortages in specialized neonatal care, or lapses in referral and emergency response capacity.

After this setback, the trend improved considerably. The NMR declined to 10.2 in 2018/19 and 9.2 in 2019/20, demonstrating recovery in newborn health outcomes. These results coincided with improvements in the continuum of maternal care, as the proportion of women completing antenatal, skilled delivery, and postnatal care increased by around 10% annually, boosting institutional deliveries and strengthening neonatal follow-up. However, minor fluctuations were observed in subsequent years: the rate rose again to 10.2 in 2020/21 and to 10.8 in 2022/23, before declining to 9.3 in 2023/24. These changes, though still below the 12.5 target, highlight areas of vulnerability in sustaining consistent neonatal outcomes, particularly during and after the COVID-19 pandemic, which disrupted service delivery and strained health system capacity.

The city's achievements are closely tied to expanded service availability and quality initiatives. Over the past decade, 28 new health centers were constructed, four hospitals underwent major renovations, and Addis Ababa General Maternal & Child Health Hospital (AGH) was established, now managing more than 1,000 deliveries per month. In addition, 20 new health centers began offering cesarean section services, reducing delays in accessing emergency

obstetric and newborn interventions. Neonatal services, including skilled birth attendance and critical newborn care, have also been provided free of charge, eliminating financial barriers for families.

Quality improvement measures at neonatal intensive care units (NICUs) have further strengthened care delivery. These include multifaceted capacity-building programs in neonatal resuscitation, provision of medical equipment and supplies, and targeted quality improvement projects across hospitals and health centers. Such efforts have directly contributed to reductions in preventable neonatal deaths and improved management of high-risk newborns.

Beyond facility-based care, the Early Childhood Development (ECD) program, launched by the Addis Ababa City Administration, has provided holistic support to children under six years of age. With around 230,000 children reached annually, the program integrates community- and facility-level interventions, including regular health screenings, developmental assessments, parental counseling, and psychological and clinical care. By addressing early health and development needs, the ECD program has created a broader safety net that complements neonatal survival efforts.

Addis Ababa has consistently kept its neonatal mortality rate below the 2030 target of 12.5 per 1,000 live births, with the exception of the 2017/18 spike. This sustained progress reflects the city's investments in expanding health infrastructure, scaling up maternal and newborn services, removing financial barriers, and implementing quality improvement measures in neonatal care. Nonetheless, the observed fluctuations underscore the importance of strengthening resilience in service delivery and ensuring that neonatal health outcomes are maintained even during systemic shocks. Moving forward, Addis Ababa should prioritize sustaining improvements in the continuum of care,

expanding NICU capacity, and reinforcing early childhood programs. These measures will be essential not only for meeting the SDG target by 2030 but also for ensuring that every newborn has the best possible chance of survival and healthy development.

3.1.5. Indicator No. 3.3.1: Number of new HIV infections per 1,000 uninfected population

The number of new HIV infections per 1,000 uninfected population is a critical health indicator that reflects the overall effectiveness of prevention, control, and awareness strategies. Addis Ababa has set an ambitious

local target of reducing new HIV infections to 0 per 1,000 uninfected individuals by 2030, underscoring the city's strong commitment to combating the epidemic.

As revealed in Figure 5, between 2015/16 and 2023/24, the trend in new HIV infections in Addis Ababa revealed both challenges and progress. In 2015/16, the city reported 2.42 new infections per 1,000 uninfected individuals. However, the figure rose in the subsequent years, reaching 3.39 in 2016/17 and peaking at 3.98 in 2017/18. This early upward trend reflects persistent gaps in prevention measures.

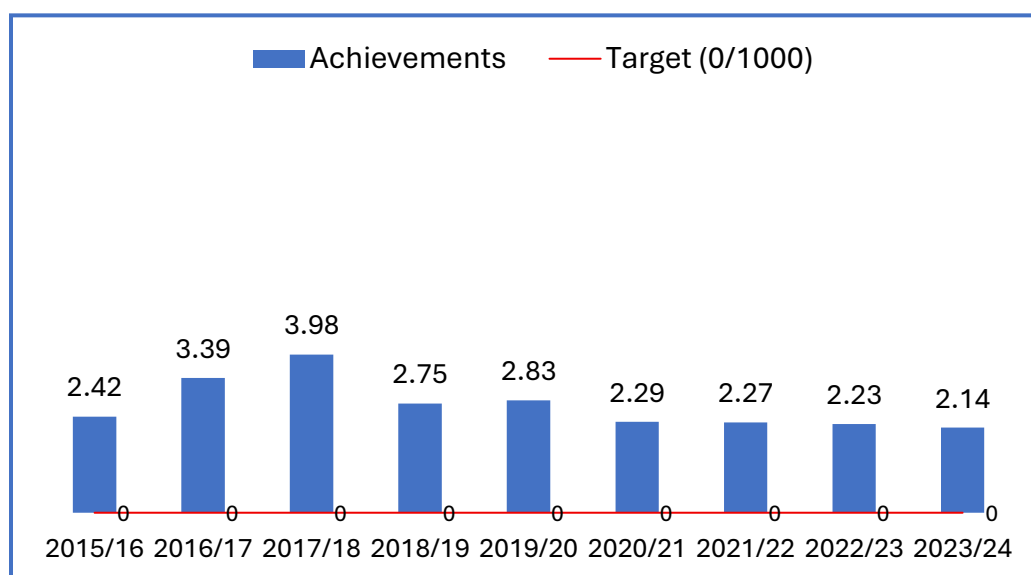


Figure 5: Number of new HIV infections per 1,000 uninfected population

Starting in 2018/19, a consistent decline was observed, with new infections falling to 2.75 and then stabilizing around similar levels through 2019/20 (2.83) and 2020/21 (2.29). This shift points to the increasing effectiveness of the city's HIV response. One of the major contributing factors has been the long-standing community-based HIV prevention program, which has been operational for the past decade. Through health education, awareness campaigns, and targeted outreach, the program has consistently reached more than 300,000 high-risk and vulnerable individuals annually, with coverage expanding by 5–8% each year.

In parallel, focused target testing strategies were scaled up, resulting in an estimated annual increase of 8% in testing capacity. This maximized new case detection and ensured that most individuals diagnosed with HIV were promptly linked to treatment. Indeed, 90–95% of new cases were initiated on antiretroviral therapy (ART) immediately, significantly reducing the risk of onward transmission. Moreover, adherence support through specialized counselors played a critical role in maintaining treatment effectiveness and improving quality of care. These interventions collectively contributed to the noticeable downward trend in incidence

after 2017/18. Between 2021/22 and 2023/24, the city continued to experience modest but steady declines, with the rate of new infections reaching 2.14 per 1,000 in the most recent year.

3.1.6. Indicator No. 3.3.2: Tuberculosis incidence per 100,000 population

Addis Ababa has committed to this target with a localized goal of reducing TB incidence to 48.4 cases per 100,000 population by 2030. The trend over the nine-year period from 2015/16 to 2023/24 shows that TB incidence in the city remains considerably higher than the target, despite some improvements in recent years (Figure 6).

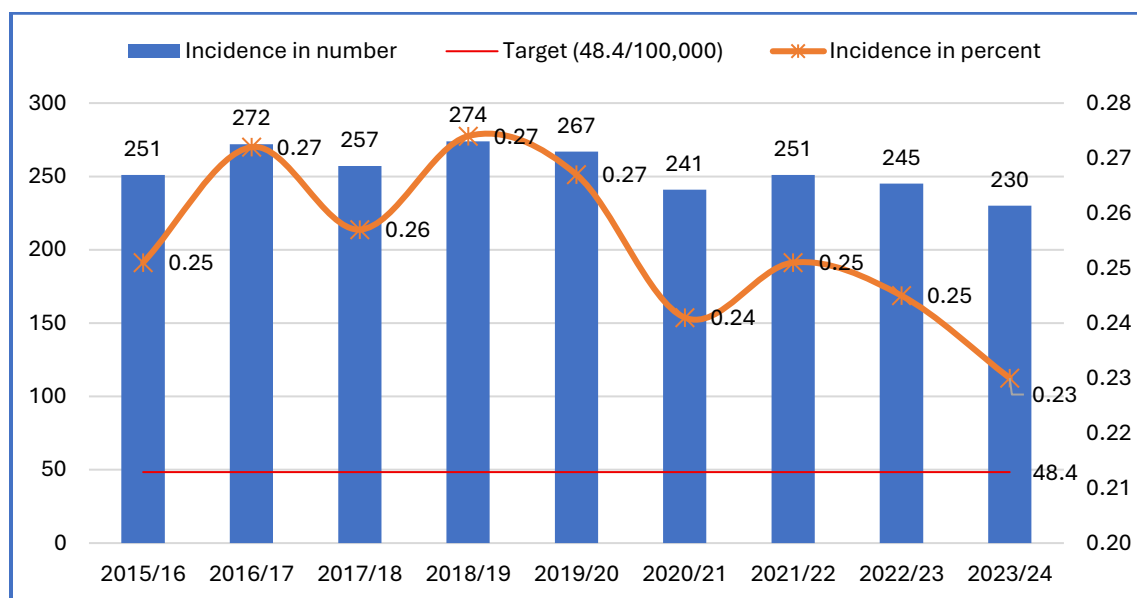


Figure 6: Tuberculosis incidence per 100,000 population

In 2015/16, the TB incidence in Addis Ababa was 251 per 100,000 population (0.25%), which slightly increased to 272 (0.27%) in 2016/17. Over the next few years, incidence levels fluctuated but remained consistently above the target. Specifically, incidence stood at 257 in 2017/18, rose again to 274 in 2018/19, and slightly decreased to 267 in 2019/20. These consistently high figures suggest ongoing transmission and reflect challenges in early detection, treatment coverage, and latent TB case management.

A modest decline was observed beginning in 2020/21, when the incidence dropped to 241 per 100,000 (0.24%), marking the start of a gradual improvement trend. However, the

figure slightly increased again to 251 in 2021/22, before dropping once more to 245 in 2022/23 and then to 230 (0.23%) in 2023/24, the lowest value recorded during the period. This downward trend in the past few years attributed to improved TB control efforts, including expanded diagnostic services, better case detection, increased treatment adherence through community support programs, and integration of TB and HIV services.

Despite the gradual decline, the 2023/24 incidence rate of 230 per 100,000 remains nearly five times higher than the 2030 target of 48.4. This indicates that while progress is being made, it is not yet sufficient to meet the SDG target within the remaining years.

Contributing factors to the persistent high incidence may include delayed diagnosis, urban crowding, poverty-related risk factors, and the impact of health system disruptions particularly during the COVID-19 pandemic.

3.1.7. Indicator No. 3.3.3: Malaria incidence per 1,000 population

As part of its commitment to Sustainable Development Goal (SDG) 3.3, Addis Ababa aims to achieve zero malaria incidence (0 per 1,000 population) by 2030. As revealed in Figure 7, the trend data from 2015/16 to 2023/24 shows a mixed pattern, with notable early progress followed by recent setbacks.

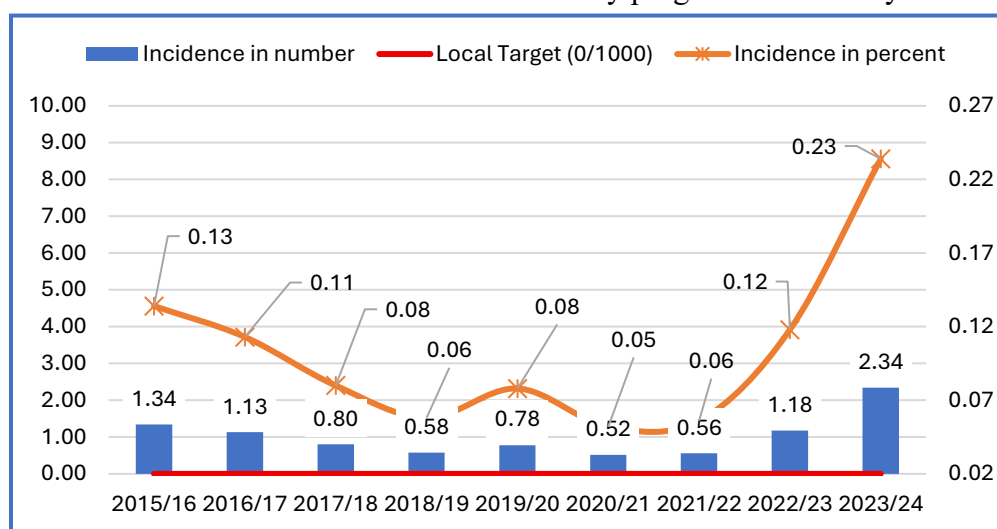


Figure 7: Malaria incidence per 1,000 population

In 2015/16, the malaria incidence in Addis Ababa was 1.34 cases per 1,000 population (0.13%). This figure gradually declined over the next several years, reaching 0.80 in 2017/18, 0.58 in 2018/19, and eventually dropping to its lowest point of 0.52 per 1,000 in 2020/21. This sustained decrease during the earlier years reflects the city's effective health education and improved access to diagnostic testing.

However, despite these successes, the trend began to reverse after 2020/21. A slight uptick occurred in 2021/22 with an incidence of 0.56, followed by an increase to 1.18 in 2022/23, and then rise to 2.34 per 1,000 population (0.23%) in 2023/24. Considering Addis Ababa's urban context, where the city is generally considered a low-risk or non-

endemic area for sustained malaria transmission because of its high altitude (~2,300 m) and cooler climate this resurgence may be associated with population mobility between the city and malaria-endemic areas, which can introduce infections into the urban setting.

3.1.8. Indicator No. 3.3.4: Hepatitis B incidence per 100,000 population

As illustrated in Figure 8, the incidence trend in Addis Ababa between 2015/16 and 2023/24 demonstrates notable progress, although with fluctuations. In 2017/18 the Hepatitis B incidence per 100,000 population was 2164 (2016%) And declined to 1,718 in 2018/19, 1,588 in 2019/20, and 1,144 in 2020/21.

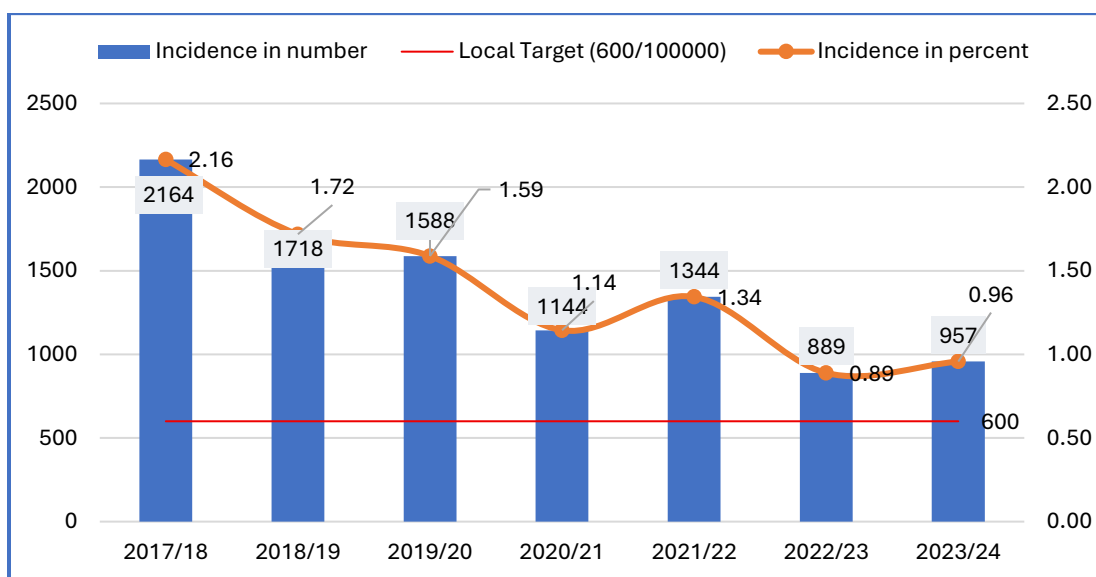


Figure 8: Hepatitis B incidence per 100,000 population

These improvements indicate that ongoing public health interventions began yielding tangible outcomes. Specifically, the scale-up of hepatitis B vaccination programs, including the use of hepatitis immunoglobulin (IG) and vaccines to prevent mother-to-child transmission, adherence monitoring through dedicated counselors, and improved infection prevention practices in healthcare settings contributed to these declines. Continuous capacity-building for laboratories and diagnostic modalities over the past decade also strengthened case identification and accurate reporting, which improved the quality of surveillance data.

In 2021/22, incidence rose slightly to 1,344 per 100,000, which may reflect enhanced surveillance or natural fluctuations in community transmission. However, the positive trajectory resumed in subsequent years, with incidence dropping to 889 in 2022/23 before a modest increase to 957 in 2023/24. Although these numbers remain above the local target of 600, they mark a dramatic improvement compared to the 2016/17 peak, with incidence reduced to less than 1% in recent years.



Opening of Habari Medical Plaza in Addis Ababa

The progress achieved can be attributed to a combination of targeted and sustained interventions. Focused testing during pregnancy has expanded annually by around 10%, significantly improving new case detection. Pregnant women testing positive were linked to treatment and their newborns were provided timely hepatitis IG and vaccines to prevent vertical transmission. Adherence to treatment has also been closely monitored, with dedicated adherence counselors in place for over a decade.

Community-based hepatitis prevention programs have been a cornerstone of the city's response. Over the past ten years, community health workers have engaged in sustained health education, raising awareness and targeting high-risk and vulnerable populations. These efforts achieved an annual coverage increase of 5–8%, steadily expanding the reach of prevention campaigns. Complementing these initiatives, a series of quality improvement (QI) projects were implemented in healthcare facilities, reinforcing infection prevention standards and improving service delivery.

Despite this commendable progress, Addis Ababa has not yet met the SDG target. The latest incidence of 957 per 100,000 remains about 1.6 times higher than the benchmark of 600. This underscores the importance of consolidating and expanding ongoing interventions. Strengthening universal birth-dose vaccination, scaling up focused antenatal testing and treatment programs, intensifying awareness campaigns, and ensuring rigorous infection prevention practices in both clinical and traditional care settings will be vital. Furthermore, expanding testing and treatment access for high-risk groups will help close the remaining gap.

3.1.9. Indicator No. 3.4.2: Suicide Mortality Rate Per 100,000 population

Suicide mortality is a key public health indicator that reflects the mental health status of a population, as well as the effectiveness of psychosocial support systems and crisis intervention services. Under Sustainable Development Goal (SDG) 3.4.2, the city of Addis Ababa aims to reduce the suicide mortality rate to 11 per 100,000 population by 2030. As indicated in Figure 9, the trend in suicide mortality in the city from 2015/16 to 2023/24 shows notable progress, especially in recent years, with encouraging signs of improvement following an initial period of concern.

In 2015/16, Addis Ababa recorded a suicide mortality rate of 14.5 per 100,000, which was above the local target. This was followed by a gradual year-on-year decline, reaching 13.3 in 2016/17, and 12.2 in 2017/18. Although still above the target, these early improvements likely reflect increasing public awareness about mental health, better data captured through early mental health intervention efforts.

A significant milestone was reached in 2018/19, when the suicide mortality rate fell to 9.0 per 100,000, bringing it below the SDG target of 11 for the first time in the reporting period. However, this improvement was not immediately sustained, as the rate slightly increased to 10.8 in 2019/20, remaining just under the target. In 2020/21, the city once again recorded a decline to 9.8, which was followed by a dramatic reduction in 2021/22, when the suicide rate dropped to 5.0 per 100,000, the lowest value recorded until that point.

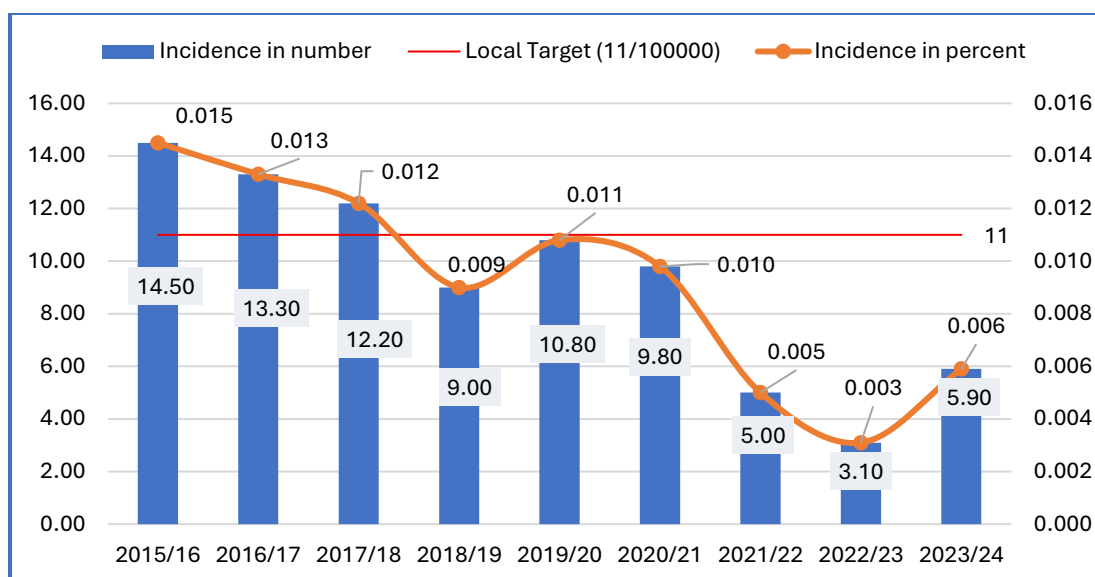


Figure 9: Suicide mortality rate per 100,000 population

The downward trend continued into 2022/23, with the rate declining further to 3.1 per 100,000. However, in 2023/24, the city experienced a slight increase to 5.9 per 100,000, though this still remained well below the target of 11. These recent figures point to a sustained period of significant improvement in suicide prevention and mental health response systems in Addis Ababa. Contributing factors may include improved mental health policy implementation, expansion of community-based psychological support services, religious institutions services, enhanced mental health literacy, and greater efforts to destigmatize mental illness and help-seeking behaviors.

Despite the positive trend, the slight increase in 2023/24 warrants continued vigilance. It highlights the importance of sustaining and expanding preventive measures, especially in the context of broader societal challenges such as economic stress, urban isolation, and youth unemployment on mental well-being.

3.1.10. Indicator No. 3.5.1: No. of treatment intervention for substance use disorder

The number of treatment interventions for substance use disorder (SUD) serves as a vital indicator of the availability, accessibility, and utilization of rehabilitation and psychosocial support services. As revealed in Figure 10, from 2015/16 to 2017/18, Addis Ababa experienced a gradual increase in treatment interventions, rising from 1,210 to 1,624. This steady growth reflected the modest expansion of treatment infrastructure, as well as increasing recognition of substance use as a pressing public health issue. The gains during this period were supported by ongoing efforts to provide mental health services in public hospitals and the gradual rollout of basic mental health services in primary health care units. These interventions, although limited in scale, began laying the groundwork for a broader treatment response in the years ahead.

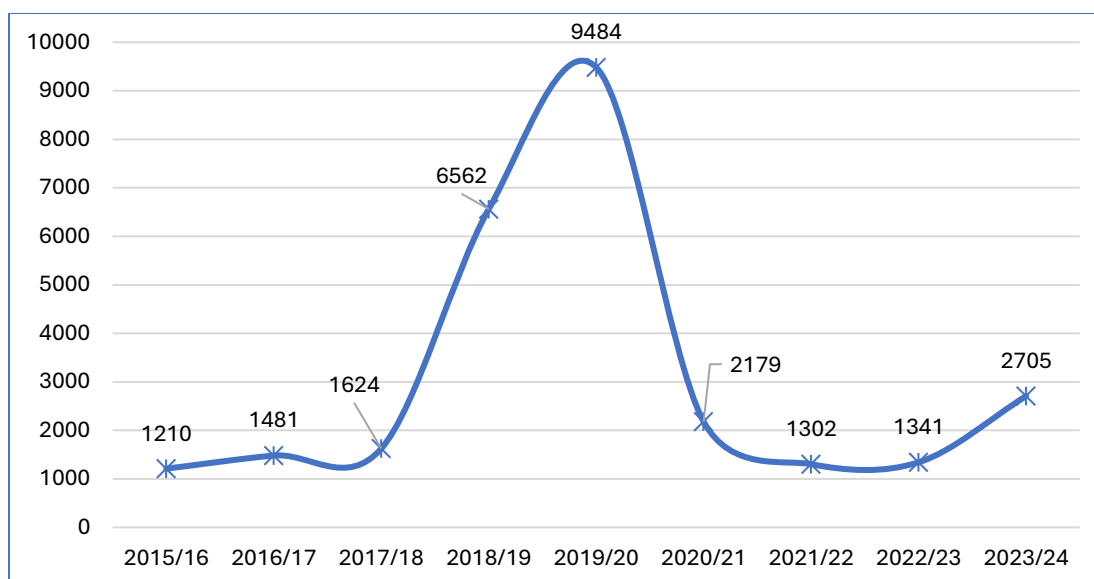


Figure 10: No. of treatment intervention for substance use disorder

A remarkable turning point occurred in 2018/19, when the number of treatment interventions surged to 6,562 more than four times the previous year's figure and continued upward to reach a peak of 9,484 in 2019/20. This rapid growth reflected a combination of expanded institutional capacity and enhanced cases of substance use disorder due to COVID 19 pandemic. Key milestones during this period included the scaling up of specialized Addiction Treatment Centers at St. Paul and Zewditu hospitals, along with intensified awareness campaigns that encouraged individuals to seek care. The expansion of mental health services in public hospitals also played a role, ensuring that more patients could access integrated care. Collectively, these efforts demonstrated a strong institutional response to the substance use challenges in the city. However, beginning in 2020/21, treatment interventions dropped steeply to 2,179 and further declined to 1,302 in 2021/22, before stabilizing at 1,341 in 2022/23.

3.1.11. Indicator No. 3.6.1: Death Rate Due to Road Traffic Injuries Per 100,000 Population

The trend of the death rate due to road traffic injuries per 100,000 population in Addis Ababa over the reviewed period shows a pattern of fluctuation with an overall gradual improvement in recent years, although performance has remained largely above the local 2030 target of 17.3.

As revealed in Figure 11, between 2015/16 and 2017/18, the death rate remained relatively stable but high, increasing slightly from 25.0 to 25.6 per 100,000 population. A sharp rise was observed in 2018/19, where the rate peaked at 32.0. This was followed by a moderate decline to 29.4 in 2019/20, suggesting the beginning of corrective measures. A more noticeable reduction occurred in 2020/21, where the rate dropped to 24.6. However, this improvement was not sustained in the subsequent year, as the rate increased again to 26.5 in 2021/22.

Encouragingly, most recent years show substantial progress. The death rate declined significantly to 17.2 in 2022/23, falling slightly below the 2030 target, and remained close to the target at 18.6 in 2023/24.

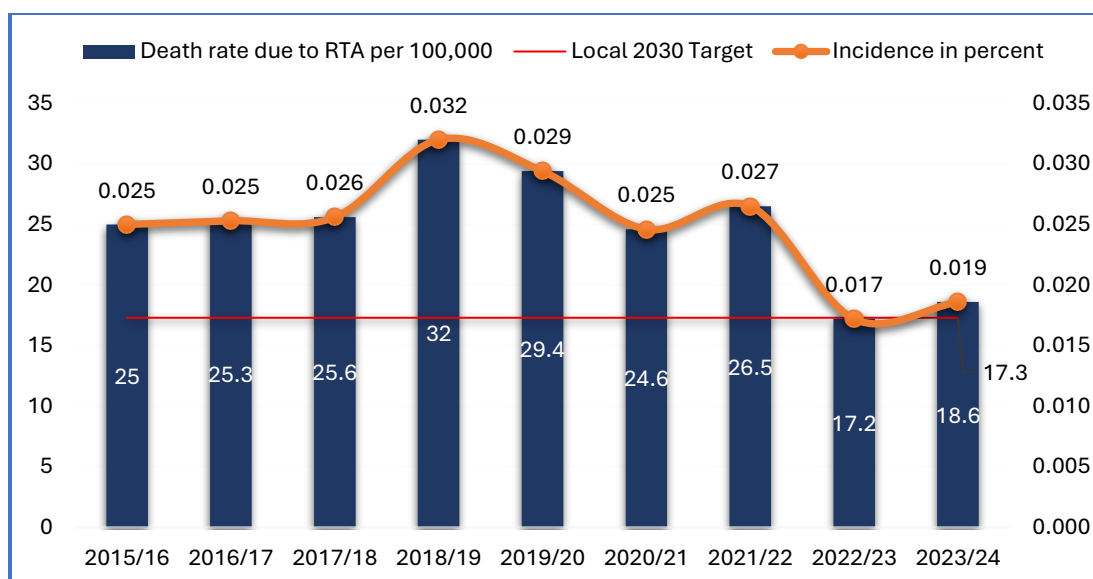


Figure 11: Death rate due to road traffic injuries per 100,000 population

For the recent years improvements, contributing factors likely include improved enforcement of traffic laws, better road safety infrastructure, more accessible emergency services, and greater political commitment to road. Several interventions over the past decade have also played an important role in reducing fatalities. Public awareness creation programs have been widely rolled out using media and community platforms, helping to promote safer road use. Health facilities both public and private have been mandated to provide emergency lifesaving services without delay or prerequisites, ensuring faster responses to critical cases. The introduction of the Third-Party Insurance system has further guaranteed that all road traffic accident victims receive up to 2,000 ETB worth of emergency care at any facility, including private hospitals, without out-of-pocket costs. Additionally, the implementation of System Bottlenecks Focused Reform (SBFR) across hospitals and health centers has improved productivity, responsiveness, and efficiency in emergency care delivery, strengthening the overall trauma response system.

In minimizing the challenge, the ongoing infrastructure upgrades under Addis Ababa's Corridor Development Initiative including

safer pedestrian walkways, crosswalks, real-time traffic surveillance, and behavioral change programs are expected to yield significant progress in the coming years and support the achievement of the 2030 target. Equally vital is the sustained expansion of post-crash emergency care to guarantee that all victims receive timely access to lifesaving services. To sustain and accelerate progress, Addis Ababa must strengthen multi-sectoral collaboration between health, transport, police, and urban planning institutions, alongside civil society engagement.

3.1.12. Indicator No. 3.7.2: Adolescent birth rate per 1,000 women

The adolescent birth rate is one of the most sensitive reproductive health and child protection indicators. It reflects the effectiveness of early sexual and reproductive health (SRH) education, access to youth-friendly health services, the strength of child protection systems, and the overall commitment of society to safeguarding minors. As part of SDG 3.7.2, Addis Ababa has set a local target to reduce the adolescent birth (within the age range of 10 – 19 years) rate to 10 per 1,000 by 2030.

An analysis of the data from 2015/16 to 2023/24 shows both setbacks and recent improvements, highlighting the city's progress and remaining gaps.

As indicated in Figure 12, In 2015/16, the adolescent birth rate was 15 per 1,000, 50% above the set target. A modest decline followed, with the rate falling to 13 per 1,000 in 2016/17 and further to 10 per 1,000 in 2017/18, temporarily meeting the 2030 benchmark. These improvements can be linked to expanded access to reproductive health services, free contraceptive provision in health facilities, and stronger family planning programs. They also reflect the early positive effects of school-based awareness campaigns and youth-focused interventions.

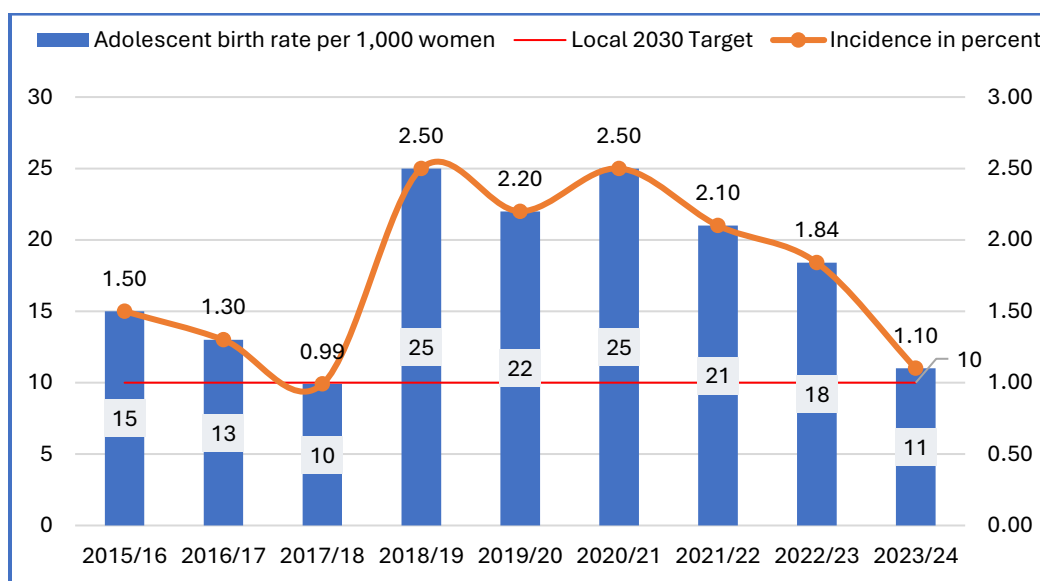


Figure 12: Adolescent birth rate per 1,000 women in that age group (10 – 19 Age group)

However, from 2018/19 to 2020/21, the trend reversed, with the adolescent birth rate rising sharply to 25 per 1,000 in 2018/19 and again reaching 25 in 2020/21, more than double the target. This spike highlights systemic gaps, including inadequate access to adolescent-friendly SRH services, gender-based violence, peer pressure, and persistent vulnerabilities linked to poverty and exploitation. At the same time, the increase may also partly reflect better data capture as health information systems such as DHIS2 and HMIS became stronger and reporting mechanisms improved. From 2021/22 onwards, a steady improvement is observed. The rate declined to 21 per 1,000 in 2021/22, 18 in 2022/23, and 11 in 2023/24, showing a clear downward trajectory toward the 2030 goal.

