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Health-economics of vaccines in Ethiopia

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Propositions

1. The increase in full childhood vaccine coverage in Ethiopia over time is attributed in part to a shift in the composition of maternal educational level and maternal health care use (this thesis).
2. In Ethiopia, suboptimal vaccination coverage is accompanied by significant regional and socioeconomic inequalities (this thesis).
3. Despite an increase in overall national measles vaccine coverage in Ethiopia between 2005 and 2016, socioeconomic disparities in vaccination coverage remained (this thesis).
4. When evaluating the performance of their immunization program, Ethiopian policymakers should place equal emphasis on equity gains as on national average vaccination coverage (this thesis).
5. To achieve meaningful equity-oriented vaccination coverage in Ethiopia, policymakers should prioritize improving educational attainment, maternal health care utilization, and public awareness, particularly among economically disadvantaged households (this thesis).
6. A single-dose HPV vaccination strategy would address the current global shortage of HPV vaccines while also being more logistically feasible and less expensive, allowing more people to be vaccinated (this thesis).
7. In Ethiopia, replacing the 4vHPV vaccine with the 9vHPV vaccine would significantly reduce morbidity and mortality associated with HPV-caused cervical cancer and would be a cost-effective decision (this thesis).
8. Vaccines, by virtue of their preventative nature, can help to reduce health disparities, medical impoverishment, and, ultimately, poverty (Verguet, 2018).
9. Just do your job ...follow the purpose of your life and the purpose for which you were created (Abune Gorgoreyos II).
10. Preventive war is like committing suicide out of fear of death (Otto von Bismarck)
11. Forgiveness is the ultimate preventive medicine, as well as the greatest healer (Marianne Williamson)