Ethio-Swedish collaboration for health development began in 1883 when the first Swedish missionaries arrived in Ethiopia. Their initial focus was on education and health care in areas where no government schools or health-care facilities existed. A school and medical clinic were started in Addis Ababa by the missionaries in 1904.

Ethio-Swedish paediatric clinic (ESPC) was established in 1957 to be followed by the Ethiopian Nutrition Institute (ENI) 5 years later. The collaboration thus commenced has survived regime change from absolute monarchy to Marxist dictatorship to this date.

ESPC developed evidence-based treatment regimens for current illnesses including malnutrition, diarrhoeal disease and acute respiratory infection, as well as model outreach programmes of preventive/promotive care for mothers and children including immunization. As programmes flourished, ESPC became part of the Medical Faculty of the University of Addis Ababa, and helped evolve training programmes for medical under- and post-graduates as well as for nurses.

From these seeds of medical and nursing education planted nearly half a century ago, Ethiopia now has 10 medical schools qualifying nearly 2000 graduates every year and a world class output of medical research.

At the grass roots level, Swedish missionary societies have been making a crucial contribution of strengthening the rural health services by setting up primary care clinics run by nurses and midwives, and small rural hospitals.

ENI, established in the early 1960s, has also had an illustrious record. Early work of the institute involved conducting nutrition and health surveys for delineating the nutrition profile of different regions of the country, analysis of indigenous diets and ways of enriching them. At the same time, training programmes in clinical nutrition for all levels of health workers were commenced. Rickets as a public health problem (prevalence rates of 24–65% in children <2 years old) and goitre (prevalence rates of 25–33% in 10 years old in some areas) were identified for control and prevention. Deficiencies in maternal nutrition affecting fetal growth, and in particular that of vitamin A, have been identified as major challenges.

Development of Ethiopian Food Tables, the culmination of several years’ painstaking work in the laboratory, has been another ground-breaking outcome. The tables went on to provide the underpinning of all future research in nutritional aspects of health. Another outcome has been the production of a weaning food popularly known as FAFFA—also a culmination of many months’ work in the laboratory and in the field. FAFFA has withstood the test of time. The production capacity has now reached 10 000 tons per year, and is one of the ‘star’ achievements of ENI. FAFFA proved invaluable during the famines of 1970s and 1980s when it was used for the feeding of thousands of refugees, both adults and children, as well as for supplementing feeding of pre-school children, pregnant and lactating women and for intensive feeding of severely malnourished children.

Ethiopia is now well on its way to achieving the Millennium Development Goals for infant and maternal mortality.

The experience provides many lessons in North–South collaboration. Problems of ill-health and under-nutrition are chronic and deep rooted in the society. In a climate of mutual trust, collaboration over a sufficiently long period can help create the critical mass of scientists, professionals, technicians including their teachers needed for getting out of the rut of under-development and move forward.

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