This progress can be attributed to stronger implementation of HSTP II and HSDIP strategies, which emphasized school-based SRH education, youth center outreach, and the integration of adolescent-friendly services in urban health facilities. Free-of-charge provision of contraceptives, along with continuous awareness campaigns, further reduced high-risk and unintended pregnancies. The Maternal Death Surveillance and Response (MDSR) system also played an important preventive role by auditing each maternal death, identifying early-age pregnancies as a risk factor, and using these lessons to improve interventions.

3.1.13. Policy Implication and Practices for SDG-3 Indicators

Indicator 3.1.1: Maternal Mortality Ratio (MMR): The fluctuation of MMR in Addis Ababa highlights the importance of building a resilient maternal healthcare system that can withstand shocks such as pandemics. Policies should prioritize sustained investment in emergency obstetric care, workforce training, and strengthening the Maternal Death Surveillance and Response (MDSR) system. Practices must ensure continuous availability of skilled personnel, free delivery services, and timely referrals, while also scaling up family planning programs to reduce high-risk pregnancies.

Indicator 3.1.2: Proportion of Births Attended by Skilled Health Personnel: Despite near-universal coverage, the slight decline in skilled birth attendance since 2020 signals the need for policies that strengthen service resilience during crises. Policymakers should focus on continuous health workforce development, retention incentives, and expanding access to cesarean and emergency obstetric care. Practices must sustain free delivery services, reinforce antenatal-to-postnatal care continuity, and improve community-based interventions to close the remaining gaps.

Indicator 3.2.1: Under-Five Mortality Rate (U5MR): Addis Ababa has consistently outperformed national targets, but occasional spikes point to systemic vulnerabilities during health disruptions. Policies should aim to institutionalize uninterrupted child health services, immunization coverage, and nutrition programs even during emergencies. Practices must enhance child health surveillance, improve rapid response to outbreaks, and integrate maternal and child health programs for sustained survival gains.

Indicator 3.2.2: Neonatal Mortality Rate (NMR): While Addis Ababa remains below the 2030 target, periodic increases in NMR emphasize the need for stronger neonatal

intensive care systems and continuity of maternal care. Policies should expand NICU capacity, ensure adequate neonatal-trained staff, and integrate early childhood development into health planning. Practices must focus on quality improvement in neonatal care, strengthen infection prevention, and scale up community support programs for newborn survival.

Indicator 3.3.1: New HIV Infections: Although progress has been made, Addis Ababa has not yet achieved its target of eliminating new HIV infections. Policy implications include scaling up targeted prevention programs, increasing ART adherence support, and tackling stigma and discrimination. On the practice side, expanding testing, strengthening community-based outreach, and tailoring interventions to high-risk groups are essential to accelerate declines and move toward elimination by 2030.

Indicator 3.3.2: Tuberculosis Incidence: TB incidence remains significantly above the target, underscoring gaps in detection, treatment, and prevention. Policy responses should emphasize active case finding, integration of TB/HIV services, and addressing social determinants such as poverty and urban crowding. Practices must strengthen community-level treatment adherence, expand diagnostic capacity, and ensure uninterrupted access to medication to accelerate progress toward the 2030 target.

Indicator 3.3.4: Hepatitis B Incidence: Despite remarkable reductions, Addis Ababa's hepatitis B incidence remains above the 2030 benchmark. Policies should prioritize universal birth-dose vaccination, targeted antenatal testing, and broader access to treatment. Practices need to expand community education campaigns, enforce infection prevention standards in healthcare facilities, and strengthen adherence support and maternal-child prevention programs to close the remaining gap.

Indicator 3.4.2: Suicide Mortality Rate:

The downward trend in suicide mortality underscores progress but also highlights the need for sustained mental health policies. Policymakers should work with religious institutions and integrate mental health into primary health care, allocate more resources to psychosocial support, and reduce stigma. Practices should expand community-based counseling, strengthen crisis intervention services, and improve data surveillance to ensure early detection and prevention of suicide risks.

Indicator 3.5.1: Number of Treatment Interventions for Substance Use Disorder (SUD):

The fluctuating trend in SUD treatment interventions in Addis Ababa demonstrates both the potential for rapid expansion of services and the fragility of those gains during disruptions such as COVID-19. For policy, this highlights the need to secure sustainable financing, integrate SUD care into primary health systems, and strengthen institutional frameworks for mental health. In practice, scaling up specialized treatment centers, training more behavioral health professionals, expanding community-based rehabilitation, and enhancing data systems will be essential. Building system resilience through consistent service delivery and strong

referral pathways is critical to address the persistent burden of substance use.

Indicator 3.6.1: Death Rate Due to Road Traffic Injuries:

The observed trend in Addis Ababa highlights the need for sustained road safety interventions, including stricter traffic law enforcement, improved pedestrian infrastructure, and data-driven planning. Strengthening institutional coordination and public awareness is essential. Scaling up successful measures from recent years can help achieve the 2030 target and ensure long-term reductions in road traffic fatalities.

Indicator 3.7.2: Adolescent Birth Rate per 1,000 Women:

The declining adolescent birth rate in Addis Ababa, though close to the 2030 target, underscores the importance of sustained preventive measures that address underlying vulnerabilities such as sexual violence, child marriage, and poverty. Policy implications include strengthening child protection systems, enforcing laws against early marriage and exploitation. In practice, expanding adolescent-friendly health services, mobilizing community platforms, and reinforcing health worker capacity are key. Continued multisectoral collaboration between health, education, and social protection sectors will ensure that progress is not only achieved but also sustained.

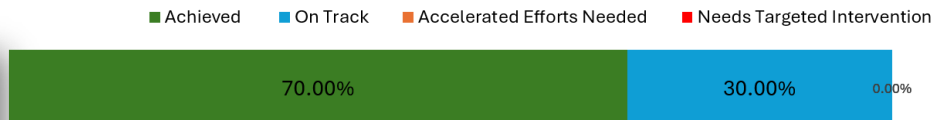
Case Box 1: Progress and Gaps in SDG 3 – Health Outcomes in Addis Ababa

Although data are available for the years 2015/16 and 2016/17, the year 2017/18 has been used as the baseline for SDG 3 indicators, as the data source indicates limitations in data capture performance during 2015/16 and 2016/17. Between 2017/18 and 2023/24 maternal mortality declined significantly by 32.3%, reaching 35.8 per 100,000, nearly achieving the 2030 local target. Similarly, under-five and neonatal mortality rates decreased by 23.6% and 33.6%, respectively, reflecting sustained improvements in maternal and child health services.

Substantial progress is also observed in communicable disease control. New HIV infections dropped by 46.2%, while hepatitis B incidence saw a marked reduction of 55.8%. Tuberculosis incidence showed a more modest decline of 10.5%, indicating the need for accelerated interventions to meet the ambitious 2030 target. Encouragingly, the suicide mortality rate decreased by over half (51.6%), suggesting improvements in mental health awareness and support systems.

In terms of health system responsiveness, treatment interventions for substance use disorders increased by 66.6%, demonstrating expanded access to care and strengthened service provision. Road traffic-related deaths also declined by 27.3%, signaling progress in injury prevention measures, although further efforts are required to meet the target.

3.2. SDG 4: Quality Education



3.2.1. Indicator No. 4.2.2: Participation rate in organized learning (one year before the official primary entry age), by sex

The participation rate in organized learning one year before the official primary entry age is a core indicator under Sustainable Development Goal (SDG) 4.2.2, which emphasizes universal access to quality early childhood development and pre-primary education. In alignment with this global commitment, Addis Ababa has set a target of achieving 100 percent participation by 2030. From 2015/16 to 2023/24, the city made

notable progress toward this goal, with steady increases in participation for both boys and girls and attainment of rates above 100 percent in recent years. This rapid expansion can be attributed to strong policy commitment, substantial financial support (average 5.6 billion birr annually) through the *Timihrt Letiwilid* Prime Minister Dr. Abiy Ahmed's Initiative, the intensive implementation of early childhood development programs by the city administration recognized as part of the Mayor's legacy agenda focused efforts to expand pre-primary education.

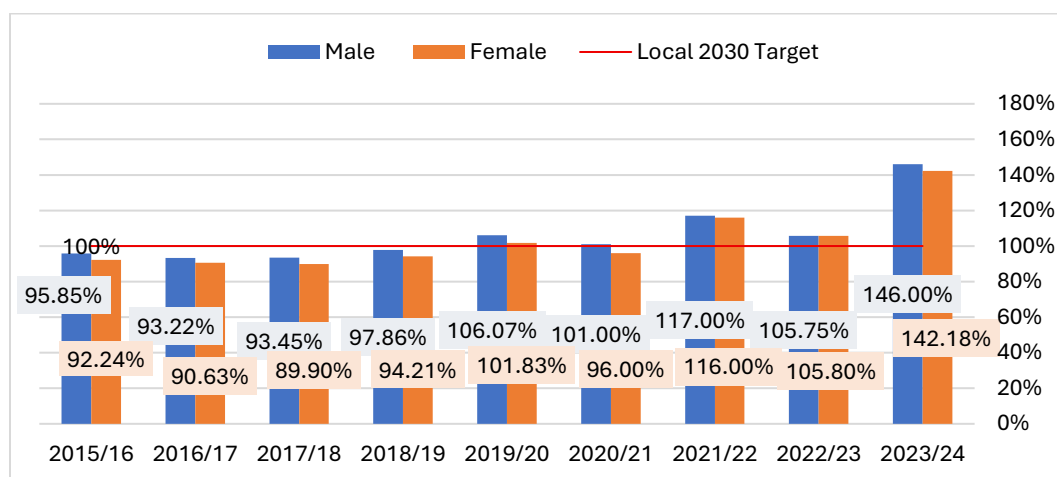


Figure 13: Participation rate in organized learning (one year before the official primary entry age), by sex

As illustrated in Figure 13, a significant turning point occurred in 2018/19, when participation increased to 97.86 percent for boys and 94.21 percent for girls, substantially narrowing the gap toward universal coverage. In 2019/20, participation exceeded 100

percent for the first time, reaching 106.07 percent for boys and 101.83 percent for girls. Such outcomes, commonly observed in rapidly expanding early childhood education systems, can be explained by a combination of factors, including domestic migration that

increased the number of enrolled children beyond official estimates, the inclusion of underage learners, and the expansion of private, community-based, and faith-based institutions that enhanced access and improved reporting completeness.

While access indicators highlight impressive progress, Addis Ababa's achievements also extend beyond mere enrollment to encompass improvements in the quality of pre-primary education. Historically, Ethiopia's investment in pre-primary education was very low, with only 0.01% of the gross national product allocated to this sector. Yet the city faces growing demand, as Addis Ababa's

population is projected to exceed 6.5 million by 2026, with nearly 1.3 million children under the age of six (Addis Ababa City Administration, 2022). To respond to this, the "Future Hope of Addis" program has introduced ambitious targets to increase the proportion of children aged 4–6 accessing play-based early learning services and to ensure that these children acquire demonstrable school readiness skills across multiple developmental domains. This represents a major policy shift from focusing solely on access to prioritizing both the quality and effectiveness of early childhood education.



Learning through play

The quality dimension of Addis Ababa's progress has been further strengthened under the leadership of H.E. Adanech Abiebie, the city's first female mayor, through the *Children: The Future Hope of Addis Ababa Early Childhood Development Initiative*. This comprehensive, evidence-based, and multisector program implemented with the partnership of Big Win Philanthropy aims to make Addis Ababa the leading African city for raising children. Among its strategies is the expansion of play-based learning opportunities to 150 public and 100 private schools, creating a total of 250 schools equipped with developmentally appropriate early learning environments. These initiatives not only boost enrollment but also ensure that



children develop critical cognitive, social, and emotional skills needed for success in primary school and beyond.



Global collaboration on Addis Ababa's ECD program

In general, Addis Ababa has surpassed its 2030 SDG target for organized learning participation and is making important strides in improving the quality of early childhood education. The city's progress has been fueled by a combination of migration dynamics, strong institutional commitment, and increased investment in both access and quality. Sustaining this momentum will require continued focus on equitable access, high-quality learning environments, and strengthened data systems to ensure accurate monitoring. If these efforts are maintained, Addis Ababa is well positioned to serve as a continental leader in advancing early childhood development, demonstrating how urban centers can balance rapid expansion with quality education outcomes.

3.2.2. Indicator No. 4.3.1: Participation rate of adults in formal and non-formal education and training

The participation rate of youth and adults in formal and non-formal education and training in Addis Ababa over the period 2015/16 to 2023/24 demonstrates a sustained and intentional downward trajectory, which is consistent with the intended direction of SDG indicator 4.3.1. As illustrated in Figure 14, participation reached its peak in 2015/16 at 27,348, reflecting strong initial demand for adult and continuing education programs. From 2016/17 onward, participation declined markedly to 16,264, followed by moderate fluctuations in 2017/18 (17,444) and 2018/19 (17,152), and then a sharp decline to 9,278 in 2020/21, followed by a slight increase to 9,058 in 2021/22, and a final decline to 6,586 in 2023/24.

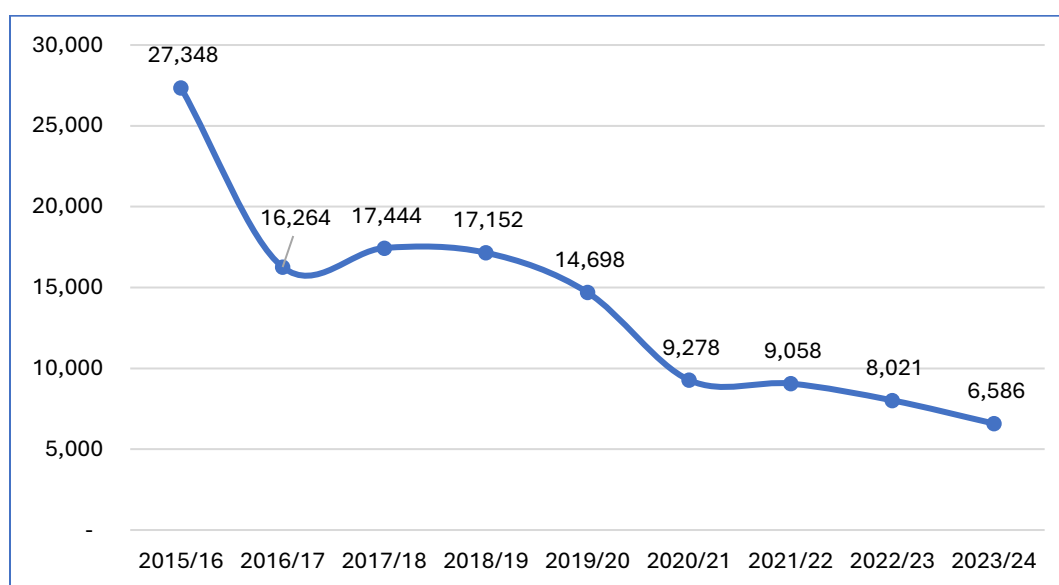


Figure 14: Participation rate of youth and adults in formal and non-formal education and training in the previous 12 months

Despite these short-term variations, the overall trend indicates a gradual reduction in the number of youth and adults requiring remedial or alternative education pathways, suggesting improvements in access to and completion of formal education. This declining pattern has been supported by a well-established institutional and operational framework for adult education in the city. The Special Needs and Adult Education Directorate is formally established within the

Addis Ababa Education Bureau and is similarly structured at the department level across all woredas. At the community level, woreda education experts conduct systematic house-to-house surveys to identify illiterate youth and adults, ensuring targeted and inclusive outreach. In each woreda, facilitators are recruited directly from the local community, enhancing program accessibility, cultural relevance, and ownership. Adult education programs are delivered using a

dedicated one-year curriculum and are implemented in nearby primary schools across the woredas, thereby minimizing physical and social barriers to participation.

From 2019/20 onward, the downward trend became more pronounced, with participation declining to 14,698 in 2019/20 and further to 9,278 in 2020/21. The continued decline also reflects the cumulative impact of education system reforms aimed at expanding formal education coverage and reducing the pool of out-of-school youth and adults. The consistently low and stable participation levels observed in 2020/21 (9,278) and 2021/22 (9,058) suggest a significant reduction in the number of illiterate individuals in the city.

A key feature of Addis Ababa's adult education program is its structured assessment

and progression mechanism. At the end of the program, participants are evaluated through the standardized “**Yebirhan Mizena**” examination. Learners who score 50 percent or above are considered to have successfully completed the program and become eligible for further learning and skills development opportunities. Notably, in 2023/24, 97 percent of adult education participants passed the Yebirhan Mizena examination by scoring above the minimum threshold, underscoring the effectiveness and quality of the program. Successful candidates are then provided with three flexible pathways based on their individual interests and circumstances: enrollment in technical and vocational education institutions, transition into formal education starting from Grade 3, or exit from the education system to pursue their livelihoods with enhanced literacy and life skills.



Adult education beneficiaries in technical and vocational schools

By 2022/23 and 2023/24, participation declined further to 8,021 and 6,586, respectively, representing the lowest levels observed during the assessment period. From a policy perspective, this trend is a positive outcome, as it reflects strengthened formal education pathways, improved literacy outcomes, and effective graduation of learners from adult education into higher levels of education or skills training. However, the remaining challenge lies in ensuring that adult and non-formal education programs continue

to be responsive, inclusive, and closely aligned with labor market needs. Overall, Addis Ababa is broadly on track in achieving the SDG 4.3.1 target, with the declining participation rate signaling progress toward reduced reliance on remedial education and the consolidation of a more resilient, inclusive, and forward-looking education system.

3.2.3. Indicator No. 4.4.1: Proportion of youth and adults with information and communications technology (ICT) skills

The proportion of youth and adults possessing information and communications technology (ICT) skills constitutes a core indicator under SDG 4.4.1, which seeks to expand the availability of relevant skills for employment, decent work, and entrepreneurship. In

alignment with this global commitment, Addis Ababa established a local target of achieving 85 percent ICT proficiency by 2030. Data from the Education Statistics Annual Abstract, as presented in Figure 15, indicate that between 2015/16 and 2023/24 the city not only met but consistently surpassed this target, demonstrating sustained and exceptional performance over the nine-year reporting period.

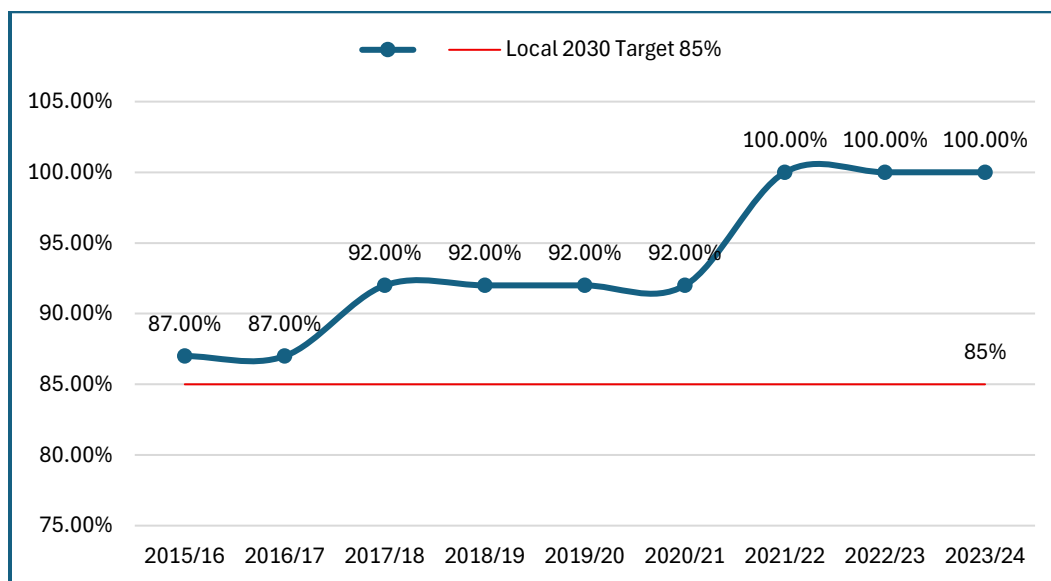


Figure 15: Proportion of youth and adults with information and communications technology (ICT) skills

In 2015/16 and 2016/17, ICT proficiency among youth and adults stood at 87 percent, already exceeding the 2030 benchmark. This early achievement reflects Addis Ababa's comparatively strong educational base and access to digital technologies. A key contributing factor has been the systematic revision of the formal education curriculum, through which ICT was introduced as a compulsory subject at the primary and middle school levels. This curricular reform was complemented by the provision of ICT infrastructure in all schools and the expansion of internet connectivity across the city's education system, ensuring that learners

acquire both theoretical knowledge and practical digital skills from an early age.



Students in computer lab



Students in Computer Lab

By 2017/18, the proportion of youth and adults with ICT skills increased to 92 percent, a level that was sustained through 2020/21. The consistent attainment of ICT proficiency rates above 90 percent over several consecutive years indicates a mature and well-institutionalized approach to digital literacy. During this period, preparatory school students were also provided with opportunities to learn ICT as part of vocational training streams, further strengthening skills acquisition pathways and linking digital competencies with employability. These formal initiatives were reinforced by broader national efforts to expand ICT education in schools, promote e-governance, and enhance digital skills through TVET institutions and higher education, alongside widespread informal learning through mobile technologies and online platforms.

The most significant milestone was reached in 2021/22, when Addis Ababa achieved 100 percent ICT proficiency among youth and adults, a level that was maintained in 2022/23 and 2023/24. Reaching full coverage represents a landmark accomplishment and signals near-universal access to ICT learning opportunities, supported by comprehensive school-level infrastructure, reliable internet access, and the full integration of ICT into mainstream education and vocational training. This outcome underscores the effectiveness of sustained policy commitment, curriculum

reform, and investment in digital infrastructure.

Overall, the trend clearly demonstrates that Addis Ababa has exceeded its 2030 ICT skills target by a wide margin, positioning the city as a national frontrunner in digital literacy and ICT accessibility. This achievement is critical for enhancing youth employability, supporting entrepreneurship, and advancing Ethiopia's broader digital transformation agenda. Nonetheless, sustaining and validating a 100 percent proficiency rate requires continued attention to the quality and relevance of training, equitable access for marginalized groups, and continuous upskilling to keep pace with rapidly evolving technologies. Going forward, the focus extends beyond basic digital literacy toward the development of advanced ICT competencies, including coding, data analytics, digital marketing, and cybersecurity, with national initiatives such as the Prime Minister (PM) 5 Million Coders initiative. The PM 5 Million Coders Initiative is a national program launched by Prime Minister Dr. Abiy Ahmed to equip millions of Ethiopians with market-relevant digital skills, particularly in coding and software development, in order to enhance youth employability, support entrepreneurship, and accelerate the country's digital transformation.

3.2.4. Indicator No. 4.5.1(a): Gender Parity Index (GPI) in enrollment at pre-primary school

The Gender Parity Index (GPI) in pre-primary school enrollment under SDG 4.5.1, focuses on eliminating gender disparities in education. The GPI is calculated as the ratio of female to male enrollment, with a value of 1 indicating perfect gender parity. A GPI below 1 signifies that fewer girls are enrolled relative to boys, while a value above 1 suggests higher female enrollment. Addis Ababa has set a local target to achieve a GPI of 1 by 2030 at all levels of education, including pre-primary.

Between 2015/16 and 2023/24, Addis Ababa's GPI in pre-primary enrollment has consistently ranged between 0.95 and 1.06, reflecting near parity with minor annual fluctuations. As shown in Figure 16, in 2015/16, the GPI stood at 0.96, indicating a slight underrepresentation of girls in early learning institutions. This trend continued through 2016/17 (0.97) and 2017/18 (0.96), suggesting that although there was near-equal access, boys still had a marginally higher enrollment rate.

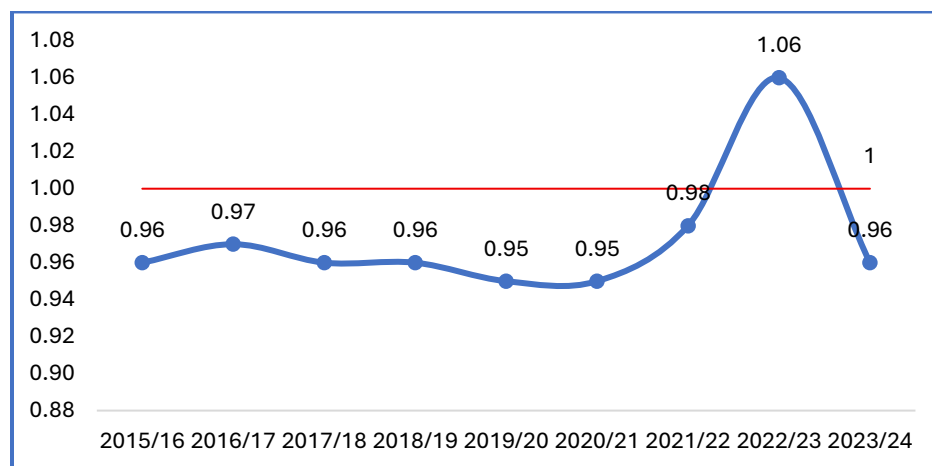


Figure 16: Gender Parity Index (GPI) in enrollment at pre-primary school

From 2018/19 to 2020/21, the GPI remained stable at 0.95–0.96, signaling continued efforts to promote gender-inclusive early childhood education. The relatively stable yet suboptimal parity levels during these years suggest that while pre-primary access was improving overall, it did not equally benefit both sexes. A significant improvement occurred in 2021/22, where the GPI rose to 0.98, nearing full parity. This momentum was further reinforced in 2022/23, when the GPI reached 1.06, marking the only year in the reporting period where girls slightly outnumbered boys in pre-primary enrollment. This over-parity may be attributed to the relatively higher share of female domestic migrants. However, in 2023/24, the GPI declined again to 0.96, reverting to the earlier trend of slight male dominance in enrollment.

The trend data clearly shows that Addis Ababa has maintained near gender parity in pre-primary enrollment throughout the past nine years, but has not consistently achieved the ideal GPI of 1.00. While the fluctuations are relatively small, they reveal underlying gender-related dynamics that may affect

school participation, especially at the household and community levels.

The brief achievement of parity in 2022/23 demonstrates that with focused interventions, full gender balance is possible. However, the return to sub-parity in 2023/24 underscores the need for sustained and targeted efforts, particularly to address root causes of gender imbalance, such as parental attitudes, financial constraints, and gaps in social protection programs for vulnerable families.

In summary, Addis Ababa has made commendable progress toward achieving gender parity in pre-primary education, maintaining a GPI close to 1.00 over nearly a decade. However, the target of full parity by 2030 will require consistent monitoring, gender-responsive policy interventions, and community-level engagement to address residual disparities. Strengthening support for girls' early learning, expanding access to quality early childhood programs, and institutionalizing gender equity policies in the education system will be essential for meeting the SDG 4.5.1 target.

3.2.5. Indicator No. 4.5.1(b): Gender Parity Index (GPI) in enrollment at primary and middle level school

In alignment with SDG 4.5.1, Addis Ababa aims to achieve full gender parity (GPI = 1) in primary and middle-level school enrollment by 2030. According to Figure 17, between 2015/16 and 2023/24, the trend in Addis Ababa's GPI at the primary and middle levels shows that female enrollment consistently exceeded that of males, with values above 1 across all years. In 2015/16, the GPI was already at 1.07, indicating more girls than boys were enrolled.

This gap widened slightly in the following years, reaching 1.15 in 2016/17, 1.14 in 2017/18, and peaking at 1.21 in 2019/20 the highest level in the reporting period. These values suggest that, while the city has surpassed the SDG target for gender parity numerically, it has instead moved toward a gender imbalance favoring girls in enrollment. Several factors may contribute to this trend: stronger gender equity policies promoting girls' education, targeted interventions such as free school supplies or awareness campaigns, and possibly due to early entry into the labor market or social pressures.

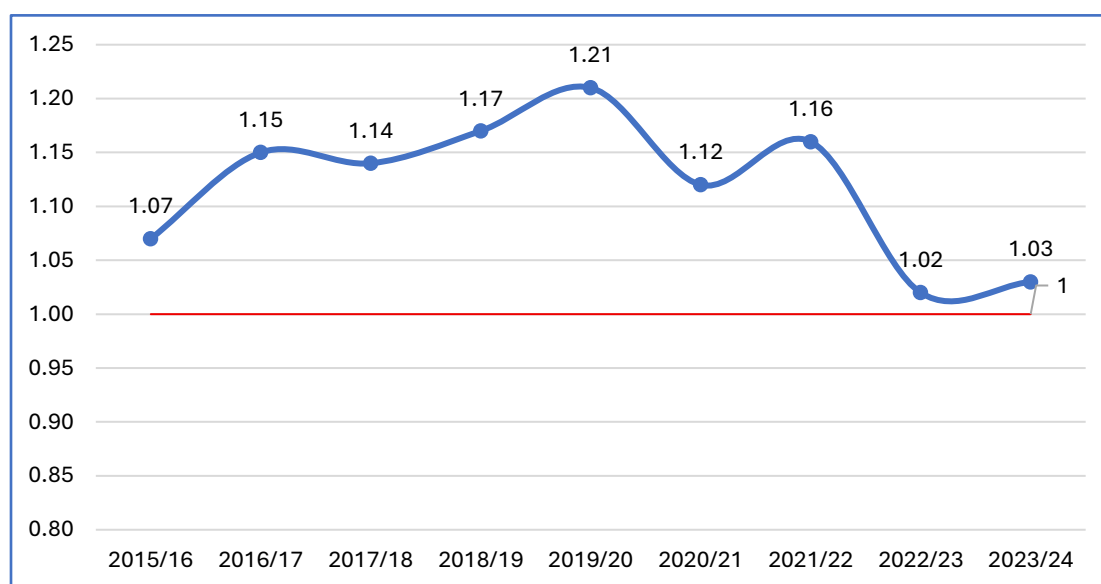


Figure 17: Gender Parity Index (GPI) in enrollment at primary and middle level school

In 2020/21, the GPI dropped slightly to 1.12, and although it rebounded to 1.16 in 2021/22, the most notable progress came in 2022/23, when the GPI declined significantly to 1.02. This marked a closer approach to the target of full parity, suggesting that more balanced enrollment was achieved between girls and boys. The improvement was sustained in 2023/24, with a GPI of 1.03, indicating a marginal female advantage but near-equity in enrollment.

In enrollment at primary and middle level school the data shows that Addis Ababa has made consistent efforts in promoting girls'

education, resulting in female-dominant enrollment over the past nine years. While this trend aligns with global efforts to close the gender gap in education, it also raises questions about male underrepresentation, particularly in urban low-income or labor-burdened households where boys may be more likely to disengage from schooling for economic reasons.

The decline in the GPI since 2019/20 especially the drop to near parity in 2022/23 and 2023/24 is a positive development. It indicates that more balanced gender representation is being achieved, potentially

due to broader inclusive education policies, improved school retention programs for boys, and better monitoring systems. However, to sustain this progress, it is important to look beyond the numbers and assess underlying causes of gender imbalance, whether in favor of girls or boys. Factors such as school quality, gender-sensitive pedagogy, socio-cultural norms, and school environment safety must be continuously monitored to ensure that both boys and girls are equally supported to stay in school and succeed.

In summary, Addis Ababa has exceeded the SDG target of gender parity in primary and middle-level education for several years, but often in favor of girls. Recent trends show a positive shift toward balanced enrollment, approaching the ideal GPI of 1.00. To fully realize and sustain equitable education outcomes by 2030, it is essential for the city to continue promoting inclusive strategies that address both girls' empowerment and boys' engagement, ensuring that no group is left

behind in the pursuit of quality and equitable education.

3.2.6. Indicator No. 4.5.1(c): Gender Parity Index (GPI) in enrollment at secondary level school

In line with SDG 4.5.1, Addis Ababa has committed to achieving full gender parity in secondary education by 2030. Over the nine-year period from 2015/16 to 2023/24, Addis Ababa's GPI in secondary school enrollment consistently remained above 1, demonstrating that more girls than boys are enrolled at this level. In 2015/16, the GPI stood at 1.08, increasing slightly to 1.10 in 2016/17 (Figure 18). The gap widened further in 2017/18 with a GPI of 1.23, reflecting a significant gender imbalance favoring female students. A slight reduction to 1.20 in 2018/19 and 1.16 in 2019/20 still indicated a persistent trend of female dominance in secondary school enrollment.

