

# Road to Results



## IMCI is Making a Difference for Turkmenistan's Youngest Generation

June 2006

Despite the often-challenging environment in Turkmenistan, positive changes are taking place in health care to benefit Turkmenistan's children, thanks to the Ministry of Health and multilateral support for WHO's Integrated Management of Childhood Illnesses (IMCI) strategy.

The USAID-funded ZdravPlus and Healthy Family Projects have been working with the MOH since 2002 to implement the IMCI strategy on several levels, including trainings for doctors and nurses, introduction of IMCI into the medical education system, and informing parents through community outreach activities. To date, IMCI activities have expanded to cover at least two etraps (districts), in each of the country's five velayats (regions).

**Evidence-based approaches** - When children become ill, incorrect or unnecessary treatment can mean prolonged sickness and in some cases death from conditions that are often easily treatable. By providing doctors with evidence-based tools to assess and manage common conditions in children under age five, the IMCI strategy aims to reduce the most common causes of death among young children.

The IMCI strategy focuses on home care for the majority of cases, with more serious symptoms addressed in the outpatient primary care setting and only the most serious cases referred for inpatient hospital care. This represents a drastic contrast to the Soviet approach, still prevalent in much of Turkmenistan, which recommends decreased food and drink and encourages referrals to specialists,

hospitalization, and use of multiple drugs in treatment of even simple conditions like diarrhea.

Aysoltan Halitova, a family physician, recently took part in the 12-day IMCI training in Mary Velayat, supported by ZdravPlus. The course included a hands-on clinical component with patients and interactive lectures led by national- and velayats-level trainers from the Republican Mother and Child Health (MCH) Institute – which has been implementing IMCI trainings around the country for the MOH since the program began. However, using IMCI in their everyday practice has meant significant changes in the way physicians manage child illness in Turkmenistan, and Aysoltan was understandably skeptical. But she decided to give the new methods a try when her *own* son got a cold, cough, rapid breathing and a temperature, as evidence of pneumonia. She gave her son the appropriate antibiotic in syrup instead of an injection—in accordance with the IMCI recommendations, but a new approach in an environment where injectables have traditionally been believed to be more effective—and continued to give him food and liquid as usual. Aysoltan was pleased to see that her son started recovering the following day and that the infection quickly cleared up with no need for prolonged treatment; she is now using IMCI recommended treatments on all of her young patients.

Aysoltan is just one of the nearly 800 physicians who have been trained in IMCI since 2002. ZdravPlus began the trainings in just two etraps – designated in negotiations between the MOH and UNICEF, which provides the necessary IMCI drugs. The trainings have now expanded to ten etraps, with two in each velayat. Over the years, both ZdravPlus and Healthy Family have supported funding for both the trainees and the 30 national- and velayat-level trainers, who also lead monitoring and evaluation trips to support the newly trained physicians upon their return to their PHC facilities. Trainings are ongoing in the five etraps most recently added, funded in this stage by ZdravPlus.

Building on the success of the Physician IMCI trainings, Healthy Family and ZdravPlus supported the MCH Institute to begin trainings for nurses in the strategy. Nurses play a vital role in health care.



*Family Physicians in Lebap Velayat Practice Newly Learned Skills*

They are often the population's first point of contact with the health care system, and they make home visits to families, making them ideally positioned to communicate key health messages to the population and conduct initial patient evaluations. Using WHO materials the MCH Institute developed an IMCI module for nurses in Turkmenistan. The training of trainers was conducted by ZdravPlus, while Healthy Family supported the five roll-out trainings. The one-hundred nurses trained to date across the five velayats are working together with IMCI-trained physicians to provide better care to their young patients and are reaching out to their communities to spread the key IMCI-related health messages. It is anticipated that Healthy Family will continue to provide Nurse IMCI training, covering up to another 400 nurses.

**Empowering the Population** - Penir's 3 month old is suffering from diarrhea; to help her baby she is using the evidence-based methods she learned during a Keeping Children Healthy (KCH) campaign—continuing to breastfeed, giving oral rehydration solution, and keeping an eye out for any warning signs that would require professional medical assistance. For her first 3 children, Penir would have reduced the amount she was breastfeeding and given antibiotics, as was previously recommended in such cases.

KCH campaigns have been implemented by ZdravPlus, in cooperation with the MOH and local authorities, since 2002 to educate the population on IMCI key messages on diarrhea, nutrition and breastfeeding, and acute respiratory infections. The campaigns have been so successful in large part because they and the informational materials that support the campaigns have all been developed specifically for the Turkmen environment in cooperation with local partners, based on WHO approved materials. The campaigns, now largely implemented by local health authorities, complement ZdravPlus and Healthy Family IMCI trainings for physicians and nurses, such that health care workers are giving the same advice that the population is receiving from leaflets, posters, and other mass-media outlets during the KCH campaign.

The campaigns rely heavily on nurses and their efforts to educate parents who bring their children into the health facility and whom they see during home visits. According to Penir, it was her family nurse who convinced her to use the new method, and asked other family members to listen as well, insisting that the child's health was everyone's responsibility.

**Educating Future Doctors** - While the MOH was strongly supporting KCH campaigns and IMCI trainings for current health care workers it was clear that unless future health care workers were trained in IMCI, outdated practices would persist. To address this issue, Healthy Family, together with the MCH Institute, reached an agreement with the MOH to incorporate IMCI into medical education. Taking one step closer to achieving sustainability in the use of IMCI in Turkmenistan, Healthy Family trained 38 professors at the Turkmenistan State Medical University, who will pass on this important training to future family physicians.

**Impact** - Since physician IMCI training began in 2002, ZdravPlus and Healthy Family have supported the MCH Institute in monitoring and evaluating the impact of the training. A Spring 2005 M&E report shows some positive results. The monitors found that the majority of physicians visited were putting their training into practice. Interviews with pilot etrap population showed a good awareness among care takers of young children of child health issues, including use of oral rehydration and knowledge of what danger signs indicate that it is time to see a doctor. There is also evidence that the health of children in the pilot etraps is improving; the number of preventative visits to PHC facilities have increased while the visits for treatment and hospital referrals have decreased.

Of course challenges still exist – physicians who move out of the pilot etraps find that they are not yet allowed to practice their new skills, and lack of equipment and poor facilities still hamper diagnosis and treatment at times. But well-trained, dedicated health care professionals such as Dr. Aysolan Halitova, and educated parents like Penir, are helping to improve the health of children throughout Turkmenistan.

## For more information

**Healthy Family Regional**  
52 Usta Shirin St  
Tashkent 700057  
Uzbekistan  
Tel/Fax : (998 71)  
120 55 96; 148 17 07;  
148 17 27

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

**Turkmenistan**  
ZdravPlus/Healthy Family  
43/4 Gyorogly St.  
Ashgabat 744020  
Tel/Fax: (993 12) 34 42 42