

Feldsher Training in Kyrgyzstan Increases Access to Quality Care and Saves Lives

February 2006

One-year-old Aidana had been sick for a while. Aileta, her mother, thought it was simply a cold, even though there were times when her breathing seemed to stop. But then something changed...Early in the morning, the child had a high temperature. Aidana moaned a few times, and then her breathing seemed to stop and she became unconscious and pale. Stimulating the child by dousing her face with water and gently slapping her cheeks did not help and, panicked, Aileta quickly called the ambulance. Soon, Aileta and Aidana were put in an ambulance to reach the closest children's hospital, 15 minutes away.

While the emergency response doctor was sitting in the front of the ambulance, Damira, an ambulance feldsher – or medic - who had recently completed a new ZdravPlus training course in basic emergency care, was in the back with the mother and child. Damira knew she had to do something to save Aidana – and quickly. She asked Aileta to pass Aidana to her, and then holding the child on her lap, she swiftly assessed the girl and realized that she was not breathing and had no pulse.

Remembering what she had learned in the course, she started CPR. After a few cycles, the child started to breathe by herself. Her pulse was still weak, but palpable. But the child's body was cold and shivering. When Damira wrapped the child in her jacket, the child's condition improved rapidly, she regained consciousness, began to cry, and her skin color changed from pale to rosy.

A few weeks later, during a follow-up visit, Aidana was doing very well and her mother did not know how to adequately thank the feldsher for her help. Damira also was very happy that she was able to save Aidana's life. When asked what she would have done in a similar situation before the seminar, Damira replied, "Nothing, because I simply would not have known what to do."

Improving Access to Care in Rural Areas

Building on 10 years of successful health reforms, Kyrgyzstan is implementing a new health reform strategy called Manas Taalimi. The strategy seeks to institutionalize reforms that strengthened PHC in newly formed Family

Group Practices (FGPs) and begin implementing additional activities to further improve health access, quality, equity, and efficiency. The strategy envisions additional PHC training for: 1) ambulance feldshers stationed at Family Medicine Centers (FMCs) working as first responders to emergency calls; and 2) feldshers working in Feldsher-Midwife Points (known by the Russian acronym FAP) who serve in rural areas as first points of contact in the health care system for approximately 40 percent of the population.

ZdravPlus is supporting the Ministry of Health to implement these next generation reforms, and began by supporting training for feldsher trainers, ambulance feldshers, and FAP feldshers in 2005. Expatriate doctors and nurses working for ZdravPlus subcontracting partner the Scientific Technology and Language Institute (STLI) provided on-the-ground technical expertise to design and implement the feldsher training. The training was co-funded by ZdravPlus and the World Bank Health II Project.

Training Feldsher-Trainers

In January 2005, the ZdravPlus/STLI Emergency Medical Service Training (EMST) team in conjunction with the Kyrgyz State Medical Institute for Retraining and Continuing Medical Education selected two practicing ambulance feldshers and two practicing FAP feldshers from Bishkek, Osh, and each oblast to become feldsher-trainers. These 22 feldsher-trainers were given a four-week emergency medical care course in February. The FAP feldsher-trainers received an additional five months of specialized primary care training sponsored by the World Bank Project.



The Feldsher Training Program Emphasizes Practicing New Skills

In July, all 22 of the feldsher-trainers received an additional two weeks of training in teaching methods and practical workshops. The course finished with a written exam and with trainees required to individually demonstrate their newly acquired skills in scenario situations. All feldsher-trainers successfully passed their examinations and were awarded Diplomas in Teaching, becoming the first feldshers in Central Asia to be granted permission to teach.

In addition to supporting the training-of-trainers, the World Bank Project provided basic training sets for all of the Family Medicine Training Centers (FMTC) (including manikins, cervical collars, and spinal boards), ambulance worker bags for 60 FMC emergency departments where ambulance feldshers are stationed, and basic equipment bags for 867 rural FAPs.

Training Ambulance Feldshers

The EMST team developed a curriculum for a two-week basic emergency care course that would be taught to ambulance feldshers by these new trainers in each oblast. The course included communication with the patient, scene awareness, primary and secondary assessment, patient positioning, airway management, cardiopulmonary resuscitation, medical emergencies, emergency obstetrics, and trauma. The course was piloted in May with several of the feldsher-trainers to refine the teaching material, adjust teaching practices to local needs, and assess how the new trainers performed. The pilot went well and the focus on clinically relevant material and practical sessions proved very popular with the students.

Building on the results of the pilot, the nine ambulance feldsher-trainers conducted 17 two-week

trainings for 313 ambulance feldshers at FMTCs in each oblast, under the supervision of the EMST team. Students were



enthusiastic in their praise for the course. One ambulance feldsher commented, “I realized in this course that I didn’t know many things. After the course, I think I’ll be better equipped to help. I also realized that people in emergencies really need my care.” Another course graduate noted, “What I really liked was the practical training. I’ve attended many courses, but we never practiced what we learned.”

Training FAP Feldshers

After completing the additional five-month training-of-trainers course in July, the 13 FAP feldsher-trainers have been teaching the WHO’s Integrated Management of Childhood Illnesses (IMCI) strategy to FAP feldshers throughout the country in conjunction with more experienced FMTC physician trainers. To date nearly 300 FAP feldshers have received training in IMCI from FMTC physician trainers and new FAP feldsher-trainers. Under the Manas Taalimi strategy, it is hoped that future continuing medical education for FAP feldshers will be funded through the Kyrgyzstan State budget. Courses may include a seven-day emergency medical care course or five days of training in WHO’s Practical Approach to Lung Health.

Both ambulance and FAP feldsher training will improve first-line care for rural populations and contribute to more timely management of emergencies and acute illnesses closer to people’s homes. One day in the future, all of the newly trained feldshers in Kyrgyzstan undoubtedly will have a story like Damira’s to tell – of a life saved and an eternally grateful mother.

For more information

Kazakhstan
39 Begalina St.
Almaty 050010
Tel.: (7-3272) 91-57-75,
91-92-85
Fax: (7-3272) 91-93-70

Kyrgyzstan
1 Togolok Moldo St.
Bishkek, 720405,
Tel.: (996-312) 66-38-16,
66-37-08, 66-35-09
Fax: (996-312) 66-10-24

Tajikistan
10 Chapaeva St.
Dushanbe 734025,
Tel.: (992-372) 27-62-65
Fax: (992-372) 23-17-17

Turkmenistan
43/4Gyrogly St.
Ashgabat, 744020
Tel.: (993-12) 34-42-42
Fax: (993-12) 34-42-42

Uzbekistan
16 Bozbozor St.
Tashkent, 700007
Tel.: (998-71) 169-22-12,
169-22-11
Fax: (998-71) 169-14-92