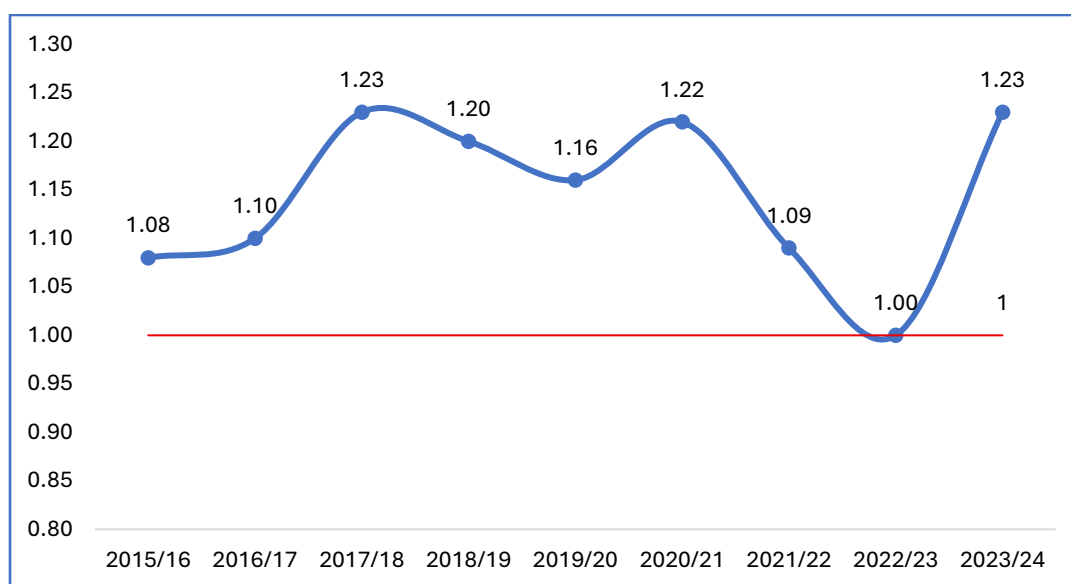


Figure 18: Gender Parity Index (GPI) in enrollment at secondary level school

In 2020/21, the GPI again reached 1.22, reaffirming the ongoing disparity. However, some improvement was observed in 2021/22, with the GPI decreasing to 1.09, suggesting a move toward a more balanced gender ratio. The most notable milestone came in 2022/23,

when Addis Ababa achieved a GPI of 1.00, representing full gender parity in secondary school enrollment.

Despite this progress, the GPI jumped back to 1.23 in 2023/24, once again indicating a marked overrepresentation of girls. While this

figure demonstrates continued success in promoting girls' education, it also points to a possible under-engagement of boys in secondary education. Such disparity may stem from socioeconomic factors such as labor market pressures, school disengagement, or behavioral and academic challenges that disproportionately affect male students.

The consistent female advantage in enrollment reflects the success of policy and programmatic interventions aimed at overcoming traditional barriers to girls' education, including scholarship programs, awareness campaigns, and safe school environments. However, to sustain gender equity, there is an urgent need to investigate and address the reasons behind male under-enrollment, which could include early entry into the workforce, disengagement due to lack of support, or peer and community pressures.

3.2.7. Indicator No. 4.5.1(d): Transition rate from primary to secondary school

SDG Indicator 4.5.1, which tracks the transition rate from primary and middle level

to secondary education, provides important insight into equity and continuity within the education system, particularly by sex. Over the period from 2015/16 to 2023/24, Addis Ababa exhibited an overall upward but fluctuating trend in transition rates for both male and female students. In the earlier years, male transition rates consistently exceeded those of females, with figures of 75.8 percent for males and 66.8 percent for females in 2015/16, rising modestly in 2016/17 before declining for both sexes in 2017/18 (Figure 19). A notable shift occurred in 2018/19, when the female transition rate (72.7 percent) surpassed that of males (68.6 percent), suggesting improvements in female retention and progression at that time. Substantial gains were recorded in 2019/20 and 2020/21, with both sexes approaching the local 2030 target of 90 percent, and near parity achieved in 2020/21, when transition rates reached 87.81 percent for males and 88.01 percent for females. However, a significant setback was observed in 2022/23, when transition rates dropped sharply for both sexes, particularly for females, whose rate fell to 65.44 percent before a partial recovery in 2023/24 to 84.11 percent for males and 74.55 percent for females. Overall, while Addis Ababa has demonstrated the capacity to

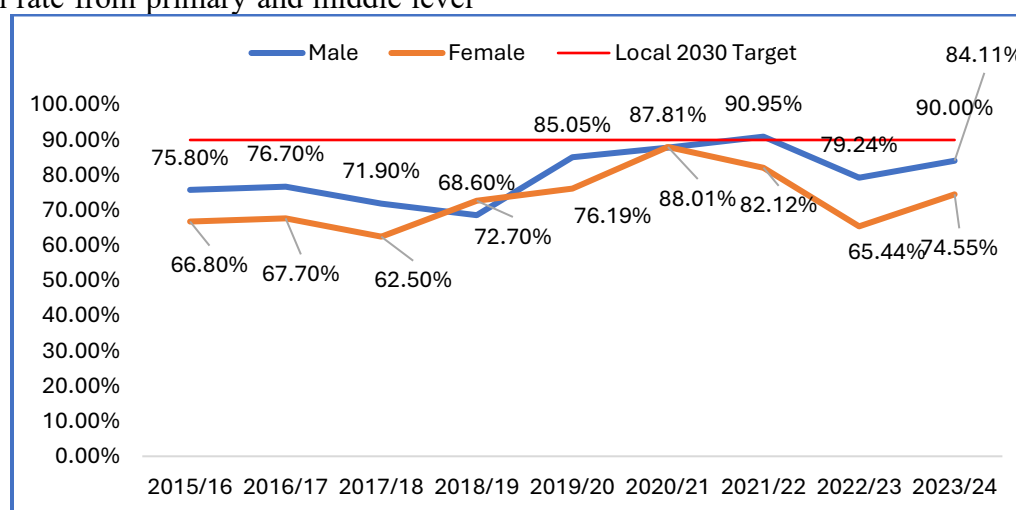


Figure 19: Transition rate from primary to secondary school

Despite this progress, the trend in the subsequent years highlights challenges in sustaining high transition rates. In 2021/22, male students exceeded the 2030 target, reaching 90.95 percent, while the female rate declined to 82.12 percent, widening the gender gap once again. A more pronounced

setback was observed in 2022/23, when transition rates dropped sharply for both sexes, particularly for females, whose rate fell to 65.44 percent before a partial recovery in 2023/24 to 84.11 percent for males and 74.55 percent for females. Overall, while Addis Ababa has demonstrated the capacity to

approach and even surpass the SDG target, the volatility of the indicator and the recurring gender disparities indicate the need for sustained policy attention.

3.2.8. Indicator No. 4.a.1: Proportion of schools with access to electricity

Access to electricity in schools is a fundamental enabler for quality education, supporting lighting, digital learning, technological integration, and overall school infrastructure functionality. SDG Indicator 4.a.1 tracks the availability of basic services in learning environments, with 100% access to electricity by 2030 as the global and local target. This target reflects a commitment to creating inclusive, equitable, and modern learning environments for all students.

As revealed in Figure 20, in Addis Ababa, the data from 2018/19 to 2023/24 shows that the

city has already achieved universal electricity access across all schools, meeting the SDG target well ahead of the 2030 deadline. Over these six consecutive years, the proportion of schools with electricity remained at 100%, demonstrating a consistent and sustained achievement of this crucial infrastructure benchmark.

This accomplishment can be attributed to Addis Ababa’s urban advantage, where electrical infrastructure is relatively well-developed and accessible. The city’s commitment to educational quality and modernization, especially through the integration of ICT in schools likely contributed to maintaining full electrification across all learning institutions, including public and private schools at the primary, middle, and secondary levels.

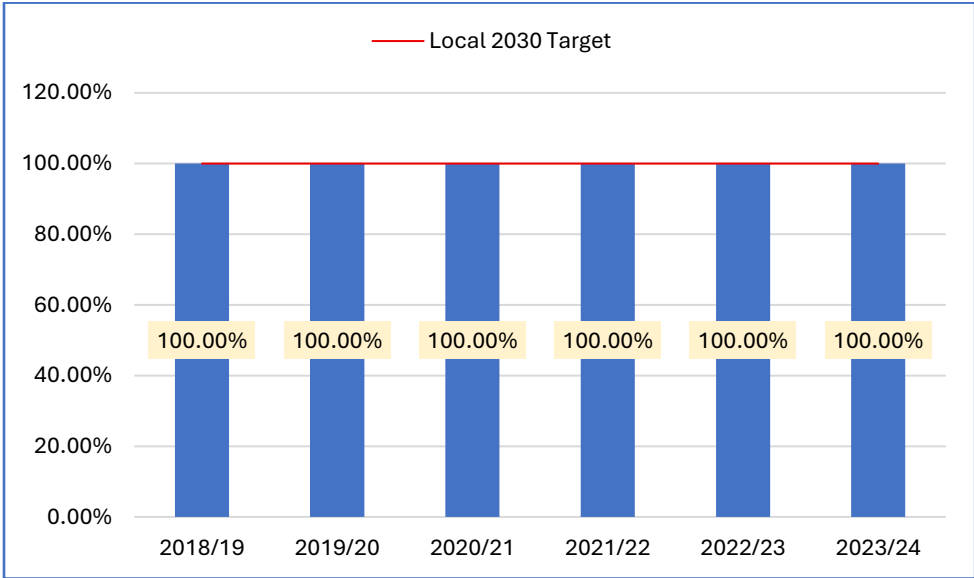


Figure 20: Proportion of schools with access to electricity

Achieving and sustaining 100% access to electricity in schools is a significant milestone in improving learning conditions. Electricity enables schools to use digital tools, operate laboratories, enhance teacher performance, electrification and digital education agendas. However, while access is universal, attention must also be given to the quality and reliability

and expand learning hours, especially during cloudy or evening conditions. Addis Ababa’s performance in this regard reflects both strong governance in educational infrastructure and strategic alignment with broader of electricity. For schools to truly benefit from electrification, the supply must be stable, safe, and sufficient to support multiple devices,

lighting, and other learning infrastructure. Ongoing investment in grid reliability, backup systems (e.g., solar power), and equitable service delivery particularly in low-income areas will ensure that the value of this achievement is fully realized.

In general, Addis Ababa has successfully achieved and maintained the SDG 4.a.1 target of 100% school electrification from 2018/19 to 2023/24, positioning the city as a leader in educational infrastructure in Ethiopia. This progress lays a solid foundation for technology-enhanced learning, improved teaching conditions, and more inclusive educational outcomes.

3.2.9. Indicator No. 4.a.1: Proportion of schools with access to the Internet for pedagogical purposes

Access to the internet in schools is a foundational element of modern, quality education, enabling digital learning, access to diverse educational resources, online professional development for teachers, and the

use of interactive pedagogical tools. Under SDG Indicator 4.a.1, progress is measured by the proportion of schools with internet access for teaching and learning, with Addis Ababa's local target aligned to the global objective of achieving 100 percent coverage by 2030.

As illustrated in Figure 21, Addis Ababa has demonstrated strong and sustained progress in expanding internet access across schools over the nine-year period from 2015/16 to 2023/24. In 2015/16, 85 percent of schools had internet access for pedagogical purposes, reflecting a relatively high baseline. This figure increased to 92 percent in 2016/17 and was maintained in 2017/18, indicating steady momentum toward the integration of digital technologies in education. A major milestone was reached in 2018/19, when full coverage (100 percent) was achieved. This level of access has been consistently sustained for six consecutive years, from 2018/19 through 2023/24, allowing Addis Ababa to meet and maintain the SDG target well in advance of the 2030 deadline.

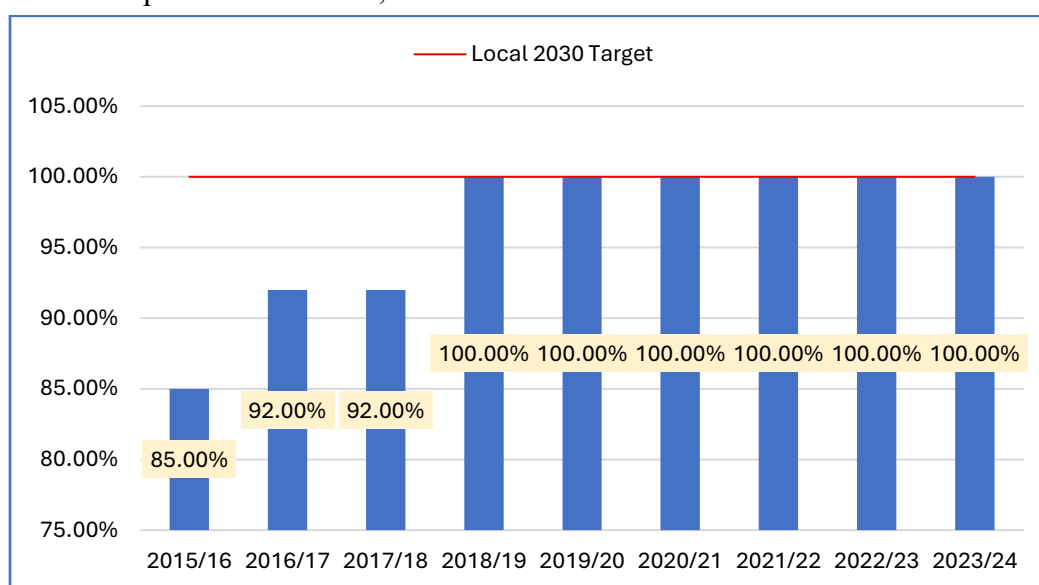


Figure 21: Proportion of schools with access to the Internet for pedagogical purposes

This achievement has been supported by strong institutional commitment, targeted financing, and systematic infrastructure management. The Addis Ababa Education Bureau directly covers the internet service

costs for 80 secondary schools and three boarding schools within the city, with an average annual expenditure of approximately 12 million birr. Primary schools, meanwhile, finance their internet services from their own

institutional budgets, demonstrating decentralized responsibility for connectivity at the foundational education level. In addition, every government school is staffed with two IT technicians, and school ICT infrastructure is optimized and maintained on an annual basis, ensuring the functionality and sustainability of digital systems. Nevertheless, future efforts should move beyond the binary

measure of access to focus on service quality and effective use. Ensuring reliable bandwidth, sufficient digital devices, continuous digital literacy training for teachers and students, and equitable access across government, private, low-cost, and schools in underprivileged neighborhoods will be critical to fully realizing the educational benefits of this connectivity.

3.2.10. Indicator No. 4.a.1: Proportion of schools with access to computers for pedagogical purposes

Access to computers in schools is a critical component of delivering quality 21st century education. It enables the integration of technology into teaching and learning, supports digital literacy, and improves both instructional and student learning outcomes.

SDG indicator 4.a.1 also specifically monitors the proportion of schools equipped with computers for pedagogical use, with 100% access targeted for achievement by 2030 in Addis Ababa, in line with global goals.



Computers provided to schools

The trend in Addis Ababa over the past nine years shows a notable and sustained achievement in this area. As shown in Figure 22, from 2015/16 to 2017/18, 92% of schools had access to computers for teaching and learning purposes. This already-high level of coverage reflected early investments in ICT infrastructure within the city's education sector. However, the remaining 8% gap indicated some disparity in access, possibly affecting schools in low-income areas or those

with limited infrastructure. By 2018/19, Addis Ababa successfully reached 100% access, ensuring that all schools were equipped with computers for educational purposes. From 2018/19 to 2023/24, this universal access has been maintained consistently for six consecutive years. This achievement is significant, as it positions Addis Ababa as an urban education system that has not only met but sustained the SDG target well ahead of the 2030 deadline.

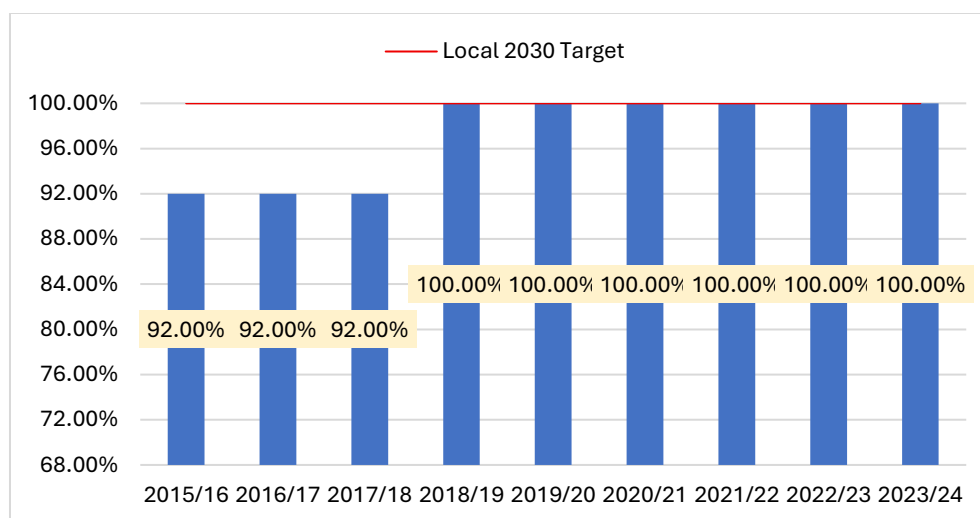


Figure 22: Proportion of schools with access to computers for pedagogical purposes

The data suggests that Addis Ababa has prioritized digital infrastructure in education, making computers a standard feature across all schools. The shift from 92% to 100% access by 2018/19 likely resulted from targeted government interventions, ICT-in-education policies, and possibly partnerships with donors or private sector entities aimed at modernizing classrooms and ensuring digital equity.



Students Using Computers in Computer Lab

However, while numerical access is universal, quality and utility are equally important. Factors such as student-to-computer ratios, maintenance of hardware, up-to-date software, teacher training in digital pedagogy, and availability of electricity and internet significantly influence the effectiveness of computer access. Without these complementary elements, access alone may not translate into meaningful learning gains.

Addis Ababa has achieved and sustained 100% computer access in schools for

pedagogical purposes since 2018/19, meeting the SDG 4.a.1 target years ahead of schedule. This accomplishment reflects a strong commitment to ICT integration in education and provides a solid foundation for digital learning innovation. Moving forward, the focus should shift to ensuring the effective use, equitable distribution, and ongoing functionality of computers, as well as continuous capacity building for teachers and ICT coordinators, to fully harness the benefits of this infrastructure and prepare students for the demands of the digital era.

3.2.11. Indicator No. 4.a.1: Proportion of schools with access to adapted infrastructure and materials for students with disabilities

Ensuring inclusive education for all requires that schools provide adapted infrastructure and learning materials for students with disabilities. This is critical for meeting SDG Target 4.a, which promotes safe, inclusive, and effective learning environments for all. Indicator 4.a.1 specifically measures the extent to which schools are physically and pedagogically accessible to learners with special needs. The goal for Addis Ababa is to reach 100% of schools equipped for students with disabilities by 2030.

According to the data shown in Figure 23, from 2015/16 to 2023/24, Addis Ababa has shown consistent and commendable progress in enhancing accessibility and inclusion within its school system. In 2015/16, only 50% of schools had infrastructure and materials adapted for students with disabilities, highlighting significant barriers to inclusive education. However, the city made steady improvements: increasing to 65% in 2016/17, 70% in 2017/18, and 85% by 2018/19 a marked acceleration in just three years.

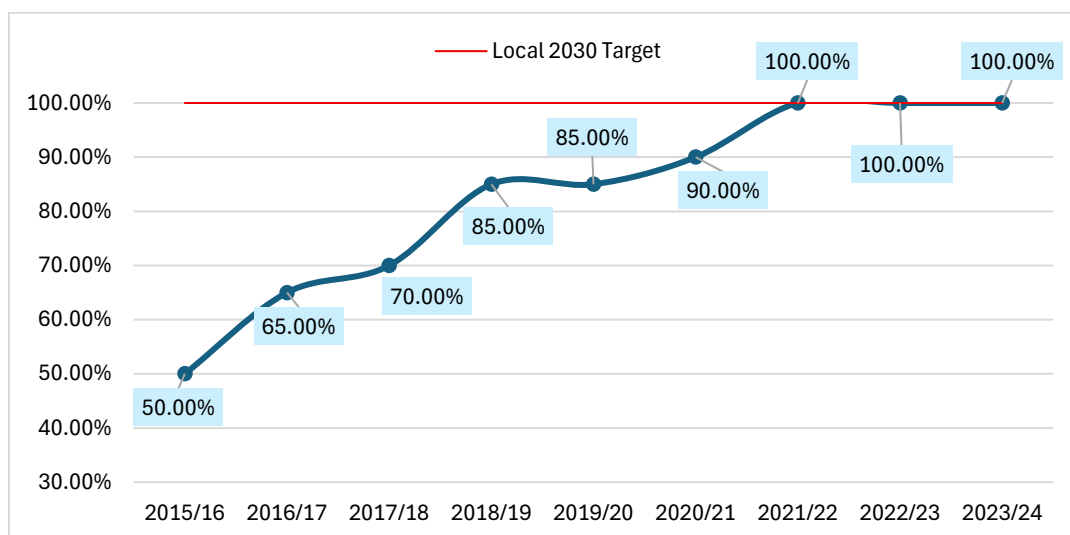


Figure 23: Proportion of schools with access to adapted infrastructure and materials for students with disabilities

The turning point occurred in 2020/21, when access reached 90%, followed by full achievement (100%) in 2021/22, a level that has been maintained through 2023/24. This early attainment of the 2030 target reflects a strong policy commitment to inclusion, supported by investment in infrastructure, teacher training, and assistive technologies.



Materials supply for students with disabilities

This sustained progress demonstrates that Addis Ababa has made inclusive education a core priority, particularly by addressing the physical and instructional needs of learners with disabilities. Adapted infrastructure include ramps, wide doorways, accessible toilets, and signage, while adapted materials include braille books, large print texts, assistive devices, and inclusive teaching resources.



Students and teachers at the Bole Arabsa kindegarten and primary school in Addis Ababa

Achieving 100% access well before 2030 is a significant milestone, particularly in an urban setting where school construction, renovation, and service standardization can be complex and resource-intensive. This progress has likely improved enrollment, retention, and learning outcomes for children with disabilities contributing to a more equitable education system.

Addis Ababa has made remarkable progress in ensuring all schools are equipped with adapted infrastructure and materials for students with disabilities reaching the SDG 4.a.1(d) target of

100% as early as 2021/22. This is a clear reflection of the city's commitment to equity, inclusion, and the principle of "leaving no one behind." Going forward, priority should be given to ensuring adequate infrastructure across all schools, maintaining quality standards, increasing effective utilization, and promoting the full and meaningful participation of students with disabilities in all aspects of school life.

3.2.12. Indicator No. 4.a.1: Proportion of schools with access to basic drinking water

Access to basic drinking water in schools is fundamental for promoting student health, reducing absenteeism, and creating a safe and supportive learning environment (Kenney *et al.*, 2020). In alignment with Sustainable Development Goal (SDG) 4.a.1, Addis Ababa has committed to ensuring that 100% of schools have access to basic drinking water services by 2030. This indicator assesses whether schools have an improved water source that is functional and available on school premises.

According to Figure 24, from 2015/16 to 2023/24, Addis Ababa demonstrated a clear upward trend in improving access to drinking water within schools. In 2015/16, 90.6% of schools had access to basic drinking water. However, the following years saw some fluctuation: 90.0% in 2016/17, a slight dip to 87.6% in 2017/18, and a rebound to 91.0% in 2018/19. The data from 2019/20 again indicated a drop to 87.91%, which may reflect infrastructure limitations, maintenance issues, or population growth outpacing water service upgrades in certain school areas.

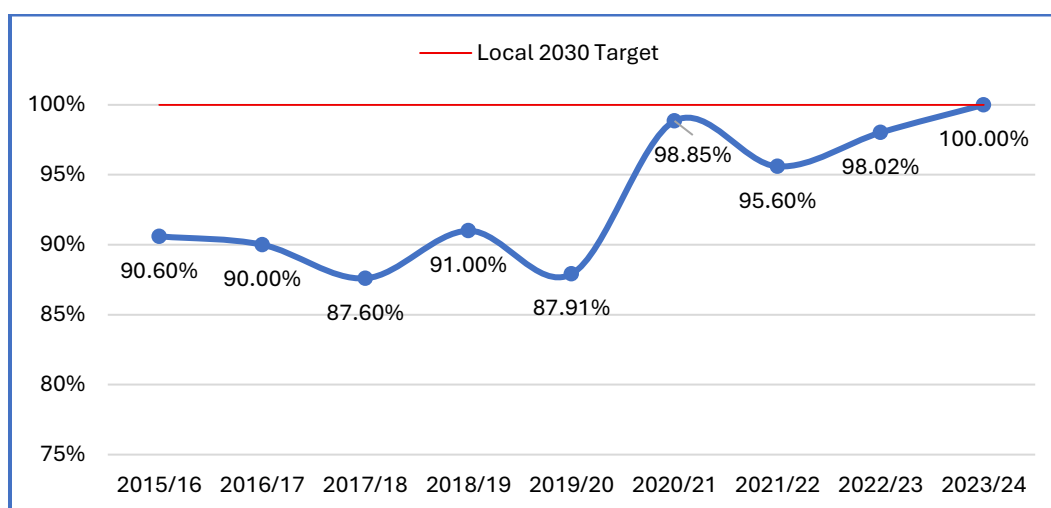


Figure 24: Proportion of schools with access to basic drinking water

Beginning in 2020/21, the city made notable gains, reaching 98.85%, followed by a slight decline to 95.6% in 2021/22. Encouragingly, the following year (2022/23) saw another rise to 98.02%, and finally, in 2023/24, Addis Ababa achieved full coverage at 100%, meeting the 2030 target seven years ahead of schedule.

This trend demonstrates the city's strong commitment and investment in improving school WASH (Water, Sanitation, and Hygiene) infrastructure.

The gradual improvements reflect effective policy responses, infrastructural upgrades, intersectoral coordination between education

and water bureaus, and possibly the integration of school WASH services into broader health and education development strategies. Despite success, sustainability and functionality must be prioritized.



Water supply facility in school

Reaching 100% does not guarantee continuous access unless systems are maintained, supplies are reliable, and contingency plans are in place for periods of water scarcity or service interruption. Therefore, monitoring mechanisms must ensure the functionality and quality of water systems remain consistently high.

Addis Ababa has made commendable progress toward achieving SDG 4.a.1 on

access to basic drinking water in schools, culminating in 100% coverage by 2023/24. This reflects a significant advancement in creating safe and inclusive educational environments, and positions the city as a national leader in education-related WASH access. Going forward, efforts should focus on maintaining the infrastructure, ensuring water quality, and embedding WASH education into the school curriculum to promote lifelong healthy practices.

3.2.13. Indicator No. 4.a.1: Proportion of schools with access to single-sex basic sanitation facilities (Preprimary)

Access to separate and adequate sanitation facilities for boys and girls is a key component of creating a safe, inclusive, and gender-sensitive learning environment (Akanzum and Pienaah, 2023). It is particularly essential for supporting girls' school attendance and participation, especially during menstruation. In Addis Ababa, the trend from 2015/16 to 2023/24 shows varying levels of progress across the three school levels pre-primary,

primary/middle, and secondary. The trend in the pre-primary education level shows a generally inconsistent and non-compliant ratio of students per toilet facility from 2015/16 to 2023/24 (Figure 25). While the target ratio is 1:30, the data indicates that in 2015/16, the student-to-toilet ratios were 1:37 for males and 1:34 for females already above the acceptable threshold.

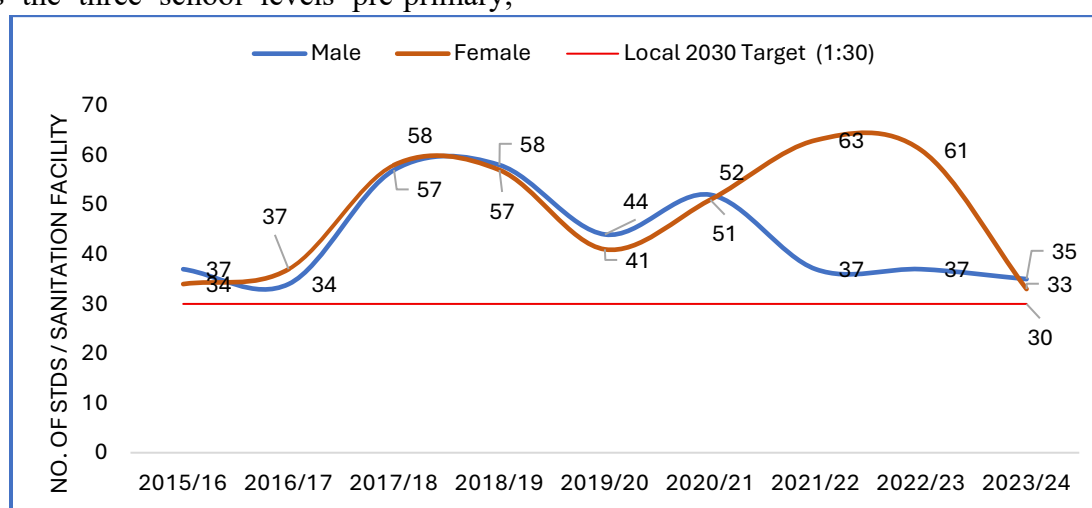


Figure 25: Proportion of schools with access to single-sex basic sanitation facilities; preprimary/ facility

In the subsequent years, the ratios further deviated from the target, peaking at 1:58 in both male and female categories in 2017/18 and 2018/19, which reflects significant overcrowding in school sanitation facilities. However, the ratio improved slightly in 2023/24 to 1:35 (male) and 1:33 (female), yet

still not meeting the standard. This suggests a gradual improvement but highlights the need for continued investment in sanitation infrastructure tailored to pre-primary learners, who require close attention to hygiene and comfort.



Sanitation facilities in schools

For primary and middle school levels, the trend reveals a similar concern. As revealed in Figure 26(a), the student-to-toilet ratio started at 1:64 (male) and 1:84 (female) in 2015/16 far exceeding the 1:50 target.

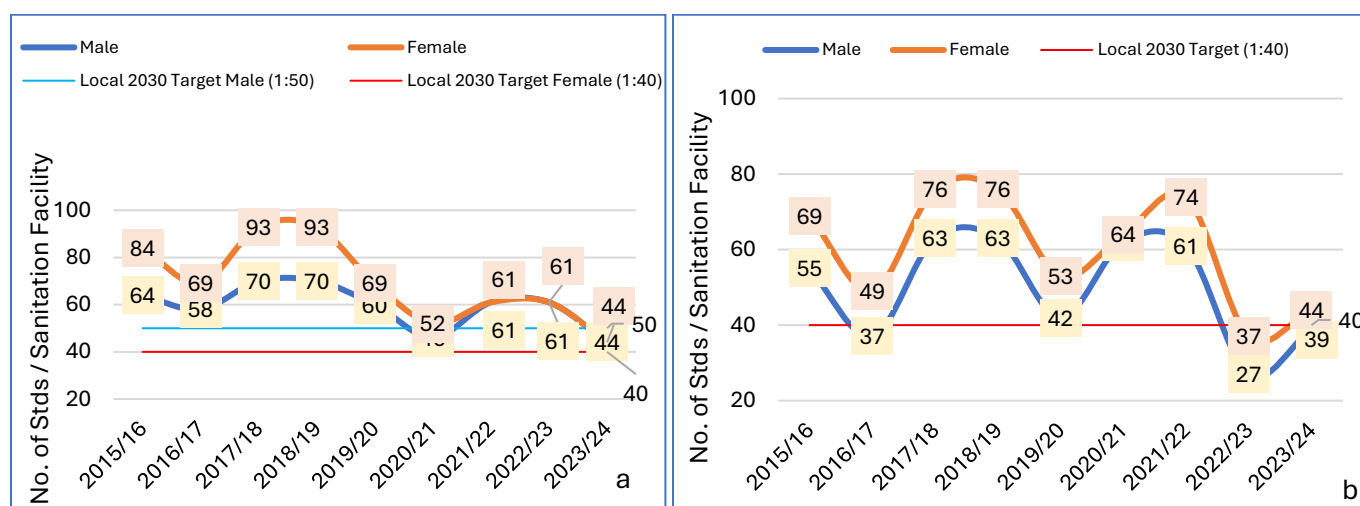


Figure 26: Proportion of schools with access to single-sex basic sanitation facilities; Primary and middle level (a) and secondary (b)/ Facility

The worst ratios were observed in 2017/18 and 2018/19, where the female ratio reached as high as 1:93. In the following years, there was gradual progress, with the 2023/24 data indicating an equal ratio of 1:44 for both male and female students. This is a notable achievement, as it shows the city is now within the local target threshold. However, sustaining this level and ensuring all schools meet this ratio remains crucial to delivering gender-sensitive sanitation access.

The secondary education level shows a fluctuating trend with only partial compliance

to the 1:40 target. According to the data revealed in Figure 26(b), in 2015/16, male and female ratios were 1:55 and 1:69, respectively. In 2016/17, a remarkable improvement was seen with 1:37 (male) and 1:49 (female). The worst ratios occurred in 2017/18 and 2018/19, reaching 1:63 (male) and 1:76 (female) indicating heavy usage pressure and sanitation inadequacies in that period. By 2023/24, ratios improved to 1:39 (male) and 1:44 (female). Although the male ratio finally meets the 1:40 standard, the female ratio still slightly exceeds it. Nonetheless, this shows commendable

progress that, with sustained support, could ensure full target compliance in coming years. Across all education levels, Addis Ababa has made gradual improvements in providing access to single-sex basic sanitation facilities in schools. Notably, primary and middle schools reached the desired standard by 2023/24, and secondary schools are nearing target compliance, especially for male students. However, pre-primary schools remain below target, and female students at all levels continue to experience relatively higher student-to-toilet ratios, indicating gender-based gaps that must be addressed.

This trend highlights the importance of equitable investment in school WASH infrastructure, especially for girls and younger students. To achieve the 2030 SDG targets, strengthening monitoring systems, ensuring routine maintenance, and integrating WASH planning into school construction and budgeting are essential. Closing the sanitation gap will not only fulfill international commitments but also enhance school attendance, performance, and well-being particularly for female students.

3.2.14. Indicator No. 4.a.1: Proportion of schools with access to basic handwashing facilities

Access to basic handwashing facilities in schools is a key component of safe and inclusive learning environments and is essential for promoting hygiene, preventing disease transmission, and supporting students' overall well-being (Simiyu *et al.*, 2025). As part of Sustainable Development Goal (SDG) 4.a.1, Addis Ababa has set local targets to ensure that all pre-primary, primary, middle,

and secondary schools are equipped with adequate handwashing facilities by 2030. The following analysis examines the trends in the availability of these facilities across different education levels from 2015 to 2024, based on data from the Educational Statistics Annual Abstract, highlighting progress, gaps, and areas requiring urgent attention.



School handwash facility in Addis Ababa (Source: World Bank and Splash)

The data revealed in Figure 27 shows, considerable variation in handwashing facility coverage in pre-primary schools over the assessed years. In 2015/16, access stood at 1:55, which is significantly above the local target of 1:20, indicating inadequate provision. However, notable improvements occurred in the following years, reaching 1:17

by 2023/24. This figure surpasses the 2030 target, reflecting strong progress in infrastructure investment or prioritization of early childhood hygiene. Yet, fluctuations in the interim years suggest inconsistency in sustaining the standards. Continued commitment and resource allocation are necessary to maintain and expand this

progress equitably across all pre-primary institutions.

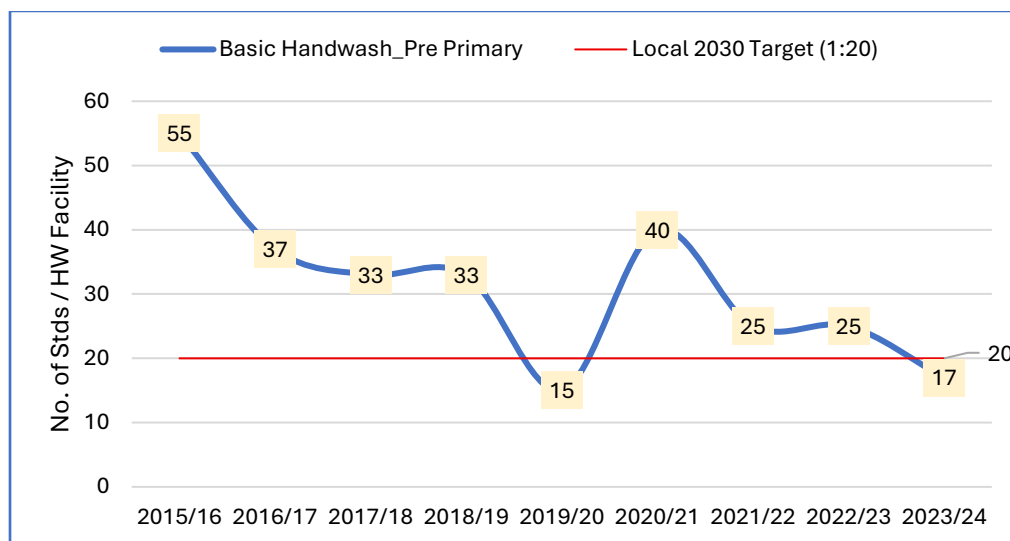


Figure 27: Proportion of schools with access to basic handwashing facilities (as per the WASH indicator definitions) Preprimary

Handwashing facility ratios in primary and middle schools also show a progressive improvement. As revealed in Figure 28 (a), in 2015/16, the ratio was 1:84 double the local target of 1:42. Over time, significant improvements were made, reaching a much-improved 1:21 by 2023/24. This final figure indicates that the city has not only met but exceeded its 2030 target. These results

demonstrate successful policy implementation and investments in WASH (Water, Sanitation, and Hygiene) infrastructure at this level, contributing positively to health and educational outcomes. It will be critical to sustain this momentum and ensure that improved ratios translate into equitable access across all schools.

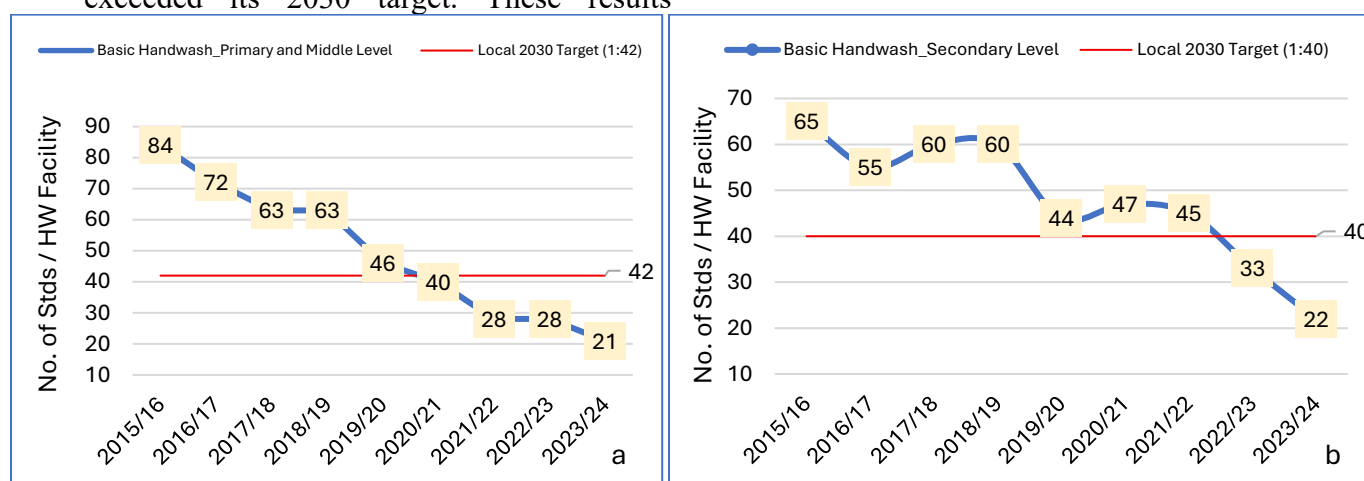


Figure 28: Proportion of schools with access to basic handwashing facilities Primary and middle level (a) and secondary (b)

Secondary schools also experienced steady gains in handwashing facility coverage. Starting from a ratio of 1:65 in 2015/16, which was well below the acceptable target of 1:40, the situation gradually improved, reaching 1:22 by 2023/24 (Figure 28(b)). This outcome significantly surpasses the target, indicating enhanced focus on student hygiene and possibly better infrastructure and maintenance practices at the secondary level. Such improvements are crucial for adolescent health and have a direct impact on reducing absenteeism due to illness.

Addis Ababa has demonstrated commendable progress in improving access to basic handwashing facilities across all school levels. The city has achieved or exceeded the 2030 targets in each category by 2023/24, particularly in primary, middle, and secondary levels, where the student-to-facility ratios have significantly improved. However, the variations observed in earlier years call for consistent monitoring, equitable resource distribution, and maintenance efforts to ensure sustained success and universal access. Integrating hygiene education with infrastructure improvement will further strengthen these gains and support broader health and education outcomes under SDG 4.

3.2.15. Policy Implication and Practices for SDG-4 Indicators

Indicator 4.2.2: Participation rate in organized learning (pre-primary, by sex): The steady rise in organized learning participation surpassing 100% in recent years demonstrates strong progress in pre-primary education, it also signals issues of over enrollment. Policy should focus not only on sustaining universal access but also on improving quality. Strengthening teacher training, curriculum quality, and data monitoring systems will help balance access expansion with meaningful learning outcomes.

Indicator 4.3.1: Participation rate of youth and adults in education/training: The

declining trend in youth and adult participation rates reflects progress in formal education coverage but raises questions about the relevance and inclusiveness of remaining non-formal programs. Policy should shift from quantity to quality by targeting skills training toward labor market demands, enhancing employability, and ensuring lifelong learning opportunities for marginalized populations. This calls for stronger linkages between TVETs, industry, and community-based education initiatives.

Indicator 4.4.1: Proportion of youth and adults with ICT skills: Achieving and sustaining 100% ICT proficiency is a landmark achievement, but the focus must now move toward advanced skills development to meet labor market needs. Policymakers should prioritize upgrading curricula to include coding, data science, and digital entrepreneurship while addressing equity gaps in access to devices, internet, and training quality. A forward-looking digital skills strategy will help build a resilient, knowledge-based economy.

Indicator 4.5.1(a): Gender Parity Index (GPI) in pre-primary enrollment: Near parity has been achieved in pre-primary enrollment, but fluctuations reveal lingering gender-related barriers. Sustained progress requires gender-responsive policies, such as community sensitization, financial support for vulnerable families, and early childhood programs that promote inclusive participation. Policymakers should institutionalize parity-focused monitoring systems.

Indicator 4.5.1(b&c): GPI in primary and secondary enrollment: The persistent female advantage in primary and secondary enrollment reflects successful gender equity efforts, yet the re-emergence of disparities in recent years underscores the need to address boys' disengagement. Policy should prioritize strategies that retain both genders equally, including targeted support programs, safe learning environments, and counseling

services. A more balanced approach will help sustain full gender parity in the transition to higher education.

Indicator 4.a.1(a): Proportion of schools with access to electricity: Universal electricity access in schools since 2018/19 is a major milestone, but policies should now ensure reliability, safety, and sustainability. Integrating renewable energy solutions such as solar, particularly for backup, can strengthen resilience. Linking electrification with digital education reforms will help maximize the educational benefits of this infrastructure achievement.

Indicator 4.a.1(b): Proportion of schools with internet access: Sustaining 100% internet access requires moving beyond coverage to ensuring quality, affordability, and effective use. Policy must address bandwidth limitations, teacher digital literacy, and equitable device access across schools. Embedding digital pedagogy into curricula and monitoring service quality are critical for maximizing the transformative role of internet connectivity.

Indicator 4.a.1(c): Proportion of schools with computers: Achieving full coverage of computers in schools is a strong step, but policymakers should now prioritize equitable distribution, maintenance, and meaningful pedagogical integration. Investment in digital literacy for teachers, development of localized e-learning content, and periodic infrastructure upgrades will ensure that technology access translates into improved learning outcomes.

Indicator 4.a.1(d): Proportion of schools with access to adapted infrastructure and materials for students with disabilities: Early achievement of 100% accessibility in schools by 2021/22 is a major policy success, reflecting strong investment in inclusive education. The policy implication now shifts from expanding coverage to ensuring quality, functionality, and effective use of facilities and materials by students with disabilities. Future priorities should include continuous

teacher training, integrating inclusive pedagogy, strengthening monitoring systems, and engaging families and disability organizations to ensure meaningful participation. Sustaining this achievement will require consistent resource allocation and mechanisms to maintain infrastructure and assistive technologies.

Indicator 4.a.1(e1): Proportion of schools with access to basic drinking water: Reaching full coverage of basic drinking water in schools by 2023/24, well ahead of the 2030 target, underscores Addis Ababa's strong WASH commitments. However, policy must now emphasize sustainability ensuring that water sources remain functional, safe, and resilient against interruptions. Preventive maintenance systems, water quality monitoring, and integration of WASH education into curricula are critical next steps. This will help prevent backsliding, safeguard health, and institutionalize safe water access as part of a resilient and inclusive school environment.

Indicator 4.a.1(e2): Proportion of schools with access to single-sex basic sanitation facilities: Progress in reducing student-to-toilet ratios shows meaningful improvement, with primary and middle schools meeting the local target and secondary schools nearing compliance. However, pre-primary schools remain below standard and female students still face relatively higher ratios, highlighting persistent gender disparities. Policy actions should prioritize equitable investment in sanitation infrastructure, especially for girls and younger learners, alongside regular monitoring and maintenance. Embedding gender-sensitive WASH planning into school construction and budgeting is essential to close the sanitation gap, reduce absenteeism, and promote dignity and safety in schools.

Indicator 4.a.1(e3): Proportion of schools with access to basic handwashing facilities: Addis Ababa has surpassed its 2030 target ahead of time, with significant improvements

across all school levels. This progress reflects successful WASH investments and policies, but sustaining these gains requires ensuring functionality, equitable access, and hygiene behavior change. Policymakers should focus on long-term maintenance, consistent monitoring, and embedding hygiene

promotion into school health programs. Linking infrastructure provision with education on proper handwashing practices will maximize health benefits, reduce absenteeism, and strengthen resilience against disease outbreaks.

Case Box 2: Progress and Gaps in SDG 4 – Education in Addis Ababa

The VLR results for SDG 4 reveal excellent progress in Addis Ababa’s education sector, with strong achievements in infrastructure and digital access. Encouragingly, digital inclusion has improved substantially. The proportion of youth and adults with ICT skills increased to 100%, surpassing the 2030 target, while all schools now have access to internet and computers for pedagogical purposes. Similarly, access to inclusive infrastructure has seen remarkable progress, with schools providing adapted facilities for students with disabilities increasing from 50% to full coverage. Basic services such as drinking water have also reached universal access.

In terms of equity, the Gender Parity Index (GPI) at primary and middle levels has improved toward parity (1.03), aligning closely with the target. However, disparity persists at the secondary level, where GPI increased to 1.23, indicating a widening imbalance that requires corrective measures. Transition rates from primary to secondary education improved for both males (11.0%) and females (11.6%), though they remain below the 2030 target, highlighting the need to strengthen retention and progression.

Significant gains are also observed in school sanitation and hygiene facilities. Access to single-sex sanitation and handwashing facilities improved markedly across all education levels, in some cases exceeding targets, which contributes to a more conducive and inclusive learning environment.

3.3. SDG 6: Clean Water and Sanitation



3.3.1. Indicator 6.1.1: Proportion of population using safely managed drinking water services

Access to safely managed drinking water is of paramount importance for urban residents, as it safeguards public health by reducing waterborne diseases, supports productivity, and underpins sustainable urban development and overall quality of life (Pal et al., 2018). As

of December 2025, Addis Ababa’s drinking water demand stands at 1.1 million cubic meters per day, while the city’s existing production capacity is only 850,000 cubic meters, highlighting a significant supply-demand gap. As revealed in Figure 29,

between 2015 and 2024, the proportion of the population using safely managed drinking water services showed slow but steady improvement, rising from 51% in 2015/16 to 57% in 2023/24. Despite this incremental gain, the city remains far from achieving the

SDG target of universal access (100%) by 2030, reflecting persistent systemic challenges in water service delivery, including inadequate infrastructure, aging distribution networks, and rapidly increasing urban demand driven by population growth.

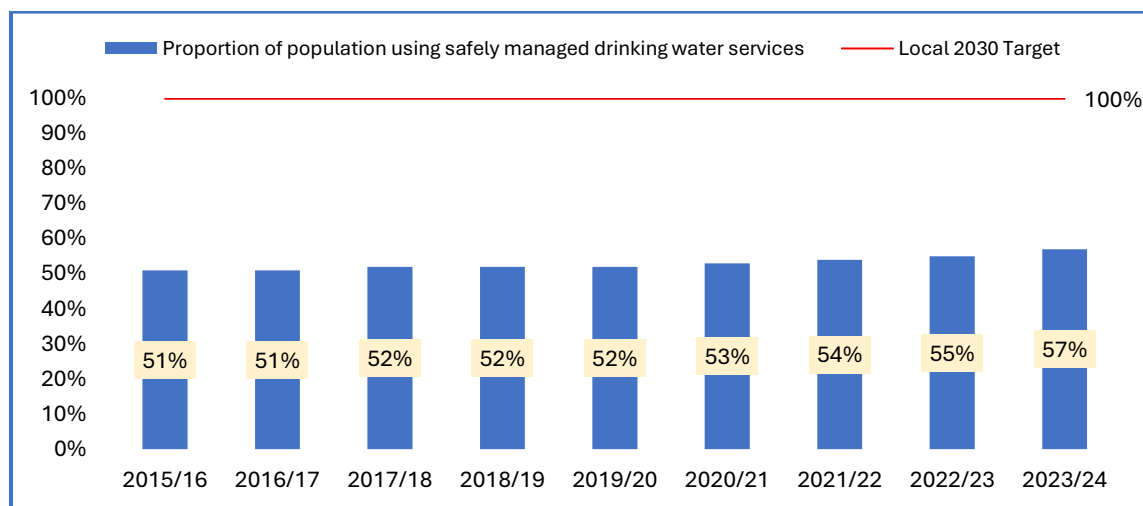


Figure 29: Proportion of population using safely managed drinking water services

Efforts to address these challenges are ongoing through major infrastructure projects. The Gerbi Drinking Water Dam, a long-delayed initiative, is now funded internally by the Addis Ababa City Administration after earlier funding issues with China Exim Bank and is preparing to supply the city's growing water demand with over 73,000 cubic meters per day. In addition, two large-scale dam projects in Oromia regional state are in the pipeline: one near Chanco with a planned production capacity of 500,000 cubic meters per day, for which detailed design work has been completed but requires financial support; and another located 90 km from Addis Ababa with a capacity of 600,000 cubic meters per day. These projects represent critical

interventions to bridge the gap between water supply and demand, but timely funding, construction, and operationalization remain essential to ensure sustainable access.

Although Addis Ababa has made some progress in expanding access to safely managed drinking water, the pace of improvement is insufficient relative to the city's rapid population growth. Achieving equitable, safe, and sustainable water access will require a strategic shift toward integrated water resource management, accelerated investment in water infrastructure, strengthened institutional capacity, and innovative service delivery models that prioritize underserved communities.

3.3.2. Indicator 6.2.1: Population Connected to Modern Sewage Network

Adequate sanitation services in urban areas are essential for protecting public health, preventing environmental pollution, and

ensuring sustainable urban living, as inadequate sanitation contributes to disease transmission, water contamination, and

reduced quality of life (Teixeira *et al.*, 2024). In Addis Ababa, effective sewerage disposal services currently cover about 83% of the city's population through a combination of truck-based sanitation systems and household connections to sewer networks. However, data reported under Indicator 6.2.1 focus exclusively on households that are directly connected to the modern sewerage network.

Within this framework, the proportion of the population using safely managed sanitation services increased gradually from a very low baseline of 16% in 2015/16, indicating substantial gaps in sanitation infrastructure, hygiene promotion, and wastewater management at the outset of the reporting period (Figure 30).

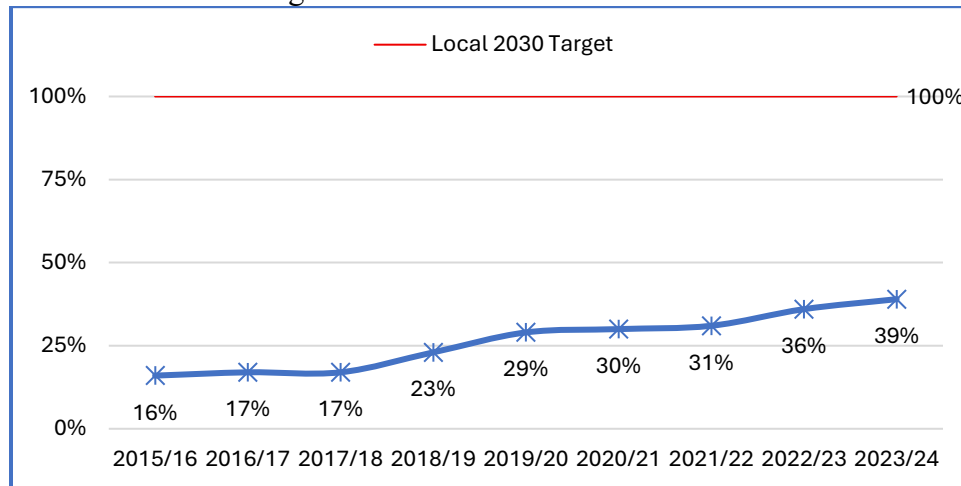


Figure 30: Population connected to modern sewage network

Incremental progress was observed in subsequent years, with coverage rising to 17% in both 2016/17 and 2017/18, followed by a more pronounced increase to 23% in 2018/19. This upward trend continued, reaching 29% in 2019/20, 30% in 2020/21, and 31% in 2021/22, before accelerating to 36% in 2022/23 and 39% in 2023/24. Despite a cumulative increase of 23 percentage points over nine years, Addis Ababa remains

significantly below the SDG target of universal access in terms of connecting households to the modern sewage network. The slow pace of progress reflects persistent structural constraints, including limited sewer coverage, the prevalence of informal settlements, insufficient investment in sanitation infrastructure, and weak enforcement of sanitation standards.



107 newly constructed public toilets across Addis Ababa city as part of the ongoing corridor development initiative

Ongoing and planned infrastructure investments are expected to play a critical role in addressing these challenges. The Koye Feche wastewater treatment plant, with a treatment capacity of approximately 30,000 m³ per day, is currently under construction and will contribute to expanding the city's wastewater treatment capacity once operational. In addition, the Eastern Catchment Wastewater Treatment Plant and sewer network project, financed under the World Bank supported urban water supply and sanitation program, is designed to treat

approximately 105,000 m³/day of wastewater and includes the construction of more than 158 km of sewer lines. Scheduled for completion by the end of 2027, this project represents a major step toward improving safely managed sanitation coverage. Nevertheless, closing the remaining 61% gap will require intensified efforts, including accelerated expansion of sewer networks, increased public and private investment, strengthened community engagement, and improved institutional capacity to ensure equitable and sustainable sanitation access across the city.

3.3.3. Indicator 6.2.1: Proportion of population using a hand-washing facility with soap and water

Between 2015 and 2024, Addis Ababa has made steady progress in increasing the proportion of its population with access to a hand-washing facility equipped with soap and water a critical hygiene measure for preventing communicable diseases. In

2015/16, 62% of the population had access to such facilities. Over the years, this percentage increased gradually, reaching 65% in 2016/17 and 66% in 2017/18. A slight but consistent rise continued with 69% in 2018/19 and 71% in 2019/20 (Figure 31).

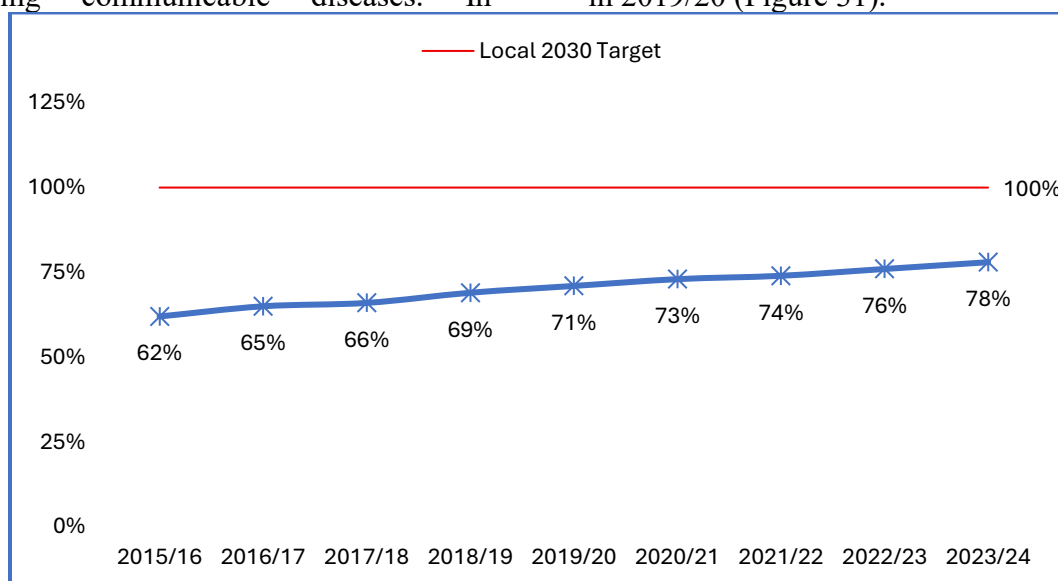
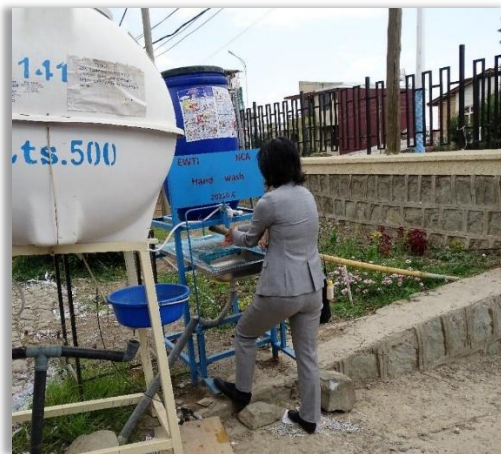


Figure 31: Proportion of population using a hand-washing facility with soap and water

The upward trend gained further momentum in the early 2020s, likely influenced by the COVID-19 pandemic, which brought heightened public awareness and policy attention to hygiene. In 2020/21, access rose to 73%, followed by 74% in 2021/22, 76% in 2022/23, and ultimately 78% in 2023/24. This reflects a 16-percentage point increase over the past nine years.



Public hand wash facilities

Despite the progress, Addis Ababa remains 22 percentage points short of the 100% target set for 2030. While the trend is encouraging, the current pace of improvement may not be sufficient to close the gap within the remaining years. Key barriers may include disparities in infrastructure across neighborhoods, especially in informal settlements, limited water availability, and challenges related to affordability and sustained behavior change.

To meet the SDG target by 2030, the city needs to accelerate efforts by prioritizing

investments in hygiene infrastructure, ensuring continuous water supply, integrating hygiene promotion into school and community programs, and engaging local stakeholders in scaling up low-cost handwashing technologies. Addis Ababa is on a positive trajectory in expanding access to hand-washing facilities with soap and water. However, achieving universal coverage by 2030 will require coordinated, multisectoral action and intensified policy implementation to reach underserved populations and institutionalize hygiene practices citywide.

3.3.4. Indicator 6.3.1: Proportion of Wastewater Safely Treated

Wastewater treatment in urban areas is crucial for safeguarding public health, protecting water resources from contamination, and promoting environmental sustainability, while also enabling water reuse and supporting resilient urban development (Ramm and Smol, 2024). The data on the proportion of wastewater safely treated in Addis Ababa from 2015/16 to 2023/24 shows a generally positive trend, reflecting consistent

improvements in urban sanitation and environmental management. As revealed in Figure 32, in 2015/16, only 64% of the city's wastewater was being safely treated. Over the following years, Addis Ababa demonstrated steady progress, with treatment coverage reaching 71% in 2016/17 and 76% in 2017/18. This upward trend continued with a notable increase to 79% in 2018/19.

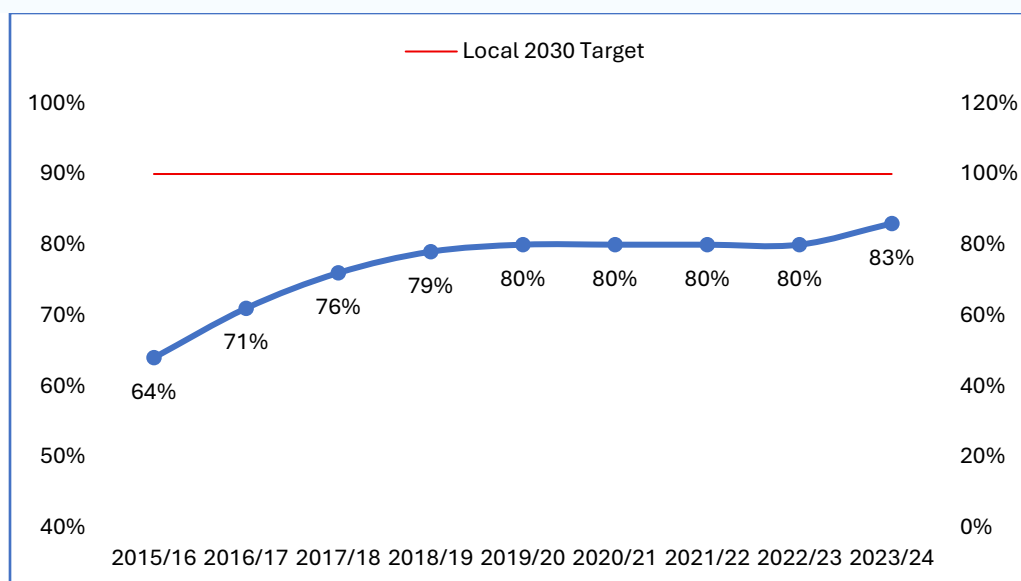


Figure 32: Proportion of wastewater safely treated



Bole Arabsa modern Sewage treatment plant with a capacity of 30 million liters per day (Inaugurated in January 2025, by Mayor of Addis Ababa, HE Adanech Abiebie) Source: FMC

From 2019/20 to 2022/23, the proportion of safely treated wastewater plateaued at 80%, indicating that while initial gains were significant, improvements began to slow. This stagnation may reflect infrastructural or financial limitations, or challenges related to

Despite this progress, Addis Ababa remains 17 percentage points short of achieving its 100% target for safely treated wastewater by 2030. The current rate of improvement, especially the minimal change seen between

expanding treatment capacity beyond the central systems in place. Nonetheless, in 2023/24, a slight improvement was recorded, with the coverage rising to 83%, suggesting renewed efforts or system upgrades during the period.

2019/20 and 2022/23 implies that without a strategic acceleration of efforts, the city may fall short of meeting the Sustainable Development Goal (SDG) within the remaining timeframe.



Kaliti wastewater treatment plant (upgraded & modernized, treats up to 100,000 cubic meters per day, and repurposes water for irrigation)

To bridge this gap, Addis Ababa needs to invest in expanding and modernizing its wastewater treatment infrastructure, particularly in underserved and rapidly growing urban areas. Enhancing operational efficiency, enforcing wastewater management regulations, encouraging decentralized treatment solutions, and ensuring proper maintenance of existing facilities will also be critical.

3.3.5. Policy Implication and Practices for SDG-6 Indicators

Indicator 6.1.1: Proportion of population using safely managed drinking water services: The slow progress toward universal access to safely managed drinking water in Addis Ababa underscores the need for accelerated policy interventions and investment. To close the existing gap, the city must prioritize the expansion and rehabilitation of water infrastructure, strengthen integrated water resource management, and enhance service delivery

efficiency. Improving governance, promoting equitable access in informal settlements, and ensuring affordability through targeted subsidies or community-based management models will be crucial. Accelerated efforts are essential in the coming years to achieve the 2030 target and secure safe, reliable water for all residents.

Indicator 6.2.1(a): Proportion of population using safely managed sanitation services: Addis Ababa's gradual improvement in safely managed sanitation coverage reflects positive momentum but highlights the urgency for transformative action. Policy priorities should include scaling up sewer networks, promoting on-site sanitation technologies, and integrating solid and liquid waste management systems. Strengthening institutional coordination, mobilizing private sector participation, and increasing investment in sanitation infrastructure particularly in low-income and informal areas are vital. To meet the 2030 target, accelerated implementation of an

inclusive urban sanitation strategy is required, ensuring that sanitation access keeps pace

Indicator 6.2.1(b): Proportion of population using a hand-washing facility with soap and water: While Addis Ababa has made commendable progress in expanding access to handwashing facilities, achieving universal coverage will require intensified multi-sectoral action. Policy and practice should focus on scaling up low-cost hygiene technologies, ensuring continuous water

Indicator 6.3.1: Proportion of wastewater safely treated: Despite progress in wastewater treatment coverage, Addis Ababa's pace of improvement remains insufficient to achieve 100% by 2030. Policy efforts should focus on expanding and upgrading treatment plants, adopting decentralized and nature-based treatment systems, and enforcing stricter wastewater

with rapid urbanization and population growth.

availability, and embedding hygiene education into schools and community health programs. Strengthening behavioral change initiatives and public-private partnerships for infrastructure provision will also be essential. Accelerating these efforts in the remaining years to 2030 is critical to ensure equitable access and to sustain the health and social gains achieved so far.

discharge regulations. Enhancing technical capacity, securing sustainable financing, and integrating wastewater reuse in urban planning will strengthen environmental resilience and water security. Accelerated infrastructure investment and operational efficiency improvements are essential to ensure safe wastewater management and protect public health and ecosystems.

Case Box 3: Progress and Gaps in SDG 6 – Water and Sanitation in Addis Ababa

The VLR results for SDG 6 demonstrate encouraging progress in expanding access to water, sanitation, and hygiene (WASH) services in Addis Ababa between 2015/16 and 2023/24. All reported indicators show positive trends, reflecting sustained investments in urban service delivery and environmental health systems.

Access to safely managed drinking water improved from 51% to 57%, representing an 11.8% increase. While this indicates steady progress, coverage remains far from the universal access target of 100%, highlighting persistent service gaps and the need for accelerated infrastructure expansion. More substantial gains are observed in sanitation services, particularly in the population connected to the modern sewage network, which increased significantly from 16% to 39% a 143.8% improvement. Despite this progress, the majority of the population remains unconnected, pointing to ongoing challenges in scaling urban sanitation systems.

Hygiene practices have also improved notably, with access to handwashing facilities with soap and water rising from 62% to 78%. This 25.8% increase reflects growing awareness and improved household-level services, though universal access is yet to be achieved. Similarly, the proportion of wastewater safely treated increased from 64% to 83%, approaching the 2030 target of 90%, and indicating strong progress in environmental management and pollution control.

3.4. SDG 8: Decent Work and Economic Growth



3.4.1. Indicator 8.1.1: Annual growth rate of real GCP per capita

As revealed in Figure 33, the GCP per capita growth trajectory of Addis Ababa from 2016/17 to 2023/24 reflects the interaction between macroeconomic performance and socio-political conditions. The decline in growth from 6.87% in 2016/17 to 4.53% in 2017/18 can be largely attributed to heightened political instability during that period, which adversely affected investment confidence, productivity, and overall economic activity in the capital. The subsequent recovery and upward trend

observed between 2017/18 and 2019/20, culminating in a peak growth rate of 9.66% in 2019/20, coincides with an improved political environment and relative stabilization, which encouraged public and private investment, expanded service-sector activity, and enhanced urban economic productivity. As the national administrative and commercial hub, Addis Ababa benefited disproportionately from this improved political and policy climate, translating into strong gains in GCP per capita.

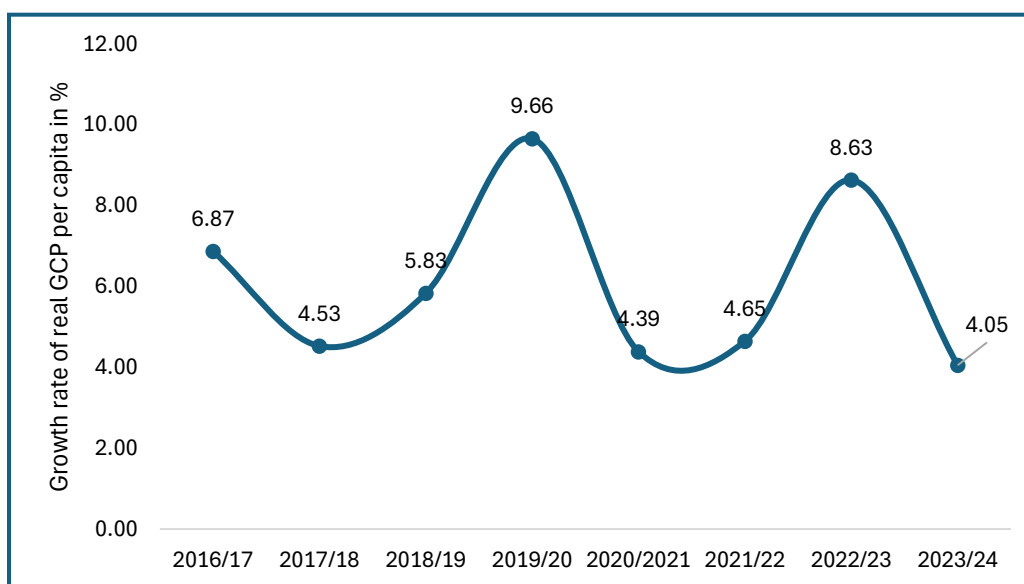


Figure 33: Annual growth rate of real GCP per capita

The sharp decline in growth from 2019/20 to 2020/21 is primarily explained by the COVID-19 pandemic, which disrupted economic activity through mobility restrictions, business closures, and reduced demand, particularly in service-oriented urban sectors. Although modest recovery was observed in 2021/22 and a strong rebound in 2022/23 (8.63%) due to post-pandemic normalization and the resumption of delayed investments, this momentum was not sustained into 2023/24, when growth declined to 4.05%. The recent deceleration is largely

associated with foreign exchange shortage and may be with internal conflicts, particularly in the Oromia and Amhara regions, which constrained economic linkages, trade flows, and investment confidence in Addis Ababa. Additionally, the gradual depreciation of the local currency likely contributed to the slowdown by increasing input costs, reducing real incomes, and dampening purchasing power, thereby limiting per capita economic gains despite ongoing urban economic activity.

3.4.2. Indicator 8.2.1: Annual growth rate of real GCP per employed person

Real GCP per employed person means the average economic output (value of goods and services) produced by each employed individual in a city, adjusted for inflation. In simple terms, it shows how productive each worker is in contributing to the economy. The annual growth rate of real GCP per employed person indicates changes in labor productivity, reflecting how efficiently labor contributes to economic output. An increasing trend signals economic transformation and improved efficiency, while a declining trend suggests stagnation or reduced productivity (Priopae, 2017; Valero and Van Reenen, 2024).

As shown in Figure 34, the annual growth rate of real GCP per employed person in Addis

Ababa from 2016/17 to 2023/24 demonstrates pronounced volatility, reflecting changes in labor productivity, employment structure, and macroeconomic shocks. Moderate growth in 2016/17 (4.56%) declined in 2017/18 (2.46%), likely due to political uncertainty and investment slowdowns that constrained productivity gains. The strong rebound in 2018/19 (6.54%) and the sharp increase in 2019/20 (10.39%) indicate improvements in economic efficiency, driven by enhanced urban service-sector performance, infrastructure expansion, and productivity gains among employed workers. These years suggest a period in which output growth outpaced employment growth, resulting in rising GCP per employed person.

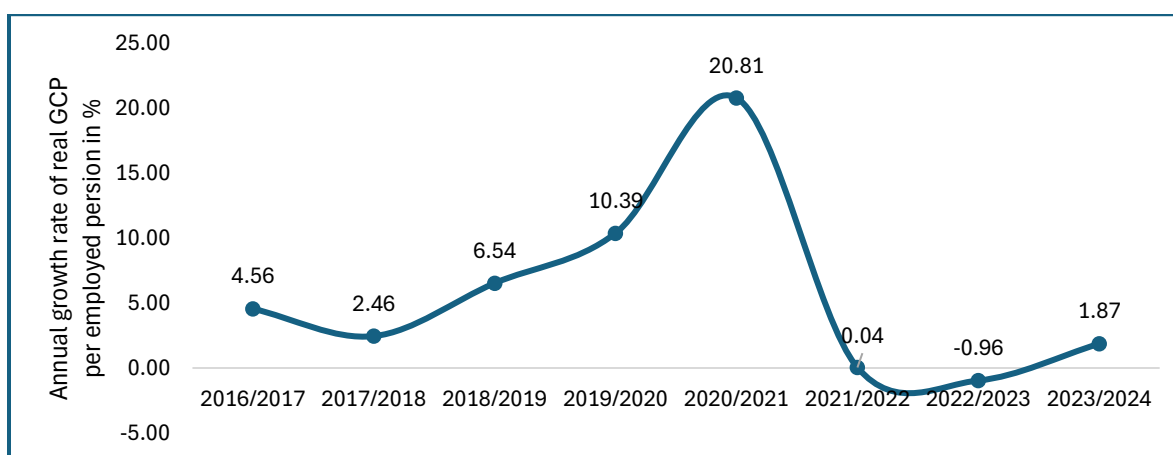


Figure 34: Annual growth rate of real GCP per employed person

The exceptionally high growth rate recorded in 2020/21 (20.81%) is primarily attributable to the COVID-19 pandemic, which led to significant employment losses particularly in the private and informal sectors while overall economic output did not decline proportionally. This contraction in the number of employed persons mechanically inflated GCP per employed person, reflecting labor shedding rather than genuine productivity improvements. The near stagnation in 2021/22

(0.04%) and the contraction in 2022/23 (−0.96%) indicate post-pandemic labor market adjustments, re-entry of workers, and productivity pressures amid economic uncertainty. The modest recovery observed in 2023/24 (1.87%) suggests early signs of stabilization, as employment gradually expands and productivity begins to recover, although structural constraints and lingering macroeconomic challenges continue to limit sustained growth in output per worker.

3.4.3. Indicator 8.3.1: Proportion of informal employment in non-agriculture employment

As shown in Figure 35, the trend in the proportion of informal employment in non-agricultural sectors in Addis Ababa from 2015/16 to 2022/23 highlights a fluctuating but overall declining pattern, indicating some progress toward formalizing the urban labor

market. Informal employment, which includes jobs lacking social protection, formal contracts, and labor rights, is a critical barrier to achieving decent work and inclusive economic growth.

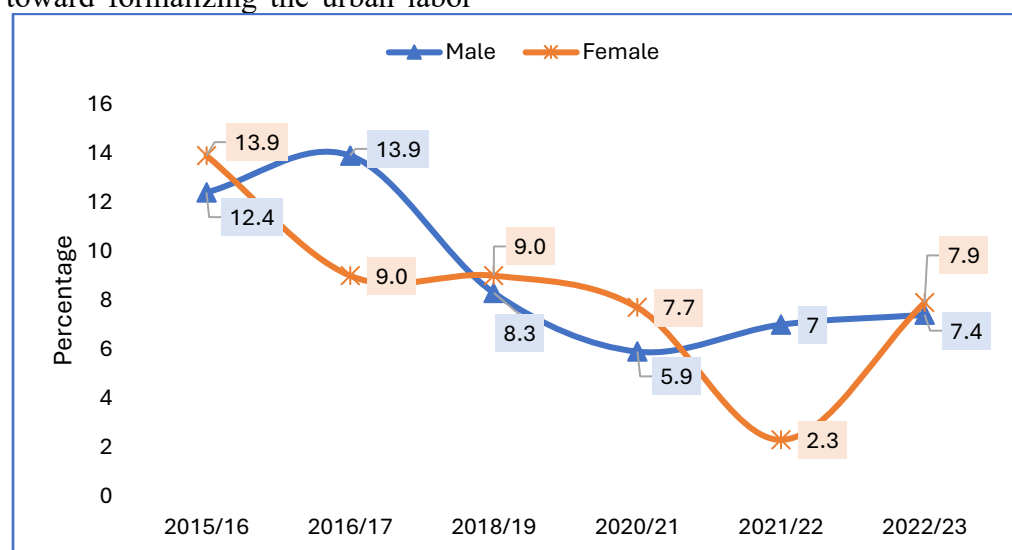


Figure 35: Proportion of informal employment in non-agriculture employment, by sex

In 2015/16, the proportion of informal employment stood at 12.4% for males and 13.9% for females, showing a slightly higher rate of informality among women. This pattern may be associated with the relatively large share of female internal migrants and could also point to occupational segregation, characterized by women's concentration in lower-wage and less stable employment.

The following year, 2016/17, witnessed a rise in male informal employment to 13.9%, while female informality dropped significantly to 9.0%. This sharp decrease in female informal employment may suggest targeted interventions or increased formal job opportunities for women, though the spike for males could indicate a rise in informal sector absorption due to labor market shocks or migration trends.



Market shades constructed in Arat Kilo, Yeka and Kasanchis for the youth and vulnerable women

Data for 2017/18 is not available, but by 2018/19, both male and female informal employment rates dropped to 8.3% and 9.0% respectively. This decline may be associated with expanding formal job creation through infrastructure, service-sector development, and government initiatives to formalize small and micro enterprises. In 2020/21, the share of informal employment further declined to 5.9% for males and 7.7% for females. This downward trend may reflect ongoing urban job formalization efforts. A slight rise in male informal employment to 7.0% was observed in 2021/22, whereas female informality dropped dramatically to 2.3%, the lowest point in the period under review.

In 2022/23, the rates increased slightly for both sexes 7.4% for males and 7.9% for females indicating a partial rebound of informal employment, possibly as a coping mechanism in response to urban cost of living pressures or limitations in formal job creation.

Generally, the trend indicates a general movement toward reduced informality in Addis Ababa's non-agricultural employment sectors, with some gender-specific

fluctuations. Continued efforts to support formal job creation, strengthen labor regulations, and promote inclusive economic policies will be essential to further reduce informality, enhance job quality, and promote equitable urban development.

3.4.4. Indicator 8.5.2: Unemployment rate

The unemployment rate in Addis Ababa from 2015/16 to 2022/23 reveals a persistently high rate of joblessness, particularly among women, reflecting continued challenges in inclusive labor market access, gender disparities, and structural economic issues. The data shows notable gender differences, with female unemployment consistently exceeding male unemployment throughout the period under review.

As indicated in Figure 36, in 2015/16, the unemployment rate stood at 14.4% for males and a significantly higher 28.6% for females. The observed 14.2 percentage-point gender gap may reflect the substantial presence of female internal migrants as well as structural limitations in employment opportunities for women.

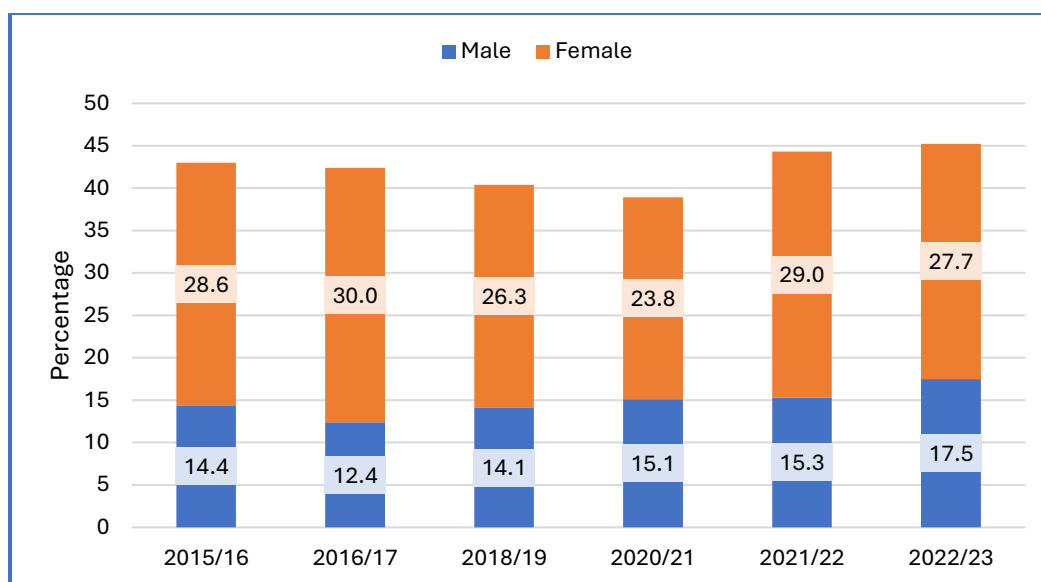


Figure 36: Unemployment rate, by sex

In 2016/17, male unemployment declined to 12.4%, showing a marginal improvement, while female unemployment increased slightly to 30.0%, suggesting growing pressure on the female labor force or a mismatch between women's skills and available jobs.

The next available data point for 2018/19 shows a slight rise in male unemployment to 14.1%, while female unemployment dropped to 26.3%. This narrowing gender gap may reflect marginal gains in employment access for women or increased public sector recruitment and gender-focused labor programs.

In 2020/21, both male and female unemployment rates remained high, with males at 15.1% and females at 23.8%. Despite improvements in female unemployment relative to previous years, the sustained high male unemployment rate may suggest limited employment expansion or persistent economic pressures following the COVID-19 pandemic. In contrast, the declining female unemployment trend may be associated with a reduced inflow of female internal migrants due to the COVID 19 pandemic.

In 2021/22, the male unemployment rate slightly increased to 15.3%, and the female rate surged again to 29.0%. This rebound in female unemployment might reflect a post-pandemic economic restructuring where women, especially those in informal or service sectors, were disproportionately affected by job losses or limited reentry into the workforce.

By 2022/23, male unemployment rose to 17.5%, while female unemployment slightly declined to 27.7%. Despite the minor decrease for women, both rates remain concerningly high and above national targets, suggesting that job creation is not keeping pace with the growing labor force and that women, in particular, continue to face structural barriers to decent employment.

The unemployment trend in Addis Ababa reveals a labor market under strain, with persistent gender inequality. While some fluctuations reflect broader economic shifts, the overall trend underscores the urgent need for targeted employment policies, skills development, gender-inclusive economic planning, and support for youth and women to ensure equitable access to sustainable livelihoods.

3.4.5. Indicator 8.8.1: Frequency rates of fatal occupational injuries

The trend in frequency rates of fatal occupational injuries per 100,000 workers in Addis Ababa from 2015/16 to 2020/21 reveals significant fluctuations, highlighting ongoing occupational safety challenges across the city's labor sectors. Fatal occupational injuries are critical indicators of workplace safety standards, regulatory enforcement, and worker protection mechanisms. According to the data shown in Figure 37, in 2015/16, the frequency rate was recorded at 50 per 100,000

workers, serving as a baseline figure. However, this rate dramatically increased in 2016/17 to 102 per 100,000, more than doubling the previous year's figure. In the context of internal political instability and weakened regulatory focus, studies conducted during this period commonly pointed to gaps in safety awareness, inadequate use of PPE, limited experience, and unfavorable working conditions as contributing factors to increased workplace injuries (Mersha *et al.*, 2017).

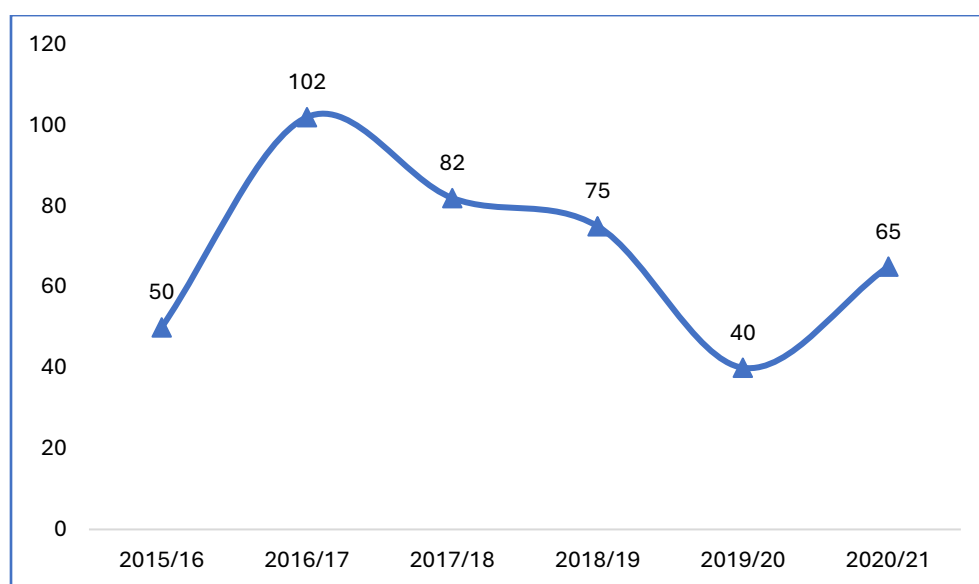


Figure 37: Frequency rates of fatal occupational injuries per 100,000 workers

Subsequent to this peak, the rate fell to 82 in 2017/18 and then to 75 in 2018/19, suggesting gradual progress that may be associated with increased occupational health and safety (OHS) awareness and targeted regulatory enforcement under conditions of comparatively better political stability. However, despite the decline, the figures still reflect a troublingly high rate of fatal workplace incidents.

The frequency rate dropped substantially to 40 in 2019/20, representing the lowest value over the reference period. This outcome may be

explained by reduced economic activity in construction and industrial sectors during the COVID-19 pandemic, resulting in fewer fatal occupational injuries. At the same time, the sustained downward trend from 2016/17 to 2019/20 may reflect the combined effects of stricter government inspections, improved safety training, and stronger labor association structures, which together helped mitigate workplace injury risks.

However, the trend reversed in 2020/21, rising again to 65 per 100,000 workers. This increase may reflect the resumption of economic

activities post-COVID and ongoing gaps in the implementation and enforcement of occupational safety policies. It also underscores the continued vulnerability of workers in sectors where protective measures remain inadequate. Overall, while there have been periods of progress, the frequency of fatal occupational injuries in Addis Ababa

remains a pressing concern. The data indicates the need for sustained and systemic interventions such as robust occupational safety regulation, workplace inspections, employer accountability, and worker training programs to ensure that every workplace upholds the right to a safe and healthy working environment.

3.4.6. Indicator 8.9.1: Tourism direct GCP as a proportion of total GCP

The tourism sector in Addis Ababa, as reflected by its direct contribution to the city's total GCP from 2015/16 to 2022/23, exhibits a general declining trend with modest fluctuations. As revealed in Figure 37, in 2015/16, tourism contributed 11.28% to the total GCP, marking the highest value within

the nine-year period. This peak likely reflects a period of relative political stability, increased international events hosted in the city, and improved tourism services, which positioned Addis Ababa as a growing regional travel and conference hub.

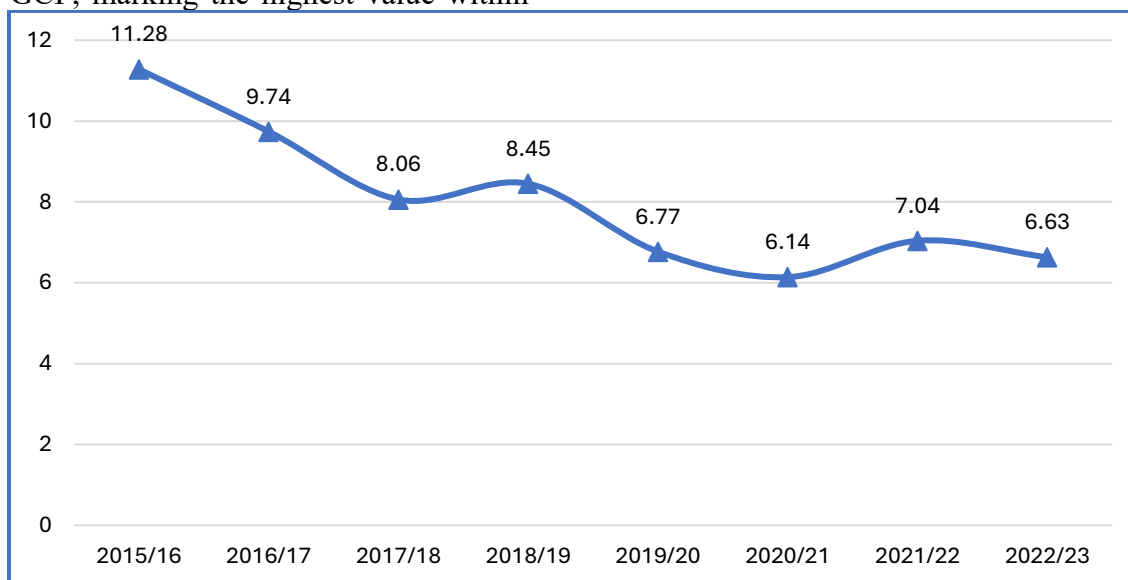


Figure 38: Tourism direct GCP as a proportion of total GCP and in growth rate

However, this momentum was not sustained. In the subsequent years, a consistent decline is observed: the contribution dropped to 9.74% in 2016/17, and further to 8.06% in 2017/18. While there was a slight rebound to 8.45% in 2018/19, the tourism sector's contribution

continued its overall downward trajectory, decreasing to 6.77% in 2019/20. This period coincides with the early global impacts of the COVID-19 pandemic, which severely affected global and domestic travel.



Entoto park (Addis Ababa)

The impact of the pandemic and the political instability in the country (Tigray war) is most evident in 2020/21, when the tourism sector's share of GCP declined further to 6.14%, reflecting travel restrictions, health concerns, and closures of hospitality businesses.

Although there was a slight recovery to 7.04% in 2021/22, followed by a dip to 6.63% in 2022/23, the sector remained below pre-2018 levels, indicating that recovery has been slow and uneven.



Unity Park (Addis Ababa)

Tourist arrivals decreased from 816,959 in 2015/16, to 762,731 in 2016/17. A more pronounced reduction was observed in 2017/18, when inflows fell to 643,242, likely influenced by internal political instability and security concerns during this period. The sector experienced a sharp contraction in 2020/21, with arrivals dropping to 123,489 as a result of the COVID-19 pandemic and associated travel restrictions. However, a

strong rebound followed, with tourist inflows rising to 432,476 in 2021/22 and further to 622,702 in 2022/23. By 2023/24, foreign tourist arrivals had surpassed pre-pandemic levels, reaching 861,126, indicating a robust recovery supported by the resumption of international travel, improved stability, and renewed confidence in Addis Ababa as a regional diplomatic and tourism hub.



Friendship Park (Addis Ababa)

3.4.7. Indicator 8.9.2: Proportion of jobs in sustainable tourism industries out of total tourism jobs

The trend in the proportion of jobs in sustainable tourism industries relative to total tourism employment in Addis Ababa from 2015/16 to 2022/23 presents a fluctuating but generally low trajectory. As shown in Figure 39, in 2015/16, the share of jobs in sustainable tourism stood at 2.74%, reflecting the early-

stage integration of sustainability principles in the city's tourism sector. The proportion increased to its peak of 4.08% in 2016/17, possibly indicating early government or private sector initiatives toward eco-friendly practices or capacity-building in green tourism operations.

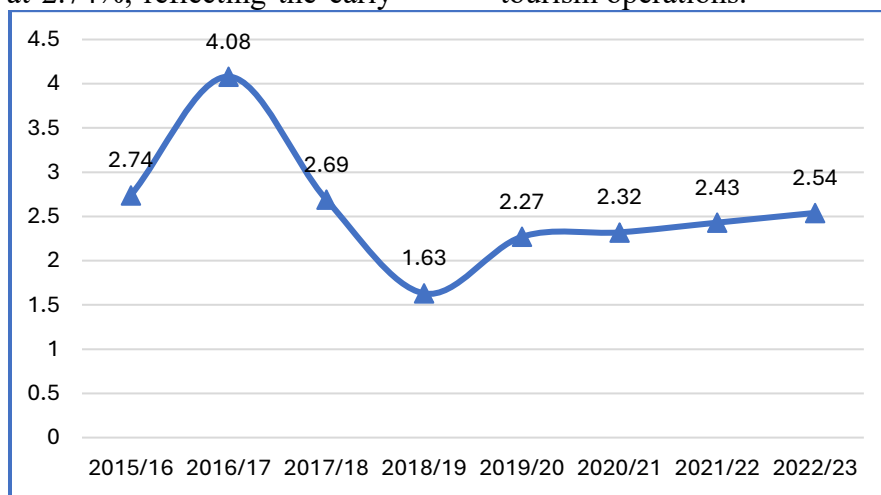


Figure 39: Proportion of jobs in sustainable tourism industries out of total tourism jobs

However, this momentum was not sustained, as a sharp decline occurred in 2017/18 to 2.69%, followed by a significant drop to 1.63% in 2018/19. Political instability and the COVID-19 pandemic are potential factors that have significantly impacted the tourism industry as well as jobs in sustainable tourism industry.

From 2019/20 onward, the proportion began a modest and steady recovery rising from 2.27% in 2019/20 to 2.32% in 2020/21, and continuing upward to 2.54% in 2022/23. This slow growth likely reflects renewed efforts to incorporate sustainability in the tourism industry, possibly as part of recovery and resilience-building strategies post-COVID-19. The rise could also be attributed to increasing global awareness and local

initiatives geared toward sustainable tourism development. Following the COVID-19 pandemic in 2019, there was a shift in tourism policies and business practices towards more sustainable and resilient models to reduce

vulnerability to future crises. Ethiopian government increasingly invested in eco-tourism and green infrastructure, which led to a gradual rise in sustainable tourism.



The Wanchi-Dandi Eco-Tourism Village lies 132 km away from Addis Ababa



Gorgora Eco-Resort, located on the shores of Lake Tana

Despite these positive movements, between the years 2015/16 to 2022/23 the overall share of sustainable tourism jobs remains low, consistently below 5%. Although recent data is not included in this report,



Beynouna Village Resort, located 200 km from Addis Ababa



the significant growth of ecotourism investments in Ethiopia over the past three years, along with improved political stability, has contributed to an increase in tourist arrivals positively influencing the proportion of jobs in sustainable tourism industries.

3.4.8. Indicator 8.10.1: Number of commercial bank branches per 100,000 adults

The trend in the number of commercial bank branches per 100,000 adults in Addis Ababa between 2015/16 and 2023/24 reflects significant growth in access to formal financial services, with a notable expansion in banking infrastructure across the city. As revealed in Figure 40, in 2015/16, there were 54.1 bank branches per 100,000 adults, marking a relatively modest level of coverage. However, this figure steadily increased in the subsequent years, indicating progressive

efforts to improve financial inclusion and accessibility.

By 2016/17, the number rose to 63.66 and continued to climb consistently reaching 71.75 in 2017/18 and 81.24 in 2018/19. This upward trend suggests enhanced efforts by both government and private banking institutions to broaden the financial footprint within urban settings, likely in response to increasing demand for banking services and national financial sector reform.

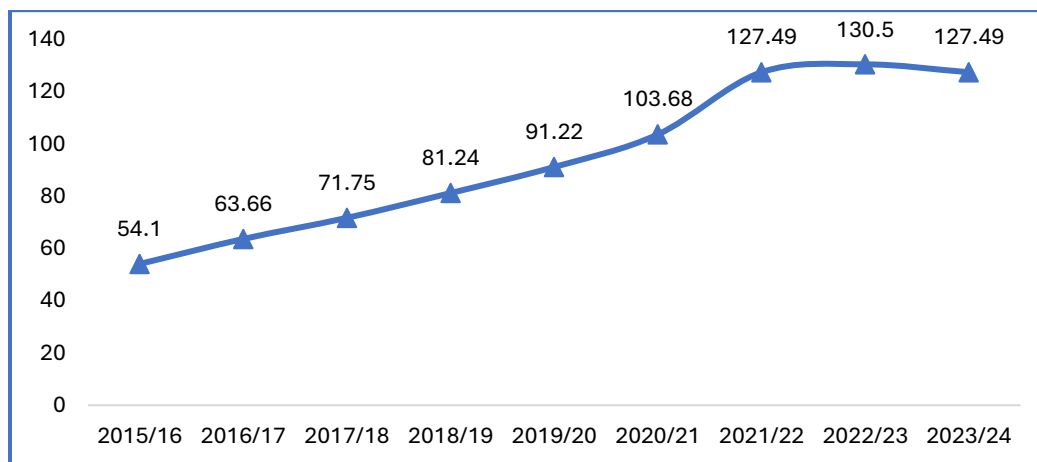


Figure 40: Number of commercial bank branches per 100,000 adults

A sharper increase occurred between 2019/20 and 2021/22, where the number of bank branches per 100,000 adults grew from 91.22 to 127.49. This period coincides with the introduction of more liberal financial policies, increased digital financial literacy, and population growth, especially among the working-age demographic. The slight increase to 130.5 in 2022/23 indicates a peak in expansion efforts, although the return to 127.49 in 2023/24 suggests a plateauing effect, possibly due to market saturation or a shift in focus toward digital banking services over physical infrastructure.

Generally, the growth trajectory in commercial bank branches demonstrates a strong commitment to improving access to financial services in Addis Ababa, aligning with Sustainable Development Goal (SDG) 8.10 to strengthen the capacity of domestic financial institutions. However, the slight decline in the most recent year signals the need for a balanced approach that integrates physical banking services with robust digital financial service platforms, especially for underserved or emerging segments of the population.

3.4.9. Policy Implication and Practices for SDG-8 Indicators

Indicator 8.1.1: Annual Growth Rate of Real GCP per Capita

The fluctuations in Addis Ababa's GCP per capita growth from 2016/17 to 2023/24 highlight the sensitivity of urban economic performance to political stability, macroeconomic shocks, and external crises such as the COVID-19 pandemic. Policy measures should, therefore, prioritize sustainable political stability, strengthen investment confidence, and diversify the urban economy to reduce vulnerability to shocks. Practically, public and private actors need to improve business climate practices, invest in infrastructure and high-value sectors, and establish mechanisms for early detection of economic disruptions to ensure that per capita gains are maintained and translated into broad-based improvements in living standards.

Indicator 8.2.1: Annual Growth Rate of Real GCP per Employed Person

The pronounced volatility in real GCP per employed person indicates that labor productivity in Addis Ababa is highly influenced by employment shifts, macroeconomic conditions, and sectoral performance. Policies should focus on enhancing workforce skills, supporting technology adoption, and encouraging structural transformation toward higher-productivity sectors, while ensuring employment stability. In practice, efforts should target workforce capacity building, effective labor allocation, and post-crisis reintegration of displaced workers, so that productivity growth reflects genuine efficiency improvements and contributes to sustained economic transformation rather than temporary gains driven by labor shedding.

Indicator 8.3.1: Proportion of Informal Employment in Non-Agriculture Employment: The declining proportion of

informal employment in Addis Ababa indicates progress toward a more formalized urban labor market, though gender gaps and fluctuations remain. Policies should prioritize the formalization of micro and small enterprises through simplified registration, access to finance, and social protection schemes. Strengthening labor regulation enforcement, promoting women's entrepreneurship, and expanding decent job creation in high-value sectors will help consolidate these gains. Integrating informality reduction into broader economic strategies is essential for enhancing job quality, productivity, and social equity.

Indicator 8.5.2: Unemployment Rate: The persistently high unemployment rate, particularly among women, underscores structural weaknesses in Addis Ababa's labor market. Policy interventions should target job creation through industrial diversification, investment in labor-intensive sectors, and urban entrepreneurship programs. Expanding access to education, skills training, and childcare services will improve women's labor participation and reduce gender disparities. A coordinated employment strategy linking public investment, private sector growth, and targeted youth employment programs is essential to achieve inclusive and sustained reductions in unemployment.

Indicator 8.8.1: Frequency Rates of Fatal Occupational Injuries: The fluctuating rates of fatal occupational injuries in Addis Ababa reveal ongoing gaps in occupational health and safety (OHS) enforcement. Strengthening institutional capacity for workplace inspection, improving safety training programs, and mandating compliance with OHS standards across all sectors are vital. Policies should also encourage employer accountability, expand social protection mechanisms, and integrate OHS into national labor frameworks. A culture of safety, supported by consistent monitoring and public awareness, is necessary to reduce workplace

fatalities and ensure decent and secure working environments.

Indicator 8.9.1: Tourism Direct GDP as a Proportion of Total GDP: The declining contribution of tourism to Addis Ababa's GDP highlights the sector's vulnerability to political instability and global crises. Revitalizing tourism requires strategic policy action to diversify tourism products, promote sustainable and cultural tourism, and strengthen destination marketing. Investment in infrastructure, digital tourism platforms, and safety assurance will be key to attracting both domestic and international visitors.

business models can expand sustainable employment opportunities and enhance tourism resilience. Strengthening collaboration among government, private sector, and international partners will be critical to transitioning toward a more inclusive and sustainable tourism economy.

Indicator 8.10.1: Number of Commercial Bank Branches per 100,000 Adults: The rapid expansion of commercial bank branches reflects significant progress in financial inclusion; however, the recent plateau

Building resilience within the tourism sector through public-private partnerships and regional collaboration can stimulate employment and foreign exchange earnings, supporting broader economic growth.

Indicator 8.9.2: Proportion of Jobs in Sustainable Tourism Industries: The persistently low share of sustainable tourism jobs underscores the need to mainstream sustainability into Addis Ababa's tourism policies and business practices. Policymakers should incentivize tourism initiatives and invest in capacity-building. Encouraging local community participation and sustainable

suggests the need to complement physical expansion with digital financial innovation. Policies should promote fintech adoption, mobile banking, and financial literacy programs to reach underserved populations. Encouraging inclusive financial products for women, youth, and small enterprises will deepen financial participation and stimulate local economic activity. Strengthening regulatory frameworks and digital infrastructure will ensure that Addis Ababa's financial sector remains resilient, inclusive, and adaptive to emerging trends.

Case Box 4: Progress and Gaps in SDG 8 – Decent Work and Economic Growth

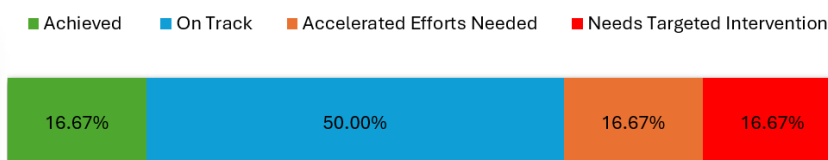
Over the review period, key economic growth indicators have declined markedly. The annual growth rate of real Gross City Product (GCP) per capita fell by 41.05%, while growth per employed person dropped even more sharply by 58.99%, indicating weakening productivity and slower economic expansion.

Labor market outcomes present uneven picture. While the proportion of informal employment in non-agricultural sectors decreased substantially for both males (-40.32%) and females (-43.17%), reflecting progress toward formalization, unemployment trends are concerning. Male unemployment increased by 21.53%, and although female unemployment slightly declined (-3.15%), it remains significantly higher than that of males, highlighting persistent gender disparities in the labor market.

Workplace safety has also deteriorated, with fatal occupational injuries rising by 30%, signaling gaps in enforcement of labor standards and occupational health measures. In the tourism sector, both its contribution to GCP (-41.22%) and the share of sustainable tourism jobs (-7.30%) have declined, suggesting reduced sectoral performance and limited progress toward sustainability targets.

On a positive note, access to financial services has improved significantly, with the number of commercial bank branches per 100,000 adults increasing by 135.66%, demonstrating strong advancement in financial inclusion.

3.5. SDG 9: Industry, Innovation, and Infrastructure



3.5.1. Indicator 9.1.2: Number of passengers transported by vehicles

The number of passengers transported by vehicles in Addis Ababa has shown a steady upward trend between 2015/16 and 2023/24. As revealed in Figure 41, in 2015/16, the volume stood at 2.18 million passengers, and by 2023/24 it had reached 3.3 million passengers, reflecting gradual but consistent growth. This represents an overall increase of 1.12 million passengers within nine years. Despite the progress, the recorded figures remain below the target of 3.64 million passengers, indicating that the city's transportation system is still not meeting the

desired service capacity. The annual growth, though positive, highlights a gap that needs to be addressed through improved public transport service provision.

The increase in passenger numbers can largely be attributed to the rapid urbanization and socio-economic development of Addis Ababa, which has increased the demand for mobility. However, the city's transport service is predominantly road-based and is heavily reliant on Mini Bus Taxis, which account for about 80% of trips (Source: Author, Year).

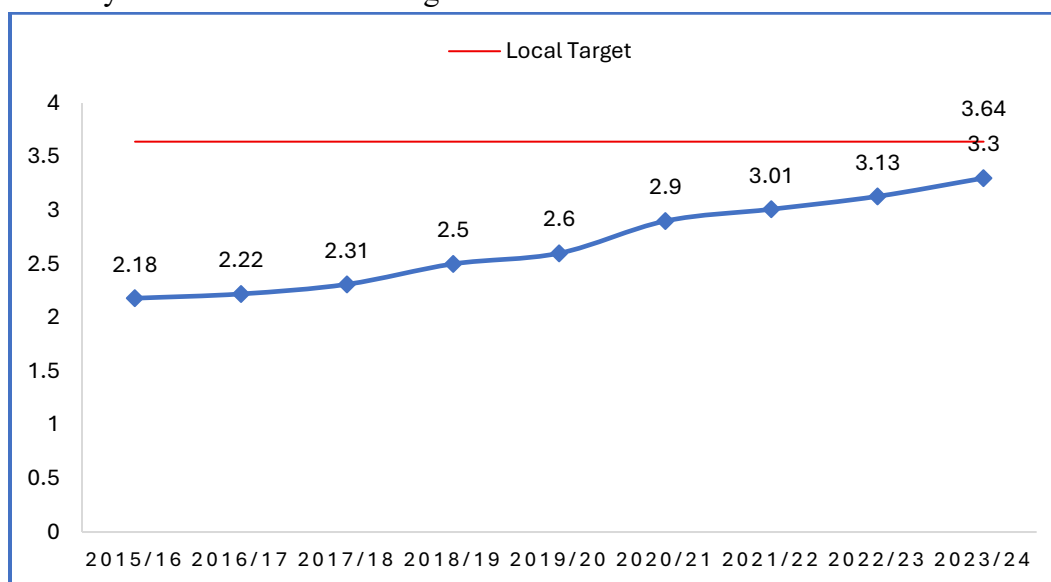


Figure 41: Number of passengers (in millions) transported by vehicles

This dependency has created significant challenges, including road congestion, high pollution levels, and inefficient service delivery. The limited capacity of Anbassa, Sheger City Bus, and Higer Midis Bus services has further widened the gap between transport demand and supply, which in turn has significantly contributed to the rising achievement in passenger numbers.



Addis Ababa's long transport queue (Source: Addis Fortune; Amberbir, 2020)

The mismatch between demand and supply is evident in service quality indicators such as congestion, where average vehicle speeds during peak hours are as low as 10 km/h, and long waiting times averaging 14 minutes for mass transportation users. Furthermore, only 36% of passengers are served by mass transport modes, highlighting the limited role of high-capacity systems in addressing urban mobility challenges. This situation not only undermines efficiency but also affects the socio-economic development of the city, as time lost in traffic and transport delays reduces productivity. To bridge the gap towards the target of 3.64 million passengers, Addis Ababa must strengthen its public transport sector through investment in mass transit, expansion of bus services, and integrated transport planning that reduces reliance on minibuses and alleviates congestion.

3.5.2. Indicator 9.2.1: Manufacturing value added as a proportion of GDP and per capita

The trend of Manufacturing Value Added (MVA) as a proportion of GDP and per capita in Addis Ababa between 2015/16 and 2023/24 reveals significant fluctuations rather than a stable growth trajectory. As shown in Figure 42, in 2015/16, the share stood at 15.38%, which positioned the city relatively close to its

2030 target of 17.5%. However, the subsequent years exhibited a sharp decline, falling to 14% in 2016/17 and further dropping to a low of 8.40% in 2017/18. This period indicates challenges in sustaining industrial output like political instability factors affecting productivity.

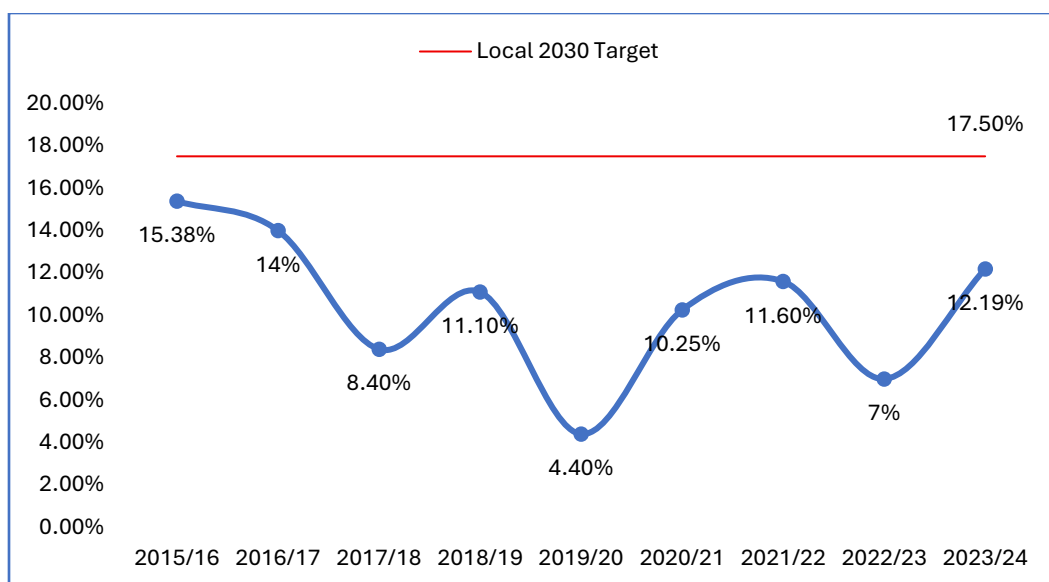


Figure 42: Manufacturing value added as a proportion of GDP and per capita

A rebound occurred in 2018/19, when MVA reached 11.10%. This increasing trend, however, proved unsustainable, as the following year (2019/20) registered the lowest value in the decade at 4.40%. The dramatic fall reflects vulnerabilities in the manufacturing sector, which may have been influenced by economic disruptions, supply chain bottlenecks, political instability and the COVID-19 pandemic. Although partial recovery was observed in 2020/21 (10.25%) and 2021/22 (11.60%), the indicator again dipped to 7% in 2022/23, before rising modestly to 12.19% in 2023/24.



Kilinto industrial park

The data shows a volatile and inconsistent pattern of manufacturing growth, with the indicator rarely approaching or maintaining the target threshold of 17.5%. Suggesting that structural weaknesses, policy gaps, and internal shocks have prevented sustainable progress. To align with the SDG framework, sustained efforts are needed to strengthen industrial capacity, improve value chain integration, and ensure policy stability that supports manufacturing competitiveness.



3.5.3. Indicator 9.2.2: Manufacturing employment as a proportion of total employment

Manufacturing employment represents the share of workers engaged in the

manufacturing sector compared to the total employed population. It indicates the relative

contribution of the manufacturing sector to overall employment in the economy. The share of manufacturing employment as a proportion of total employment in Addis Ababa from 2015/16 to 2023/24 demonstrates considerable variation, reflecting both structural constraints and temporary surges in industrial labor absorption. As revealed in Figure 43, in 2015/16, the share stood at 14%,

but it declined gradually to 13% in 2016/17 and 2017/18, and further to 12% in both 2018/19 and 2019/20. This sustained decline suggests that the manufacturing sector was not generating sufficient jobs relative to overall employment growth during this period, possibly due to limited industrial expansion or higher labor absorption in other sectors such as services and construction.

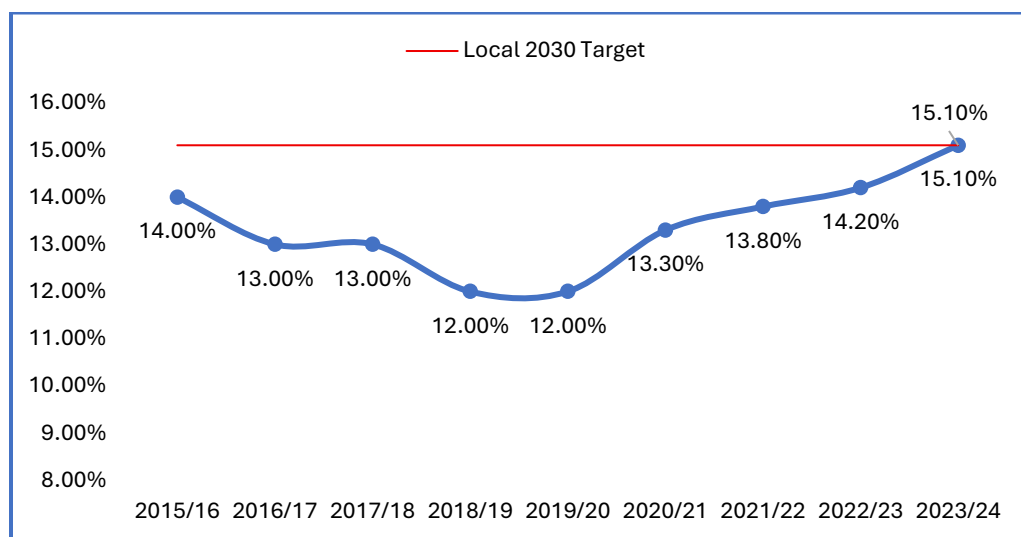


Figure 43: Manufacturing employment as a proportion of total employment

A turning point emerged in 2020/21, when the proportion rose to 12.3%, marking the beginning of a steady upward trajectory. This positive trend continued through 2023/24, with the share of manufacturing employment reaching 15.1% a level that not only represents a full recovery from the earlier decline but also meets the city's local target for 2030 well ahead of schedule.

The overall trend between 2015/16 and 2023/24 reflects both challenges and resilience in Addis Ababa's manufacturing sector. The decline up to 2019/20 highlights persistent structural barriers, limited industrial

capacity, and external shocks such as the COVID-19 pandemic, which disrupted production and employment. In contrast, the post-2019/20 recovery signals renewed momentum in industrial performance, driven by policy measures promoting industrial parks, investment incentives, and post-COVID-19 economic recovery strategies. Achieving the 15.1% target by 2023/24 suggests that the sector is not only rebounding but also accelerating its role in the city's employment structure, underscoring the potential for sustained industrialization and job creation in the years ahead.

3.5.4. Indicator 9.3.1: Proportion of small-scale in total industry value

The proportion of small-scale in total industry value shows the share of output or contribution generated by small-scale industries relative to the overall industrial sector. It reflects the role and significance of small-scale industries in shaping the structure

and performance of the total industrial economy. The proportion of small-scale industries in total industry value added (SDG indicator 9.3.1) in Addis Ababa between 2015/16 and 2023/24 shows a generally stagnant to declining trend, highlighting

challenges in strengthening the contribution of small-scale industries to overall industrial development. According to the data shown in Figure 44, in 2015/16, the share was 12.30%, increasing slightly to 12.70% in 2016/17 before stabilizing at 12.50% in 2017/18. This period reflects relatively steady performance, suggesting that small-scale industries

maintained a consistent, though modest, role in value addition. A marginal improvement occurred in 2018/19, reaching 13.10%, the highest value in the decade. This peak brought Addis Ababa closer to its 2030 target of 15.8%, showing that the sector had growth potential.

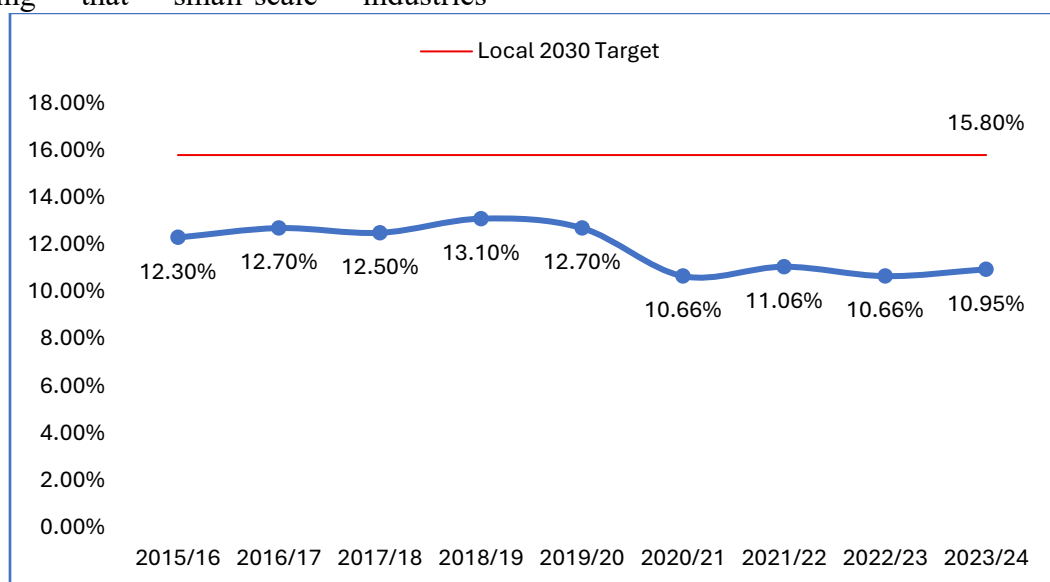


Figure 44: Proportion of small-scale industries in total industry value added

However, the momentum was not sustained. In 2019/20, the proportion slipped back to 12.70%, and a sharper decline followed in 2020/21, when the indicator dropped to 10.66%. This decline coincided with the COVID-19 period, which disproportionately affected small-scale enterprises due to market disruptions, limited access to finance, and supply chain breakdowns. Although there was a modest rebound in 2021/22 (11.06%), the following two years showed no significant progress, with 10.66% in 2022/23 and 10.95% in 2023/24, indicating persistent structural barriers to growth.

The trend underscores that small-scale industries in Addis Ababa are struggling to

expand their relative contribution to industrial value added. The indicator has remained consistently below the 2030 target of 15.8%, with the highest level recorded at 13.10% in 2018/19, still 2.7 percentage points short. Without substantial policy intervention, Addis Ababa risks falling short of the target. To reverse this trajectory, there is a need to strengthen access to finance, improve technology adoption, expand market linkages, and enhance the competitiveness of small-scale industries. Sustainable support mechanisms could help these enterprises move beyond subsistence-level operations and become stronger contributors to industrial transformation.

3.5.5. Indicator 9.3.2: Accessed loan or credit by small-scale industry

Linking small-scale industries with loans or lines of credit is vital for enhancing their access to capital, enabling business expansion and innovation. It strengthens their

competitiveness by improving productivity, technology adoption, and market participation. Moreover, it contributes to job creation, poverty reduction, and inclusive

economic growth by unlocking the potential of small enterprises (Meressa, 2020). The proportion of small-scale industries in Addis Ababa accessing loans or lines of credit has shown a gradual but significant increase from 2015/16 to 2023/24, though it remains far below the local 2030 target of ETB 4 billion ETB.

According to Figure 45, in 2015/16, the value stood at ETB 214 million and rose modestly in subsequent years, reaching ETB 317 million by 2019/20. This period was characterized by slow growth, reflecting persistent barriers such as limited access to financial resources

and other economic factors like COVID 19 pandemic. A turning point was observed from 2020/21 onward, when the figure nearly doubled to ETB 562 million. This sharp increase is likely associated with government interventions aimed at supporting micro and small enterprises (MSEs), post-COVID-19 financial recovery packages, and policy-driven efforts to expand credit facilities through microfinance institutions and state-owned banks. By 2023/24, the volume of loans and credit accessed by small-scale industries reached ETB 860 million, marking an almost fourfold increase compared to the 2015/16 baseline.

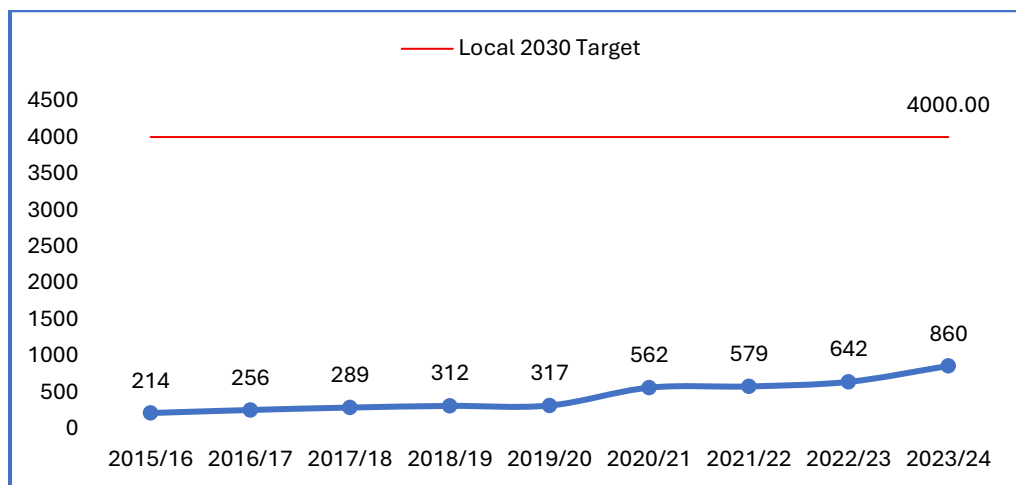


Figure 45: Accessed loan or credit by small-scale industries in millions

Despite this upward trajectory, the progress remains well below the 2030 target of ETB 4 billion, with the 2023/24 achievement representing only about 21.5% of the target. This gap highlights the ongoing structural challenges that constrain credit access, such as stringent lending requirements, high perceived risk by financial institutions, and limited capacity of small-scale industries to present viable business proposals. While the steady increase since 2020/21 signals a positive shift, the pace of growth must accelerate considerably to meet the 2030 benchmark.

This underscores the need for stronger policy measures, such as improving financial inclusivity, expanding guarantee schemes, strengthening small business development services, and fostering partnerships between banks and small-scale industries. Overall, the data indicates that while Addis Ababa has made progress in expanding access to finance for small-scale industries, intensified efforts are required to bridge the large gap to the 2030 target and unlock the full potential of this sector in driving industrial development and job creation.

3.5.6. Indicator 9.4.1: CO₂ emission per unit of value added

CO₂ emission per unit of value-added measures the amount of carbon dioxide (CO₂) emitted for every unit of economic output or economic value created by an activity, sector, or entire economy. It's a key indicator for understanding a country's or sector's carbon intensity, showing how efficiently it is generating economic wealth with respect to its CO₂ footprint. A lower figure signifies greater efficiency (Wang *et al.*, 2023). The trend of CO₂ emissions per unit of value added in Addis Ababa from

2015/16 to 2023/24 reflects a gradual and consistent decline, suggesting notable progress in decoupling economic growth from carbon emissions. As revealed in Figure 46, in 2015/16 and 2016/17, the indicator stood at 0.0022, remaining stable in the early years. A slight improvement followed in 2017/18 and 2018/19, with emissions reducing to 0.0021, signaling the first steps toward greater efficiency in production and energy use.

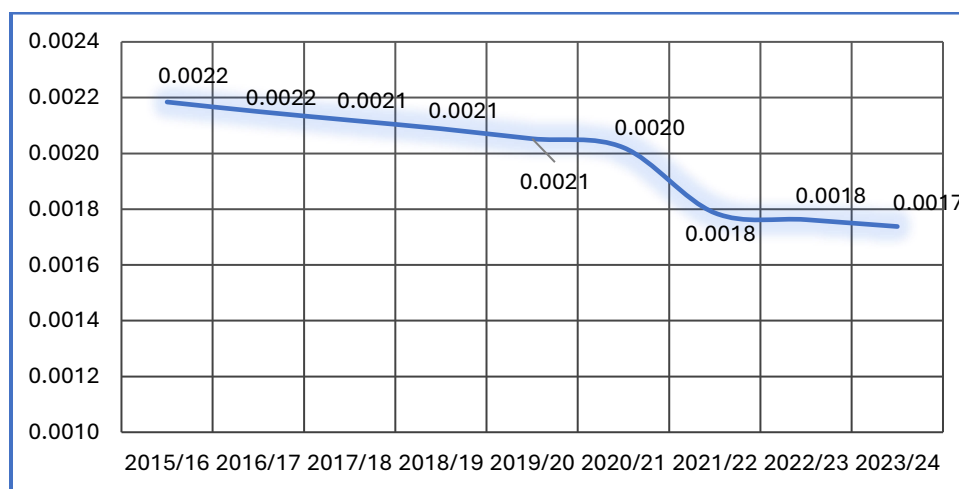


Figure 46: CO₂ e(t/USD)

By 2019/20, emissions remained at 0.0021, indicating stagnation in further improvements. However, from 2020/21 onward, a stronger downward trajectory emerged, with emissions per unit of value added decreasing to 0.0020 and continuing to fall in subsequent years. The most substantial reductions were observed in 2021/22 and 2022/23, when the indicator declined to 0.0018, and further to 0.0017 in 2023/24, the lowest level recorded over the review period.

Generally, Addis Ababa has achieved a progressive reduction in CO₂ intensity,

moving from 0.0022 in 2015/16 to 0.0017 (t/USD) in 2023/24, which represents a 22.7% decrease over nine years. This trend suggests that improvements in energy efficiency and adoption of cleaner technologies toward less carbon-intensive sectors are contributing factors. Despite this progress, the pace of reduction must be sustained and accelerated if the city is to align with broader SDG 9 and SDG 13 objectives, which emphasize sustainable industrialization and climate action.

3.5.7. Policy Implication and Practices for SDG-9 Indicators

Indicator 9.1.2: Number of passengers transported by vehicles: The steady rise in passenger volumes underscores the growing demand for mobility driven by urbanization, yet the reliance on minibuses and limited mass transport coverage calls for strategic policy interventions. To enhance efficiency, Addis Ababa should prioritize expanding its mass transit systems particularly buses and non-motorized transport infrastructure while integrating transport planning with land use development. Policies should focus on improving service quality, reducing congestion, and promoting cleaner public transport technologies to address both accessibility and environmental concerns. Strengthening institutional coordination and investment in modern transport management systems will also be crucial for achieving sustainable urban mobility.

Indicator 9.2.1: Manufacturing value added as a proportion of GDP and per capita: The volatile pattern of manufacturing value added reveals structural weaknesses and policy inconsistencies that hinder sustained industrial growth. Policy efforts should focus on strengthening industrial diversification, promoting value chain integration, and improving access to technology and finance for manufacturers. Stable macroeconomic and political environments, combined with targeted industrial policies and infrastructure development, are essential to enhance competitiveness. Encouraging innovation, improving energy reliability, and facilitating export-oriented manufacturing could foster resilience and steady growth toward achieving the 2030 target.

Indicator 9.2.2: Manufacturing employment as a proportion of total employment: The rebound in manufacturing employment after 2019/20 highlights the sector's potential to drive inclusive job

creation if supported by consistent policy measures. Strengthening industrial parks, enhancing technical and vocational training, and fostering linkages between industries and educational institutions can help sustain employment growth. Policies should also encourage domestic and foreign investment in labor-intensive industries while ensuring decent work conditions. Maintaining post-pandemic recovery momentum through industrial diversification and innovation-led strategies will be key to consolidating employment gains and supporting long-term industrialization.

Indicator 9.3.1: Proportion of small-scale in total industry value: The stagnation in small-scale industries' contribution to total industrial value indicates persistent barriers in scaling productivity and competitiveness. Policymakers should focus on creating an enabling environment that enhances access to finance, technology, and markets for small enterprises. Strengthening industrial clustering, business incubation programs, and technical support services can boost performance. Institutional reforms that simplify regulatory procedures and promote linkages between small and large industries will also help expand their value-added contribution, aligning with inclusive and sustainable industrial development goals.

Indicator 9.3.2: Accessed loan or credit by small-scale industry: The steady increase in access to loans and credit among small-scale industries indicates improving financial inclusion; however, the significant gap from the 2030 target highlights the need for stronger policy action. Policymakers should prioritize expanding credit guarantee schemes, easing collateral requirements, and strengthening partnerships between financial institutions and micro and small enterprises (MSEs). Enhancing financial literacy, supporting business development services, and promoting digital financing mechanisms can improve loan accessibility and

utilization. Furthermore, integrating credit support within broader industrial development frameworks will help small enterprises scale up production, drive innovation, and contribute more effectively to job creation and inclusive economic growth.

Indicator 9.4.1: CO₂ emission per unit of value added: The declining trend in CO₂ emissions per unit of value added reflects progress toward energy-efficient and cleaner industrial production, yet continued effort is required to sustain this achievement. Policymakers should focus on mainstreaming

low-carbon industrial policies that encourage renewable energy adoption, promote energy-efficient technologies, and enforce emission reduction standards. Incentives for green manufacturing, investment in sustainable infrastructure, and capacity building for industries to adopt cleaner production methods are vital. Strengthening environmental monitoring systems and integrating climate considerations into industrial planning can ensure Addis Ababa continues to decouple economic growth from carbon emissions, aligning with the city's sustainable industrialization and climate resilience goals.

Case Box 5: Progress and Gaps in SDG 9 – Industry, Innovation, and Infrastructure

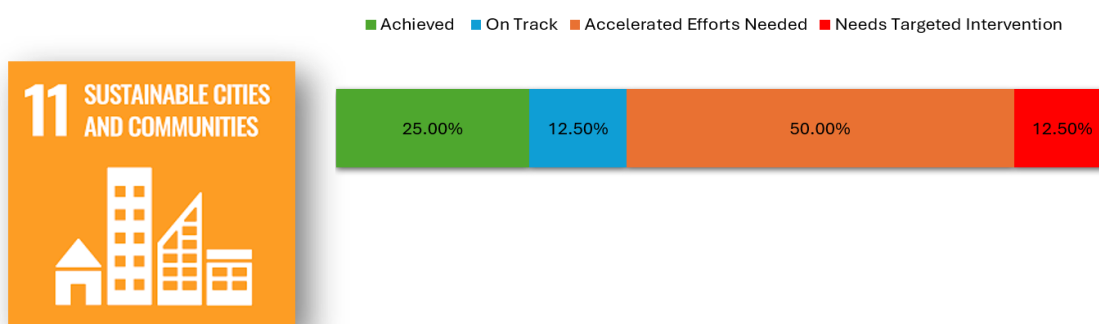
Under SDG 9, notable gains are observed in the transport sector, where the number of passengers transported increased significantly by 51.38%, reflecting improvements in mobility and urban connectivity, and approaching the 2030 target.

Industrial performance presents a mixed picture. While manufacturing employment rose by 7.86% and has already met the 2030 target, suggesting positive job creation in the sector, manufacturing value added declined by 16.12%, indicating reduced productivity and limited industrial growth.

Small-scale industries continue to be an area of concern despite improved access to finance. Although access to loans or credit increased significantly by 301.87%, it remains well below the 2030 target. In addition, the contribution of small-scale industries to total industrial value declined by 10.98%.

Encouragingly, environmental sustainability within industry has improved, with CO₂ emissions per unit of value added decreasing by 22.73%, reflecting progress toward cleaner and more efficient production practices.

3.6. SDG 11: Sustainable Cities and Communities



3.6.1. Indicator 11.4.1: Total expenditure per capita spent on the preservation of all cultural and natural heritage

The total expenditure (public and private) per capita spent on the preservation of all cultural and natural heritage refers to the average amount of money allocated by both government and private actors for safeguarding cultural and natural heritage, divided by the total population. In other words, it measures how much, on average, each person in a city or country “benefits from” or is supported by investments aimed at conserving heritage resources such as historical sites, monuments, traditions,

landscapes, and biodiversity. The per capita expenditure (public and private) on the preservation of cultural and natural heritage in Addis Ababa has shown a fluctuating trend from 2016/17 to 2023/24, rather than the consistent upward pattern expected by the target. As revealed in Figure 47, in 2016/17, the per capita expenditure was USD 0.065, but it sharply rose to USD 0.252 in 2017/18, indicating a temporary surge in funding commitment.

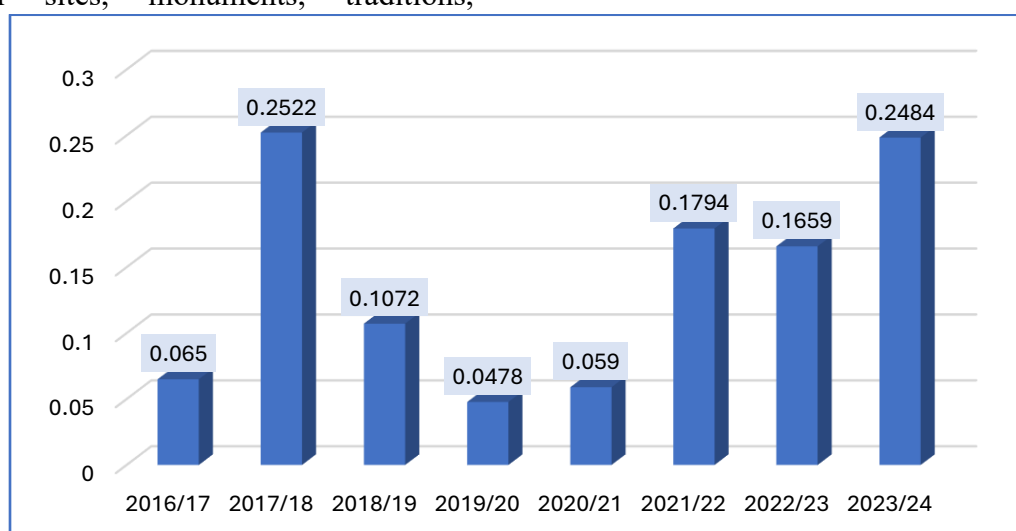


Figure 47: Total expenditure (public and private) per capita in USD spent on the preservation of all cultural and natural heritage

However, this progress was not sustained, as spending dropped to USD 0.107 in 2018/19 and declined further to USD 0.0478 in 2019/20, possibly reflecting fiscal constraints, shifting priorities, or the disruptive effects of external shocks such as the COVID-19 pandemic. The slight recovery to USD 0.059 in 2020/21 suggests renewed, but still limited, efforts to channel resources into heritage preservation during a period of economic recovery.

A more notable improvement is observed from 2021/22 onward, when per capita spending increased significantly to USD 0.179 and stabilized around USD 0.166 in 2022/23, before reaching a peak of USD 0.248 in 2023/24. This substantial growth indicates a stronger recognition of the cultural and natural heritage sector as a corridor development priority, potentially financed by Addis Ababa city administration.



Preserved Ethiopian National Museum

Despite earlier fluctuations, the sharp rise in recent years suggests Addis Ababa is now on track with the indicator's target of maintaining an increasing trend.

3.6.2. Indicator 11.5.1(a): Number of deaths attributed to disasters per 100,000 population

Addis Ababa faces growing disaster risks due to rapid urbanization, unplanned settlements, and the impacts of climate change. The city is vulnerable to recurrent floods, fire outbreaks, landslides, and health-related emergencies, which disproportionately affect communities living in high-risk areas such as riverbanks and densely populated informal settlements. Limited drainage infrastructure, inadequate enforcement of building standards, and weak early warning systems further exacerbate these risks. The number of deaths attributed to disasters per 100,000 population in Addis Ababa has shown fluctuations between 2017/18 and 2023/24, rather than a consistent decreasing trend as targeted. According to the data shown in Figure 48, in 2017/18, the death rate stood at 1.92 per 100,000, declining slightly to 1.79 in 2018/19.



Preserved National Palace (Jubilee Palace)



Preserved 125 Years Old Alemtsehay Wodajo's Cultural Center

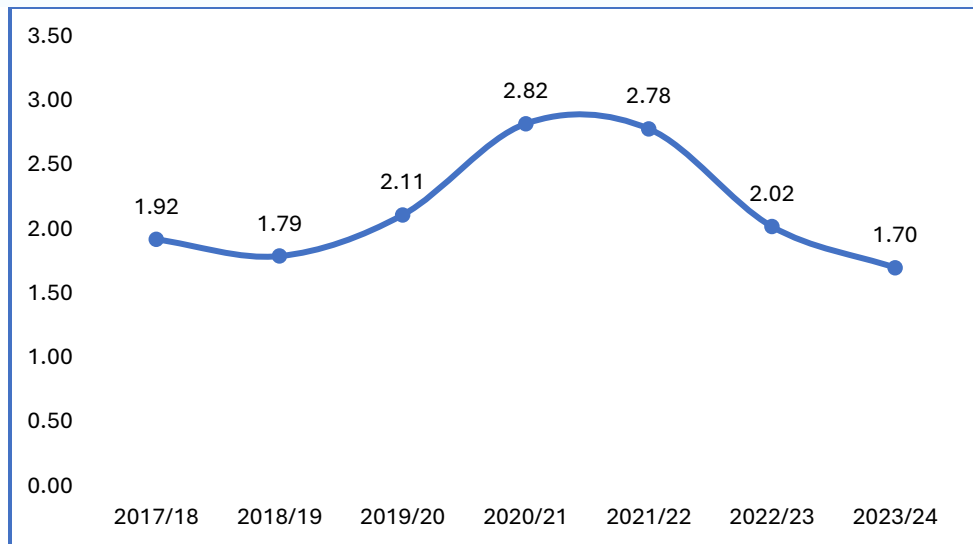


Figure 48: Number of deaths attributed to disasters per 100,000 population

However, this was followed by an upward surge to 2.11 in 2019/20 and further to 2.82 in 2020/21, reflecting periods of heightened vulnerability linked to the flood events. The slight reduction to 2.78 in 2021/22 indicates marginal improvement in response mechanisms, but the rate remained significantly above the initial levels, highlighting the ongoing challenges in managing disaster-related risks effectively.



Flood hazard in Addis Ababa



Fire hazard in Addis Ababa

A more encouraging trend emerges from 2022/23 onward, when the rate decreased to 2.02 and further declined to 1.70 per 100,000 population in 2023/24. This recent reduction suggests that interventions aimed at strengthening disaster risk management, emergency response, and community resilience may be having a positive effect.



At-risk populations in flood-prone zones before River and River Side Development project



Transformation of riverside areas under Addis Ababa's Riverside Project

Despite the improvements, the data underscores the need for sustained and proactive measures, including improved

infrastructure, comprehensive urban planning, public awareness campaigns, and robust early warning systems, to maintain a consistent downward trajectory. Achieving a steady decline in disaster-related deaths is critical for safeguarding public health and ensuring the city's resilience against future hazards.

3.6.2.1. Indicator 11.5.1(b): Number of directly affected persons attributed to disasters per 100,000 population

The data on the number of directly affected persons attributed to disasters per 100,000 population in Addis Ababa between 2017/18 and 2023/24 shows a fluctuating pattern rather than the desired consistent decline. As shown in Figure 49, in 2017/18, the value stood at 2.15, but it gradually rose to 2.36 in 2018/19 and further increased to 3.11 in 2019/20. The upward trend continued, peaking at 5.43 in 2021/22, which represents the highest recorded value during the assessment period. This significant rise highlights growing disaster vulnerability, likely due to expansion informal settlements into high-risk zones, limited disaster preparedness, and increased exposure of vulnerable populations.

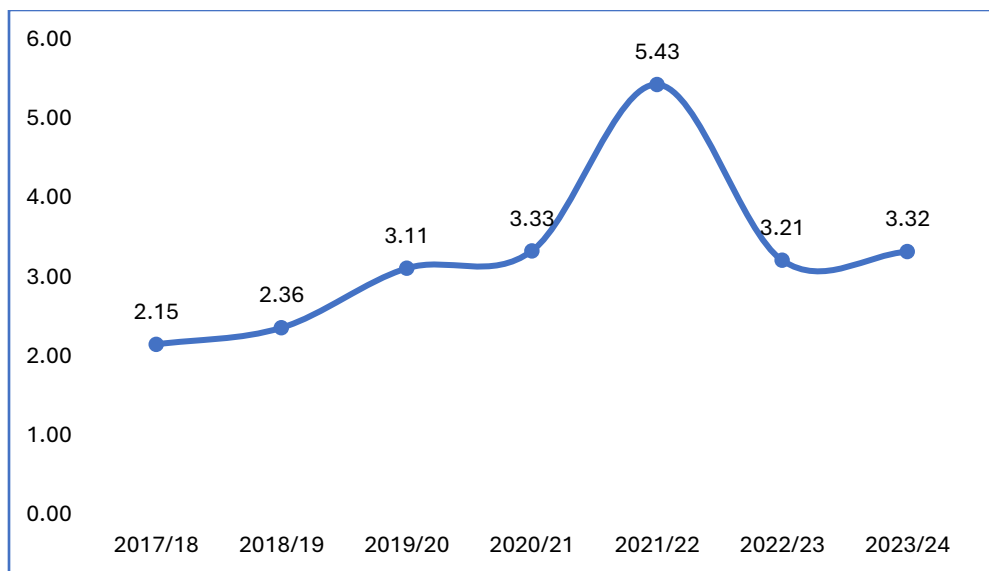


Figure 49: Number of directly affected persons attributed to disasters per 100,000 population

Following the peak in 2021/22, the indicator showed some progress, dropping to 3.21 in 2022/23, though it slightly rose again to 3.32 in 2023/24. This decline from the peak indicates improved disaster response and mitigation measures, such as relocating informal settlements from flood-prone areas, particularly through river and riverside development initiatives.



Conversion of flood-prone informal settlements into attractive public spaces

In general, the data reflects that Addis Ababa has made partial improvements in recent years but still faces challenges in achieving sustained reductions in disaster impacts. Strengthening risk-informed urban planning, early warning systems, and community resilience strategies will be crucial to reverse the upward trend and align with the SDG target.

3.6.3. Indicator 11.5.2: Proportion of direct economic loss in relation to AA GCP attributed to disasters

The trend of direct economic loss in relation to Addis Ababa's GCP attributed to disasters between 2017/18 and 2023/24 shows significant fluctuations rather than a steady decline, which is the desired target for the indicator. As revealed in Figure 50, in 2017/18, the share stood at 0.000239%,

increasing to 0.000434% in 2018/19 and peaking at 0.000583% in 2019/20. A partial reduction was observed in 2020/21 at 0.000337%, yet this was followed by a sharp increase to 0.000846% in 2021/22, the highest level within the assessment period. These variations reflect the city's exposure to both recurrent natural hazards such as floods and localized fires, as well as socio-economic vulnerabilities that amplify disaster-related costs.

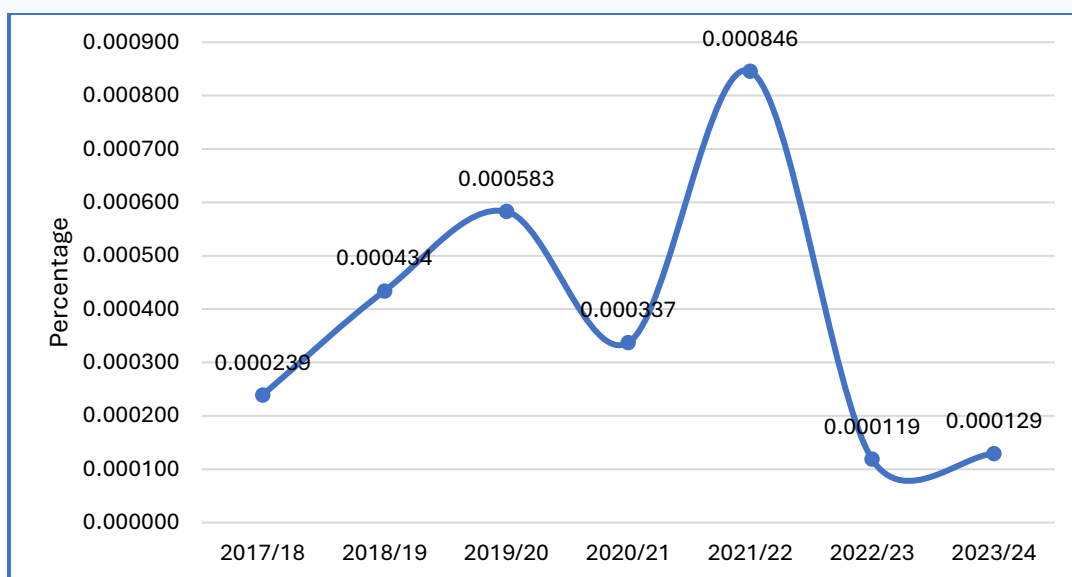


Figure 50: Proportion of direct economic loss in relation to AA GCP attributed to disasters



Disaster related economic loss in Addis Ababa

However, in recent years, the data indicates remarkable progress. By 2022/23, the proportion of direct economic loss dropped dramatically to 0.000119%, and remained relatively stable at 0.000129% in 2023/24, suggesting improved resilience and the effectiveness of mitigation measures.

These improvements could be attributed to disaster risk reduction interventions such as relocation of households from flood-prone areas, better urban planning under the Riverside Project, and strengthened emergency preparedness systems. While the

overall trend demonstrates vulnerability during certain years, the substantial decline in the last two years is encouraging and reflects progress toward achieving the target of reducing disaster-related economic losses relative to GDP.

3.6.4. Indicator 11.6.1. Proportion of urban solid waste regularly collected out of total urban solid waste generated

Over the decade from 2015/16 to 2024/25, Addis Ababa's solid waste collection coverage has shown a marked and consistent

upward trend rising from 70% to 91%. This represents an overall 21 percentage point improvement in the proportion of waste generated that is regularly collected and managed within the city's municipal system. As revealed in Figure 51, the steady increase, particularly the jump from 78% in 2019/20 to 85% in 2020/21, suggests enhancements in operational capacity, possible expansion of

service routes, improved fleet and infrastructure investments, or better engagement with private and informal waste collectors. Maintaining a ~90%+ coverage in recent years (2021/22–2024/25) reflects strong progress towards near-universal collection in an urban setting facing rapid population growth and resource constraints.

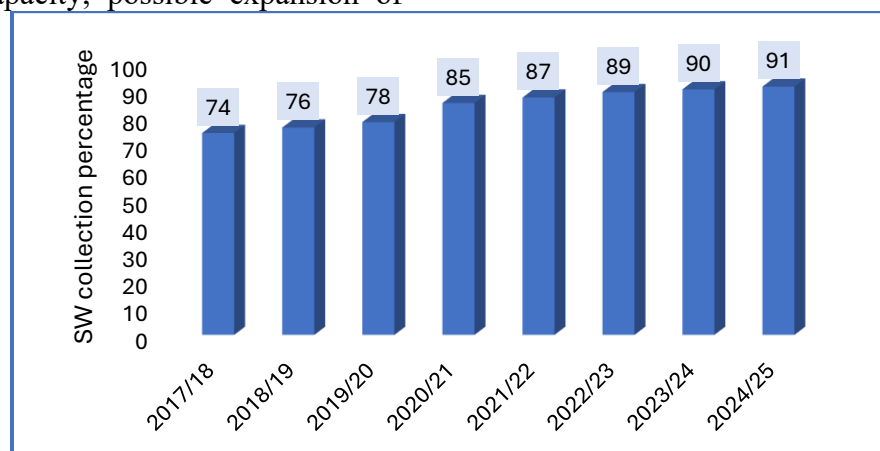


Figure 51: Proportion of solid waste collected out of solid waste generated in the city

In developed countries, solid waste collection is typically near universal, with major cities routinely achieving coverage ≥ 90 –100% due to well-funded municipal systems, dense infrastructure, and regulatory enforcement (e.g., Adelaide, San Francisco, Rotterdam all reported ~100% coverage in UN-Habitat dashboards) (UN HABITAT, 2010). Additionally, high-income OECD nations average around 90%+ collection coverage, contrasting sharply with lower-income contexts.

In contrast, many developing cities especially in sub-Saharan Africa and Asia have historically lagged: estimates show that waste collection coverage in low-income cities

averages around 30–70%, with some cities well below this range, resulting in significant waste left uncollected and often disposed in open dumps or waterways. For example, cities such as Lagos, Accra, and Nairobi in some studies ranged from ~60% to 90%, with significant intra-urban disparities; many smaller or poorer districts are underserved (World Bank Group, 2018; Hirpe and Yeom, 2021). Therefore, Addis Ababa's trajectory from 70% towards 91% places it above many peer cities in developing regions and approaching the performance level of developed urban centers though still shy of true universality and advanced recycling or treatment metrics seen in high-income contexts.

3.6.5. Indicator 11.6.2: Annual mean levels of fine particulate matter (PM2.5)

Annual mean levels of fine particulate matter (PM2.5) (population-weighted) represent the average concentration of airborne particles smaller than 2.5 micrometers in diameter, measured over a year and adjusted to reflect the exposure of the population living in the

area. This indicator captures both the intensity of air pollution and its population coverage, making it a reliable measure of the public health risks associated with poor air quality. In Ethiopia, the local target for annual mean PM2.5 is set at 15 $\mu\text{g}/\text{m}^3$, while the WHO

guideline recommends a much lower threshold of 5 $\mu\text{g}/\text{m}^3$ for protecting human health (Ethiopia-EPA, 2003; WHO, 2021).

In Addis Ababa, annual mean PM_{2.5} levels between 2015/16 and 2022/23 fluctuated without a consistent downward trend, despite global and national targets emphasizing progressive reduction (Figure 52). Concentrations ranged from 28.8 $\mu\text{g}/\text{m}^3$ in 2022/23 to a peak of 34.2 $\mu\text{g}/\text{m}^3$ in 2016/17, with most years recording values above 30

$\mu\text{g}/\text{m}^3$. Although the lowest concentration (28.8 $\mu\text{g}/\text{m}^3$) in 2022/23 shows some improvement compared to earlier years, it is still almost double the national target of 15 $\mu\text{g}/\text{m}^3$ and nearly six times higher than the WHO guideline of 5 $\mu\text{g}/\text{m}^3$. This indicates that existing interventions have not yet delivered sustained results, and ideally, the indicator should demonstrate a steady and continuous decline toward meeting both local and international health-based standards.

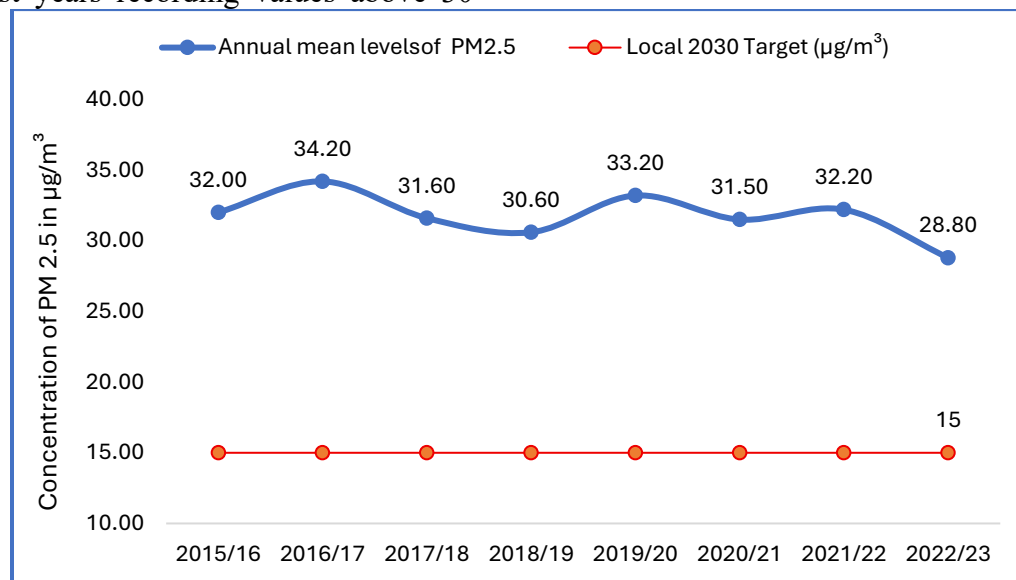


Figure 52: Annual mean levels of fine particulate matter (e.g. PM_{2.5}) in AA (population weighted)

When compared against benchmarks, Addis Ababa's PM_{2.5} levels reveal a pressing challenge. Relative to the local target, concentrations remain about twice as high, while against the WHO guideline they are more than fivefold higher. Such persistently elevated levels carry significant health consequences, including increased cases of respiratory illnesses (such as asthma and chronic obstructive pulmonary disease), cardiovascular complications, and premature mortality. In economic terms, the persistence of high PM_{2.5} contributes to rising healthcare costs and reduced labor productivity, thereby linking air pollution directly to measurable

GDP impacts and disaster-related economic losses.

From a resilience perspective, these high and fluctuating PM_{2.5} levels highlight the city's vulnerability to environmental and health-related shocks. While some relative progress was recorded in 2022/23, bridging the large gap between current levels and the local target of 15 $\mu\text{g}/\text{m}^3$ as well as the more stringent WHO guideline of 5 $\mu\text{g}/\text{m}^3$ will require **accelerated efforts in the coming years**. This entails substantial investments in clean and renewable energy, sustainable transport infrastructure, stricter industrial emission controls, and improved waste management

systems. Without consistent and intensified action, the dual burdens of health risks and economic losses will persist, undermining both Addis Ababa's development trajectory and its resilience goals. Prioritizing air quality

management, therefore, is not only a health imperative but also a strategic economic and resilience necessity, demanding faster and more coordinated implementation efforts.

3.6.6. Indicator 11.7.1: Average share of the built-up area of cities that is open space for public use for all disabilities

The data on the average share of the built-up area of Addis Ababa that is open space for public use between 2016/17 and 2022/23 demonstrates a generally positive trend, aligning with the target of achieving an increasing pattern. As revealed in Figure 53, from a very low and stagnant level of 1.52% in both 2016/17 and 2017/18, the proportion more than doubled to 2.80% in 2018/19 and

remained at the same level in 2019/20. This upward shift suggests that urban development strategies began incorporating more attention to public open spaces from 2018/19 onwards. The progress continued, with further increments to 3.00% in 2020/21 and 2021/22, followed by a slight but notable rise to 3.05% in 2022/23.



Friendship Park

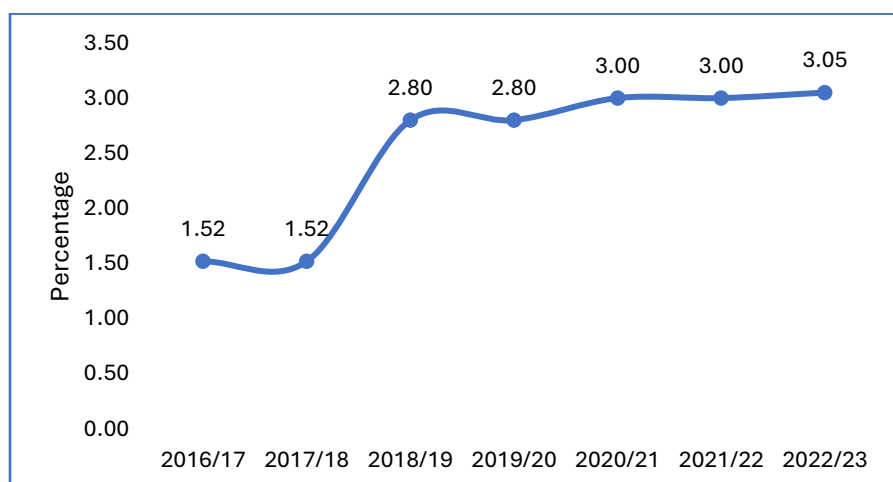


Figure 53: Average share of the built-up area of cities that is open space for public use for all

Although the overall direction is encouraging, the pace of growth appears to have slowed in recent years, as the share increased by only 0.05% between 2021/22 and 2022/23.



Green and open public space

This indicates that while Addis Ababa has made strides in expanding accessible open spaces, challenges such as competing land-use priorities, rapid urbanization, and informal settlements may be constraining further progress. Even if the recent data are not constituted with in this report, over the past two years, the city administration has been working intensively to enhance public space

coverage through corridor development projects and green legacy initiatives. These efforts are helping to expand and protect open spaces while contributing to environmental sustainability, public health, and social wellbeing by providing recreational areas, reducing heat stress, and improving air quality.



Green public space and playground

3.6.7. Indicator 11.7.2(a): Number and Proportion of persons victim of physical or sexual harassment, by sex, age (< 18 years)

The data on the proportion of persons under 18 years who were victims of physical or sexual harassment in Addis Ababa between 2018/19 and 2023/24 indicates a concerning trend, particularly with regard to female victims. As revealed in Figure 54, the number of reported female victims rose sharply from 647 in 2018/19 to 1,139 in 2019/20 and has remained

consistently high, fluctuating between 880 and 1,136 in subsequent years. In contrast, male victims represent a significantly smaller share, increasing from 52 in 2018/19 to 109 in 2023/24, showing a steady upward trajectory across the years. This widening gender gap underscores the disproportionate vulnerability of young females to harassment compared to their male counterparts.

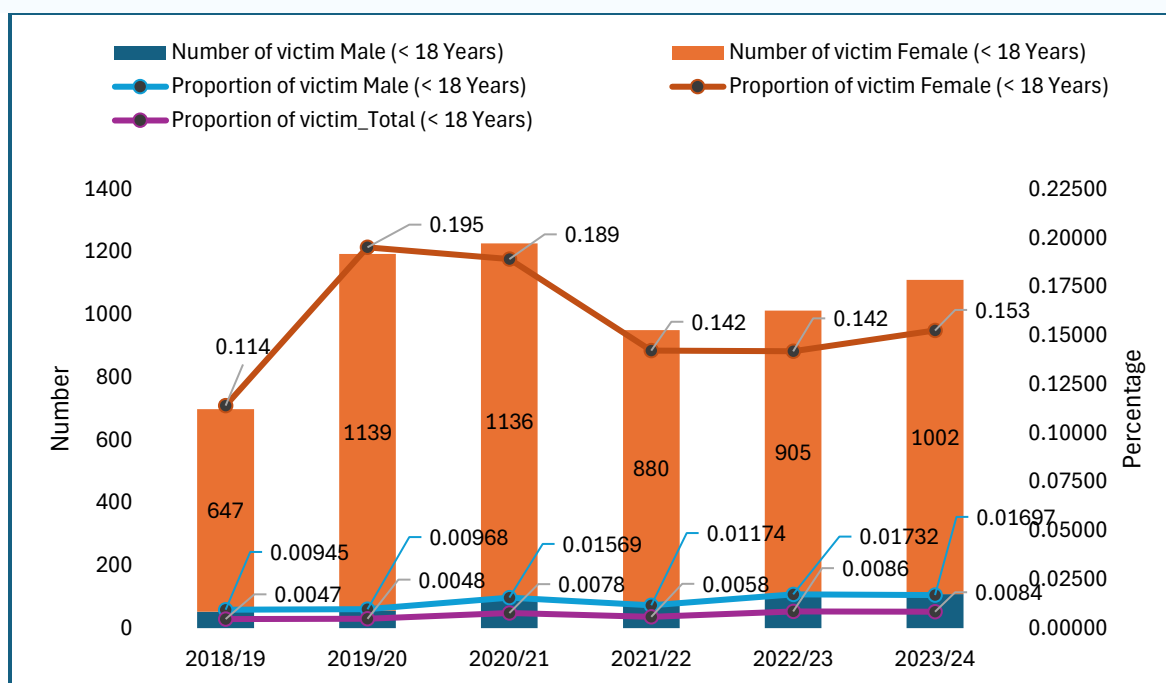


Figure 54: Number and proportion of persons victim of physical or sexual harassment, by sex, age (< 18 years)

Although the figures show variations over time, the overall pattern fails to meet the expected target of a decreasing trend. Instead, both male and female cases remain persistently high, with female cases showing only slight reductions after the peak in 2019/20 but still exceeding 2018/19 levels. The rise in male victimization, though on a smaller scale compared to females, also reflects a worrisome increase in risks faced by boys under 18. These trends point to gaps in existing protective mechanisms, insufficient enforcement of child protection laws, and limited effectiveness of awareness and prevention programs in addressing harassment.

The sustained high levels of harassment have serious social implications. For victims, such

experiences can lead to long-lasting psychological trauma, reduced educational attainment, social exclusion, and heightened vulnerability to further exploitation. At the societal level, these patterns undermine child rights protection, gender equality, and broader resilience objectives for urban communities. To reverse the trend toward the targeted decline, Addis Ababa requires strengthened institutional frameworks, community-based protection systems, enhanced reporting and accountability mechanisms, and comprehensive psychosocial support for victims. Without such coordinated interventions, the persistence of harassment among minors will continue to pose a critical challenge to the city's social wellbeing and sustainable development agenda.

3.6.8. Indicator 11.7.2(b): Number and Proportion of women victim of physical or sexual harassment, by age (18 years and above Female)

The data on women aged 18 years and above who were victims of physical or sexual

harassment in Addis Ababa from 2018/19 to 2023/24 reveals an inconsistent pattern that

falls short of the expected decreasing trend. As revealed in Figure 55, in 2018/19, cases were very high at 793, followed by a sharp drop to 235 in 2019/20. However, this improvement was not sustained, as incidents rose again to 398 in 2020/21, declined slightly to 283 in 2021/22, and then increased once more in the

following years, reaching 396 in 2022/23 and 511 in 2023/24. Overall, while there was an initial reduction after 2018/19, the general trajectory remains unstable, with recent years indicating a resurgence rather than continued decline.

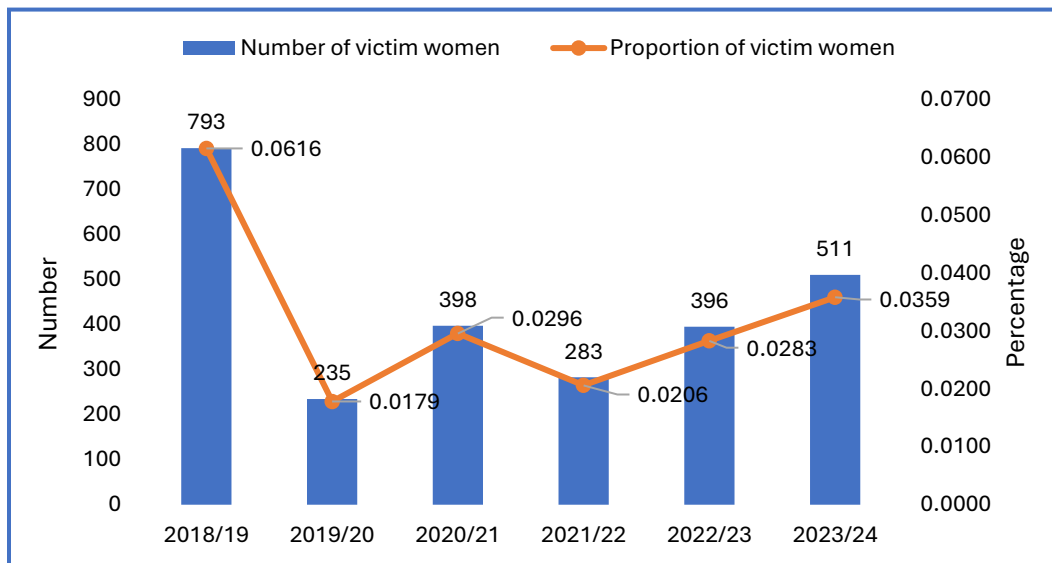


Figure 55: Number and proportion of women victim of physical or sexual harassment (women aged ≥ 18 years)

This inconsistent trend suggests that interventions to reduce harassment have not been effective or consistently applied. The resurgence of cases in 2020/21 and the steady increase up to 2023/24 highlight persistent risks that women face in both public and private spaces. These high levels of harassment have serious implications, including psychological trauma, reduced participation of women in social and economic life, and erosion of trust in legal

3.6.9. Policy Implication and Practices for SDG-11 Indicators

Indicator 11.4.1: Total expenditure per capita spent on the preservation of all cultural and natural heritage: The fluctuating pattern of per capita expenditure on cultural and natural heritage preservation

and institutional protection systems. To meet the target of a sustained downward trend, Addis Ababa needs stronger gender-sensitive policies, better enforcement of protective laws, safer urban planning, and accessible reporting and support services for victims. Without these measures, the continued prevalence of harassment will remain a major barrier to gender equality and women's empowerment in the city.

highlights the need for stable and predictable funding mechanisms. Policymakers should institutionalize heritage conservation financing by integrating it into the city's annual budget framework and encouraging public-private partnerships. Strengthening fiscal allocation, promoting community participation, and leveraging tourism-related

revenues can ensure sustainable resource mobilization. Maintaining the recent upward momentum will require long-term planning, technical capacity development, and coordination between cultural, environmental, and urban development institutions to safeguard Addis Ababa's rich heritage assets while supporting sustainable city branding and cultural identity.

Indicator 11.5.1(a): Number of deaths attributed to disasters per 100,000 population:

Although recent declines in disaster-related deaths indicate progress, the overall fluctuating trend signals persistent vulnerabilities. To sustain the downward trajectory, Addis Ababa should strengthen disaster risk management through improved drainage systems, enforcement of building codes, and resettlement of populations from high-risk areas. Expanding early warning systems, enhancing emergency response capacity, and promoting community-based preparedness are also crucial. Institutional coordination and investment in climate-resilient infrastructure will be key to reducing disaster mortality and advancing the city's resilience and public safety goals.

Indicator 11.5.1(b): Number of directly affected persons attributed to disasters per 100,000 population:

The persistence of high numbers of disaster-affected persons underscores the need for proactive urban resilience strategies. Policies should focus on integrating risk-sensitive urban planning, strengthening land-use regulation, and expanding relocation programs for households in flood-prone and unstable areas. Enhanced early warning systems, public awareness, and community participation are essential to reduce vulnerability. Sustained coordination among municipal agencies, supported by adequate financing and data-driven risk assessment, will help Addis Ababa achieve a consistent decline in disaster impacts and align with SDG 11 targets.

Indicator 11.5.2: Proportion of direct economic loss in relation to Addis Ababa's GDP attributed to disasters:

The recent reduction in disaster-related economic losses signals progress toward building resilience, yet maintaining this trend demands institutionalized risk governance. Addis Ababa should strengthen climate- and disaster-resilient infrastructure investments, expand insurance mechanisms, and integrate disaster risk reduction into urban planning and budgeting. Strengthening local capacity for post-disaster recovery and promoting risk-informed decision-making can minimize future losses. Ensuring sustained financial and policy commitment will be crucial to safeguard urban assets and economic stability.

Indicator 11.6.1: Proportion of urban solid waste regularly collected out of total urban solid waste generated:

The sustained improvement of Addis Ababa's solid waste collection coverage to over 90% implies that existing policy directions such as service expansion, public-private partnerships, and strengthened municipal coordination are yielding tangible results and should be consolidated and scaled up. Policy focus can now progressively shift from access-oriented collection expansion toward service quality, efficiency, and sustainability, including waste segregation at source, recycling, and environmentally sound disposal. Practically, maintaining this high coverage requires continued investment in fleet renewal, workforce capacity, and data-driven monitoring systems, while targeted policies are needed to address remaining underserved pockets and to integrate informal waste actors into the formal system, aligning Addis Ababa's waste management practices with circular economy and climate-resilient urban development goals.

Indicator 11.6.2: Annual mean levels of fine particulate matter (PM2.5): Persistently high PM2.5 levels indicate that current air quality interventions remain insufficient to

protect public health and urban resilience. Policy actions should prioritize clean transport systems, strict emission standards for industries, and expanded green infrastructure. Promoting renewable energy adoption, improving waste management, and enforcing vehicle emission controls are essential to reduce pollution. Strengthening air quality monitoring and integrating pollution reduction into urban planning will support Addis Ababa's efforts toward achieving cleaner air, healthier communities, and compliance with both national and WHO standards.

Indicator 11.7.1: Average share of built-up area that is open space for public use: The positive trend in expanding open public spaces reflects progress but calls for stronger policy measures to secure long-term gains. Addis Ababa should institutionalize open space planning within urban development strategies, protect existing green areas from encroachment, and enhance accessibility for all users, including persons with disabilities. Expanding corridor developments, parks, and green legacy projects can improve livability, social inclusion, and environmental quality. Ensuring equitable access to well-designed public spaces will strengthen community well-being and climate resilience.

Indicator 11.7.2(a): Proportion of persons (<18 years) victim of physical or sexual harassment: The persistently high levels of

harassment among minors highlight systemic gaps in child protection and law enforcement. Policymakers should strengthen legal frameworks, improve accountability mechanisms, and invest in school- and community-based awareness programs to prevent abuse. Expanding psychosocial and legal support services, enhancing reporting mechanisms, and improving coordination among law enforcement, social workers, and community organizations are essential. Creating safe urban environments is key to protecting children's rights and advancing inclusive, safe, and resilient communities.

Indicator 11.7.2(b): Proportion of women (18 years and above) victim of physical or sexual harassment: The unstable and resurging trend in harassment cases among women underscores the need for stronger gender-responsive urban safety policies. Addis Ababa should enhance enforcement of gender protection laws, promote gender-sensitive urban design (e.g., safe transport, lighting, and public spaces), and expand survivor support services. Awareness campaigns, institutional accountability, and collaboration with civil society can foster a culture of zero tolerance for violence. Prioritizing women's safety and empowerment will be central to achieving SDG 11's goal of inclusive, equitable, and resilient urban development.

Case Box 6: Progress and Gaps in SDG 11 – Sustainable Cities and Communities

The Voluntary Local Review (VLR) results for SDG 11 demonstrate notable progress in urban sustainability and service delivery, alongside persistent social and disaster-related challenges. Significant improvements are observed in environmental management and urban infrastructure. Expenditure on the preservation of cultural and natural heritage increased substantially by 281.54%, reflecting strengthened commitment to safeguarding urban heritage assets. Similarly, solid waste collection coverage rose from 74% to 91% (a 22.97% increase), indicating enhanced municipal service delivery. Air quality also improved, with PM2.5 levels declining by 10%, although still above the 2030 target, suggesting the need for accelerated pollution control measures.

Urban livability has improved in terms of access to public spaces, with the share of built-up areas designated as open public space doubling (100.66% increase), contributing to more inclusive and accessible urban environments. Disaster-related indicators present a mixed trend: while disaster-related deaths declined by 11.46% and economic losses relative to GCP dropped significantly by 46.03%, the number of people directly affected by disasters increased by 54.42%, indicating growing exposure and vulnerability despite improved risk management outcomes.

Safety and inclusiveness remain critical concerns. Reported cases of physical or sexual harassment increased sharply among both male (+109.62%) and female (+54.87%) populations under 18, highlighting worsening conditions for vulnerable groups. However, a notable decline of 35.56% in cases among adult women suggests some progress in this demographic.

4. Validation Process and Stakeholders' Perception

4.1. Validation Process

As part of the Voluntary Local Review (VLR) process for Addis Ababa, a comprehensive stakeholder consultation was conducted to evaluate the implementation status and achievements of six priority Sustainable Development Goals (SDGs 3, 4, 6, 8, 9, and 11). This consultation engaged a diverse range of actors, including members of Addis Ababa City Council, government bureaus, international organizations, academic institutions, and civil society, to ensure that the VLR reflects the city's practical context and inclusive progress. The following sections synthesize the findings, highlighting achievements, systemic gaps, and strategic recommendations provided by stakeholders.



Participants of stakeholders' workshop

4.2. Consultation Outcomes and Insights

The consultation validated that the 12 indicators identified for SDG 3 (Good Health and Well-being) and 4 indicators for SDG 4 (Quality Education) effectively capture the city's progress in social service delivery. While stakeholders acknowledged the accuracy of the health sector data, they emphasized the urgent need for the city to strengthen internal financial resource mobilization as external funding continues to decline.



In the education sector, the focus must shift from basic physical access to infrastructure quality, specifically addressing deficiencies in internet bandwidth, computer access, and reliable electricity.



Furthermore, stakeholders highlighted a critical need for inclusive facilities designed for students with disabilities and the strategic use of social media to enhance community health awareness.



Regarding SDG 6 (Clean Water and Sanitation) and SDG 8 (Decent Work and Economic Growth), the expert consensus centered on methodological refinement for future reviews. Stakeholders noted inconsistencies in baseline years, with some data sets starting in 2015/16 and others in 2016/17, necessitating a more harmonized approach to data tracking.



Moving forward, the city is advised to prioritize the significance and relevance of indicators over mere data availability, ensuring that the next VLR incorporates a broader and more representative set of metrics to capture the complexities of the urban economy and resource management.

The analysis of SDG 9 revealed a disconnect between quantitative transport data and the qualitative reality of urban mobility. While the reported increase in passenger volumes was validated, stakeholders recommended adding indicators for peak-hour congestion and waiting times to provide a more realistic assessment of transport efficiency. Industrially, the current 15.1% target for

manufacturing employment is considered relatively low and may require upward revision. Additionally, the city must address the underrepresentation of medium-scale industries and tackle the financial barriers facing small-scale enterprises, specifically the issues of small loan sizes, high interest rates, and restrictive collateral requirements.

Implementation status for SDG 11 (Sustainable Cities and Communities) demonstrated strong inter-institutional collaboration, particularly in triangulating harassment data between the Women, Children, and Social Affairs Bureau and the Police Commission.



Round table discussion on stakeholders' workshop

However, experts called for a transition beyond numerical reporting to include qualitative insights into the impacts of harassment, alongside the development of monitoring mechanisms for digital and social media-based harassment. On the environmental front, while emissions per unit of value added are currently low, stakeholders advocated for stricter enforcement of regulations on industrial outputs and older, high-emission vehicles to sustain these trends.

In synthesis, the consultation process reflects a strong satisfaction with the VLR framework, marking a commendable effort by Addis Ababa to align with the 2030 Global Agenda. The cross-cutting findings suggest that future success depends on improving data integrity, bridging the gap between infrastructure access and quality, and establishing sustainable financing models. By addressing these systemic challenges and prioritizing the recommendations for qualitative monitoring and digital governance, the city can enhance its trajectory toward inclusive and sustainable development.

5. Conclusions and Recommendations

5.1. SDG 3: Good Health and Well-being

Conclusion Addis Ababa has demonstrated significant progress in core health indicators, particularly in maternal and child health. The city is on track to achieve several local 2030 targets, having already surpassed survival goals for under-five mortality and maintaining near-universal skilled birth attendance. However, the Maternal Mortality Ratio (MMR) remains subject to fluctuations, with notable rises during the COVID-19 pandemic due to disruptions in health-seeking behavior. Systemic challenges persist in the high incidence of Tuberculosis and a recent resurgence in Malaria linked to population mobility.

Recommendations

- Leverage social media platforms to enhance community health literacy and destigmatize mental health help-seeking behaviors.
- Institutionalize the Maternal Death Surveillance and Response (MDSR) system to identify and mitigate early-age pregnancy risks.
- Scale up focused Hepatitis B testing during pregnancy and ensure universal birth-dose vaccination.
- Strengthen internal financial resource mobilization to compensate for declining Official Development Assistance (ODA).
- Integrate substance use disorder (SUD) care into the primary health system to

build institutional resilience against future disruptions.

5.2. SDG 4: Quality Education

Conclusion The education sector represents the city's strongest SDG performance, with 75% of indicators categorized as "Achieved". Universal access to electricity, internet, and computers for pedagogical purposes has been sustained since 2018/19. Participation in organized learning for pre-primary children has surpassed 100%, and the city has achieved near gender parity in enrollment across all levels. Despite these quantitative successes, a critical gap exists in infrastructure quality, specifically regarding bandwidth reliability and specialized facilities for students with disabilities. Furthermore, the disengagement of boys in secondary education has emerged as a recent trend requiring attention.

Recommendations

- Establish a monitoring system to track and address the root causes of male student dropout and disengagement in secondary schools.
- Upgrade ICT infrastructure from basic access to high-quality, high-bandwidth services suitable for modern pedagogical tools.
- Retrofit all public schools with inclusive, adapted infrastructures such as ramps and braille materials ensuring that physical access translates into meaningful learning for students with disabilities.
- Expand the "5 Million Coders" initiative to move beyond basic digital literacy toward advanced ICT skills for global market competitiveness.

5.3. SDG 6: Clean Water and Sanitation

Conclusion Progress in SDG 6 remains slow, with 50% of indicators requiring "Accelerated Effort". As of late 2025, a stark supply-demand gap exists, with a daily water demand of 1.1 million cubic meters against a production capacity of only 850,000 cubic meters. While household connection to modern sewage networks has risen from 16%

to 39%, the city is still far from universal coverage. Large-scale infrastructure projects, such as the Gerbi Dam and the Kaliti wastewater treatment plant, are critical milestones but have faced significant financing hurdles.

Recommendations

- Prioritize the completion and operationalization of the Koye Feche and Eastern Catchment wastewater treatment plants to expand city-wide capacity.
- Transition to an IWRM model that incorporates wastewater reuse for irrigation and industrial purposes, as demonstrated by the modernized Kaliti plant.

5.4. SDG 8: Decent Work and Economic Growth

Conclusion The labor market in Addis Ababa is under considerable strain, with 25% of indicators requiring "Targeted Intervention". While the city has successfully expanded banking infrastructure to 130.5 branches per 100,000 adults, structural issues like high female unemployment (27.7%) and persistent fatal occupational injuries remain pressing. Economic growth (GCP per capita) has been volatile, impacted by COVID-19 and regional instability. Tourism, a vital sector, has shown a robust recovery in arrivals but its direct contribution to the city's GCP remains below 2015/16 levels.

Recommendations

- Strengthen the enforcement of OHS standards through increased workplace inspections and employer accountability measures.
- Implement targeted entrepreneurship programs to reduce the 14% gender gap in unemployment.
- Formalize the informal labor sector by simplifying business registration processes and expanding social protection schemes for micro-enterprises.

- Diversify tourism products to include sustainable and cultural heritage corridors, increasing the share of green jobs.

5.5. SDG 9: Industry, Innovation, and Infrastructure

Conclusion Addis Ababa is on track with 66.67% of its SDG 9 indicators. Manufacturing employment has reached the city's 15.1% target. However, Manufacturing Value Added (MVA) as a proportion of GCP is highly volatile, reflecting structural weaknesses and supply chain disruptions. The transport sector faces a severe disconnect; while passenger volumes have increased to 3.3 million, users suffer from long waiting times and extreme peak-hour congestion. Small-scale industries struggle to contribute significantly to value added due to restrictive collateral requirements and high interest rates on loans.

Recommendations

- Expand credit guarantee schemes and ease collateral requirements for small-scale industries to bridge the ETB 3 billion gap in credit access.
- Prioritize the expansion of mass transit systems to reduce the 80% dependency on minibus taxis.

5.6. SDG 11: Sustainable Cities and Communities

Conclusion Sustainable urban development shows mixed results, with 50% of indicators requiring targeted intervention. Notable achievements include 91% solid waste collection coverage and the expansion of public open spaces through corridor development. However, the city faces rising reports of physical and sexual harassment against women and minors. Air quality remains a major health hazard, with elevated level of PM2.5. Disaster vulnerability persists, particularly for informal settlements located in flood-prone riverside areas.

Recommendations

- Develop and implement mechanisms to monitor and address digital and social media-based harassment.
- Accelerate the relocation of households from high-risk flood zones and riverside settlements into safe, permanent housing.
- Enforce stricter industrial emission controls and regulations for older, high-emission vehicles to align with the national PM2.5 target of 15 µg/m³.

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Annex 1: SDG Indicators Data Set

Indicators	Local Target 2030	Achievements									Data Source	Status
		2015 /16	2016 /17	2017 /18	2018 /19	2019 /20	2020 /21	2021 /22	2022 /23	2023 /24		
SDG 3/ GOOD HEALTH AND WELL BEING												
3.1.1. Maternal mortality ratio.	35	22.5	33.8	52.9	41.7	18.2	25.7	45.3	44.3	35.8	DHIS2,HMIS,H STP	Achieved
3.1.2. Proportion of births attended by skilled health personnels.	100%	100%	100%	100%	100%	100%	100%	99.99 %	99.9 8%	99.94 %	DHIS2/HMIS	Achieved
3.2.1. Under 5 mortality rate	25	0.15	0.04	0.55	0.99	0.4	0.47	0.58	0.47	0.42	DHIS2,HMIS,H STP	Achieved
3.2.2. Neonatal mortality rate	12.5	9	9	14	10.2	9.2	10.2	9	10.8	9.3	DHIS2/HMIS	Achieved
3.3.1. Number of new HIV infections per 1,000 uninfected population, by sex, age and key populations	0	2.42	3.39	3.98	2.75	2.83	2.29	2.19	2.23	2.14	DHIS2/HMIS	Accelerated Efforts Needed
3.3.2. Tuberculosis incidence per 100,000 population	48.4	251	272	257	274	267	241	251	245	230	DHIS2/HMIS	Needs Targeted Intervention
3.3.3. Malaria incidence per 1,000 population	0	1.34	1.13	0.8	0.58	0.78	0.52	0.56	1.18	2.34	DHIS2/HMIS	Needs Targeted Intervention
3.3.4. Hepatitis B incidence per 100,000 population	600	5,000	8,955	2,164	1,718	1,588	1,144	1,344	889	957	DHIS2,HMIS,H STP,WHO SDG	Accelerated Efforts Needed
3.4.2. Suicide mortality rate	11	14.5	13.3	12.2	9	10.8	9.8	5	3.1	5.9	DHIS2,HMIS,H STP, WHO SDG	Achieved

Indicators	Local Target 2030	Achievements									Data Source	Status
		2015 /16	2016 /17	2017 /18	2018 /19	2019 /20	2020 /21	2021 /22	2022 /23	2023 /24		
3.5.1. Coverage of treatment interventions (pharmacological, psychosocial and rehabilitation and aftercare services) for substance use disorders	↑	1210	1481	1624	6562	9484	2179	1302	1341	2705	DHIS2,HMIS,H STP	On Track
3.6.1. Death rate due to road traffic injuries	17.3	25	25.3	25.6	32	29.4	24.6	26.5	17.2	18.6	DHIS2,HMIS,H STP, WHO SDG	On Track
3.7.2. Adolescent birth rate (aged 10–14 years; aged 15–19 years) per 1,000 women in that age group	10	15	13	9.9	25	22	25	21	18.4	11	DHIS2/HMIS/H STP I&II/ HSDIP	On Track
SDG 4: Quality Education												
4.2.2. Participation rate in organized learning (one year before the official primary entry age), by sex (Male)	100%	95.85 %	93.22 %	93.45 %	97.86 %	106.07 %	101%	117%	105.7 5%	146.60 %	Educational Statistics Annual Abstract	Achieved
4.2.2. Participation rate in organized learning (one year before the official primary entry age), by sex (Female)	100%	92.24 %	90.63 %	89.90 %	94.21 %	101.83 %	96%	116%	105.8 0%	142.18	Educational Statistics Annual Abstract	Achieved
4.3.1. Participation rate of youth and adults in formal and non-formal education and training in the previous 12 months, by sex	↓	27348	16264	17444	17152	14698	9278	9058	8021	6586	Educational Statistics Annual Abstract	On Track

Indicators	Local Target 2030	Achievements									Data Source	Status
		2015 /16	2016 /17	2017 /18	2018 /19	2019 /20	2020 /21	2021 /22	2022 /23	2023 /24		
4.4.1. Proportion of youth and adults with information and communications technology (ICT) skills, by type of skill	85%	87%	87%	92%	92%	92%	92%	100%	100%	100%	Educational Statistics Annual Abstract	Achieved
4.5.1.(a) Gender Parity Index (GPI) in enrollment at pre-primary school	1	0.96	0.97	0.96	0.96	0.95	0.95	0.98	1.06	0.96	Educational Statistics Annual Abstract	Achieved
4.5.1.(b) Gender Parity Index (GPI) in enrollment at primary and middle level school	1	1.07	1.15	1.14	1.17	1.21	1.12	1.16	1.02	1.03	Educational Statistics Annual Abstract	Achieved
4.5.1.(c) Gender Parity Index (GPI) in enrollment at secondary level school	1	1.08	1.1	1.23	1.2	1.16	1.22	1.09	1	1.23	Educational Statistics Annual Abstract	Achieved
4.5.1.(d) Transition rate from primary and middle level to secondary school (Male)	90%	75.80 %	76.70%	71.90%	68.60%	85.05%	87.81%	90.95%	79.24 %	84.11 %	Educational Statistics Annual Abstract	On Track
4.5.1.(d) Transition rate from primary and middle level to secondary school (Female)	90%	66.80 %	67.70%	62.50%	72.70%	76.19%	88.01%	82.12%	65.44 %	74.55 %	Educational Statistics Annual Abstract	On Track
4.a.1.(a) Proportion of schools with access to electricity	100%	-	-	-	100%	100%	100%	100%	100%	100%	Educational Statistics Annual Abstract	Achieved

Indicators	Local Target 2030	Achievements									Data Source	Status
		2015 /16	2016 /17	2017 /18	2018 /19	2019 /20	2020 /21	2021 /22	2022 /23	2023 /24		
4.a.1.(b) Proportion of schools with access to the Internet for pedagogical purposes	100%	92%	92%	100%	100%	100%	100%	100%	100%	100%	Educational Statistics Annual Abstract	Achieved
4.a.1.(c) Proportion of schools with access to computers for pedagogical purposes;	100%	92%	92%	92%	100%	100%	100%	100%	100%	100%	Educational Statistics Annual Abstract	Achieved
4.a.1.(d) Proportion of schools with access to adapted infrastructure and materials for students with disabilities;	100%	50%	65%	70%	85%	85%	90%	100%	100%	100%	Educational Statistics Annual Abstract	Achieved
4.a.1.(e) Proportion of schools with access to basic drinking water;	100%	90.60 %	90%	87.6%	91%	87.91 %	98.85 %	95.60 %	98.02	100%	Educational Statistics Annual Abstract	Achieved
4.a.1.(f1) Proportion of schools with access to single-sex basic sanitation facilities; pre primary (Male)	1:30	1:37	1:34	1:57	1:58	1:44	1:52	1:37	1:37	1:35	Educational Statistics Annual Abstract	On Track
4.a.1.(f1) Proportion of schools with access to single-sex basic sanitation facilities; pre primary (Female)	1:30	1:34	1:37	1:58	1:57	1:41	1:51	1:63	1:61	1:33	Educational Statistics Annual Abstract	On Track
4.a.1.(f2) Proportion of schools with access to single-sex basic sanitation facilities; Primary and middle level (Male)	1:50	1:64	1:58	1:70	1:70	1:60	1:46	1:61	1:61	1:44	Educational Statistics Annual Abstract	Achieved

Indicators	Local Target 2030	Achievements									Data Source	Status
		2015 /16	2016 /17	2017 /18	2018 /19	2019 /20	2020 /21	2021 /22	2022 /23	2023 /24		
4.a.1.(f2) Proportion of schools with access to single-sex basic sanitation facilities; Primary and middle level (Female)	1:40	1:84	1:69	1:93	1:93	1:69	1:52	1:61	1:61	1:44	Educational Statistics Annual Abstract	On Track
4.a.1.(f3) Proportion of schools with access to single-sex basic sanitation facilities; Secondary (Male)	1:40	1:55	1:37	1:63	1:63	1:42	1:62	1:61	1:27	1:39	Educational Statistics Annual Abstract	Achieved
4.a.1.(f3) Proportion of schools with access to single-sex basic sanitation facilities; Secondary (Female)	1:40	1:69	1:49	1:76	1:76	1:53	1:64	1:74	1:37	1:44	Educational Statistics Annual Abstract	On Track
4.a.1.(g1) Proportion of schools with access to basic handwashing facilities Pre primary	1:20	1:55	1:37	1:33	1:33	1:15	1:40	1:25	1:25	1:17	Educational Statistics Annual Abstract	Achieved
4.a.1.(g2) Proportion of schools with access to basic handwashing facilities Primary and middle level	1:42	1:84	1:72	1:63	1:63	1:46	1:40	1:28	1:28	1:21	Educational Statistics Annual Abstract	Achieved
4.a.1.(g3) Proportion of schools with access to basic handwashing facilities Secondary	1:40	1:65	1:55	1:60	1:60	1:44	1:47	1:45	1:33	1:22	Educational Statistics Annual Abstract	Achieved

Indicators	Local Target 2030	Achievements									Data Source	Status
		2015 /16	2016 /17	2017 /18	2018 /19	2019 /20	2020 /21	2021 /22	2022 /23	2023 /24		
SDG 6: Clean Water and Sanitation												
6.1.1. Proportion of population using safely managed drinking water services	100%	51%	51%	52%	52%	52%	53%	54%	55%	57%	AAWSA Report	Accelerated Effort Needed
6.2.1.(a) Proportion of population connected to modern sewage network	100%	16%	17%	17%	23%	29%	30%	31%	36%	39%	AAWSA Report	Accelerated Effort Needed
6.2.1.(b) Proportion of population using a hand-washing facility with soap and water	100%	62%	65%	66%	69%	71%	73%	74%	76%	78%	Ministry of water and Energy	On Track
6.3.1. Proportion of wastewater safely treated	100%	64%	71%	76%	79%	80%	80%	80%	80%	83%	AAWSA Report	On Track
SDG 8: Decent Work and Economic Growth												
8.1.1. Annual growth rate of real GCP per capita	↑	-	0	4.53	5.83	9.66	4.39	4.65	8.63	4.05	ESS	Accelerated Effort Needed
8.2.1. Annual growth rate of real GCP per employed person	↑	-	4.56	2.46	6.54	10.39	20.81	0.04	-0.96	1.87	ESS	On Track

Indicators	Local Target 2030	Achievements									Data Source	Status
		2015 /16	2016 /17	2017 /18	2018 /19	2019 /20	2020 /21	2021 /22	2022 /23	2023 /24		
8.3.1. Proportion of informal employment in non-agriculture employment, (Male)	↓	-	12.4	13.9	8.3	-	5.9	7	7.4	-	ESS	Accelerated Effort Needed
8.3.1. Proportion of informal employment in non-agriculture employment, (Female)	↓	-	13.9	9	9	-	7.7	2.3	7.9	-	ESS	Accelerated Effort Needed
8.5.2.(a) Unemployment rate, (Male)	↓	14.4	12.4	-	14.1	-	15.1	15.3	17.5	14.4	ESS	Needs Targeted Intervention
8.5.2.(a) Unemployment rate, (Male)	↓	28.6	30	-	26.3	-	23.8	29	27.7	28.6	ESS	Needs Targeted Intervention
8.8.1.(a) Frequency rates of fatal occupational injuries	↓	50	102	82	75	40	65	-	-	-	ESS & Labor and Skill Bureau	Accelerated Effort Needed
8.9.1. Tourism direct GDP as a proportion of total GDP and in growth rate	↑	11.28	9.74	8.06	8.45	6.77	6.14	7.04	6.63	11.28	AAPDB	Needs Targeted Intervention
8.9.2. Proportion of jobs in sustainable tourism industries out of total tourism jobs	↑	2.74	4.08	2.69	1.63	2.27	2.32	2.43	2.54	2.74	AAPDB	On Track

Indicators	Local Target 2030	Achievements									Data Source	Status
		2015 /16	2016 /17	2017 /18	2018 /19	2019 /20	2020 /21	2021 /22	2022 /23	2023 /24		
8.10.1. (a) Number of commercial bank branches per 100,000 adults (ATMs) per 100,000 adults	↑	54.10	63.66	71.75	81.24	91.22	103.68	127.49	130.50	54.10	NBE	Achieved
SDG 9: Industry, Innovation and Infrastructure												
9.1.2. Passenger and freight volumes, by mode of transport (in million)	3.64	2.18	2.22	2.31	2.5	2.6	2.9	3.01	3.13	3.3	Transport and Logistic Minister Admin Data	On Track
9.2.1. Manufacturing value added as a proportion of GDP and per capita	17.5	15.38 %	14%	8.40%	17.10 %	4.40%	10.25	11.6	7	12.19	Industry Development Bureau & AAPDB GTP-2 Report	On Track
9.2.2. Manufacturing employment as a proportion of total employment	15.1	14%	13%	13%	12%	12%	22%	21.60 %	14.20 %	15.10 %	Industry Development Bureau & AAPDB GTP-2 Report	On Track
9.3.1. Proportion of small-scale industries in total industry value added	15.8	12.30 %	12.70 %	12.50 %	13.10 %	12.70 %	10.66 %	11.06 %	10.66 %	10.95 %	Industry Development Bureau & AAPDB GTP-2 Report	Accelerated Effort Needed
9.3.2. Accessed loan or credit by small-scale industries (in million)	4000	214	256	289	312	317	562	579	642	860	Industry Development Bureau & AAPDB GTP-2 Report	Needs Targeted Intervention

Indicators	Local Target 2030	Achievements									Data Source	Status
		2015 /16	2016 /17	2017 /18	2018 /19	2019 /20	2020 /21	2021 /22	2022 /23	2023 /24		
9.4.1. CO2 emission per unit of value added	↓	0.0022	0.0022	0.0021	0.0021	0.0021	0.002	0.0018	0.0018	0.0017	CO ₂ Emissions Intensity Analysis Addis Ababa (2015–2024)	Achieved
SDG 11: Sustainable Cities and Communities												
11.4.1. Total expenditure (public and private) per capita spent on the preservation, protection and conservation of all cultural and natural heritage (in USD)	↑	-	0.065	0.2522	0.1072	0.0478	0.059	0.1794	0.1659	0.2484	AA Culture, Arts, and Tourism Bureau	Accelerated Efforts Needed
11.5.1a. Number of deaths attributed to disasters per 100,000 population	↓	-	-	1.92	1.79	2.11	2.82	2.78	2.02	1.70	AA Fire and Disaster Risk Management Commission	On Track
11.5.1b. Number of directly affected persons attributed to disasters per 100,000 population	↓	-	-	2.15	2.36	3.11	3.33	5.43	3.21	3.32	AA Fire and Disaster Risk Management Commission	Accelerated Efforts Needed
11.5.2: Proportion of direct economic loss in relation to AA GCP attributed to disasters	↓			0.000235	0.000239	0.000434	0.000583	0.000337	0.000846	0.000119	AA Fire and Disaster Risk Management Commission	Accelerated Efforts Needed
11.6.1. Proportion of urban solid waste regularly collected out of total urban solid waste generated	↑	-	-	74	76	78	85	87	89	90	AA Cleansing Management Agency	Achieved

Indicators	Local Target 2030	Achievements									Data Source	Status
		2015 /16	2016 /17	2017 /18	2018 /19	2019 /20	2020 /21	2021 /22	2022 /23	2023 /24		
11.6.2: Annual mean levels of fine particulate matter (PM2.5)	15	32.0	34.2	31.6	30.6	33.2	31.5	32.2	28.8	-	AAEPA	Accelerated Efforts Needed
11.7.1: Average share of the built-up area of cities that is open space for public use and for all disabilities)	↑	-	1.52	1.52	2.80	2.80	3.0	3.0	3.05	-	AA Urban Beautification and Green Development Bureau	Achieved
11.7.2(a): Proportion of persons victim of physical or sexual harassment, (< 18 years, Male)	↓	-	-	-	52	55	92	71	108	109	Women, children, & Social Affairs Bureau	Needs Targeted Intervention
11.7.2(a): Proportion of persons victim of physical or sexual harassment, (< 18 years, Female)	↓	-	-	-	647	1139	1136	880	905	1002	Women, children, & Social Affairs Bureau	Accelerated Efforts Needed
11.7.2(b): Number and proportion of women victim of physical or sexual harassment (women aged ≥ 18 years)	↓	-	-	-	793	235	398	283	396	511	Women, children, & Social Affairs Bureau	Accelerated Efforts Needed

Annex 2: Stakeholders consultation participants

S/N	Name of Organizations	Number of Participants	Discussion Focus/ SDG Number
1	Ethiopian Public Health Institute	1	SDG 3
2	St. Paul's Hospital Millennium Medical College	1	
3	United Nations Population Fund (UNFPA)	1	
4	Save the Children	1	
5	Amref Health Africa	1	
6	Ethiopian Pediatric Society	1	
7	Ethiopian Midwives Association	1	
8	Armauer Hansen Research Institute	1	
9	Addis Ababa Health Bureau	1	
10	Ethiopian Statistics Service	1	SDG 4
11	World Vision International	1	
12	Addis Ababa Education Bureau	1	
13	Kotebe University of Education	1	
14	UNICEF	1	
15	United Nations Development Programme (UNDP)	1	
16	Addis Ababa Education Bureau (Technical)	1	SDG 6 & 8
17	AAWSA	1	
18	World Resources Institute (WRI)	2	
19	WaterAid	1	
20	Ethiopian Water Technology Institute	1	
21	Addis Ababa Plan and Development Commission	1	
22	National Bank of Ethiopia	1	
23	Addis Ababa University	1	
24	UN Economic Commission for Africa (UNECA)	3	SDG 9
25	Addis Ababa Science and Technology University	1	
26	Industrial Park Development Corporation (IPDC)	1	
27	Anbessa City Bus Service Enterprise	1	
28	Ethiopian Investment Commission	1	
29	Ethiopian Chamber of Commerce & Sectoral Associations	1	
30	International Labor Organization (ILO)	1	
31	Development Bank of Ethiopia	1	
32	Addis Credit and Saving Institution	1	SDG 11
33	Ethiopian Heritage Authority	1	
34	AA Fire & Disaster Risk Management Commission	1	
35	Collection Cooperative	1	
36	Addis Ababa Police Commission	1	
37	Ethiopian Women Lawyers Association	1	
38	Addis Ababa Environmental Protection Authority	1	SDG 3, 4, 6, 8, 9 & 11
39	Members of Addis Ababa City Council	5	