

Road to Results

ACHIEVING SUCCESS STEP BY STEP

Program Successes in Kazakhstan

August 2004

Safe Motherhood Project in Zhezkazgan Charts the Way to Better Care

In Zhezkazgan, a city of 103,000 in the middle of the Kazakh steppe, a ground-breaking pilot project supported by the USAID-funded ZdravPlus Project and The World Health Organization/Europe (WHO) is working to improve the quality of pre- and postnatal care for both women and their newborns.

Medical practices, begun during Soviet times and still largely in use today, treated pregnancy as an illness. Women were brought to hospitals for numerous prenatal visits, referred to various specialists, and batteries of lab tests and ultrasounds were conducted—resulting in the unnecessary hospitalization of most women during the prenatal period. Previously in Zhezkazgan, women received standard prenatal care in the hospital outpatient department, completely bypassing family group practices (FGPs), where most primary health care is provided. When admitted to the hospital for delivery, women endured long hospital stays and many intrusive medical interventions, including shaving and enemas before delivery and routine use of analgesics and episiotomies. Women were forced to deliver lying on their backs and outdated requirements for a completely sterile delivery room meant family members could not be present.

After training from ZdravPlus, however, everything changed. According to the Zhezkazgan maternity hospital staff, “When we told [the trainer] that he turned everything upside down for us, he replied, ‘No, quite the opposite, I put everything right-side up.’” Prenatal care has shifted away from the hospital, with two thirds of pregnant women now receiving care in FGPs. The number of prenatal visits has fallen by half, prenatal hospitalizations and the average length of stay have decreased, and fewer lab tests and ultrasound examinations are being performed.

As a result of the Safe Motherhood Project, women are able to pick their own delivery positions and are encouraged to have family members present during labor and delivery. The number of medical interventions such as caesarians, induced labors, and episiotomies has decreased, and patient satisfaction has increased, with 98 percent of women now saying they were “completely satisfied” with their care.

The changes in Zhezkazgan have revolutionized the practice of maternity care in Kazakhstan and the results have resonated elsewhere. Training has begun in Karaganda to prepare for the rollout of a similar program. Moreover, the Government of Kazakhstan, initially reluctant to embrace the WHO’s approaches, has adopted a new Perinatal Care Improvement Program, based on WHO principles.

The Drug Information Center in Karaganda Continues its Work in Educating Health Professionals and Population about Proper Pharmaceutical Use

Since opening its doors in August 2001, the Karaganda Drug Information Center (DIC) has provided up-to-date, evidence-based drug information to patients, pharmacists, and health care providers, using innovative methods to reach health professionals and the population alike.

The center conducts trainings and seminars for a variety health officials, primary health care (PHC) physicians, hospital staff, pharmacy specialists, and patients on everything from rational drug use and drug-side effects to evidence-based medicine (EBM). A recent chart audit of drug prescriptions shows a significant decrease in the prescription of antibiotics—credited to a combination of DIC work and trainings in integrated management of childhood illnesses (IMCI) which also took place at the sites. The most significant finding in the survey was the drop in prescriptions for antibiotics, often over prescribed,— from 42.1 to 25.6 percent—for children under age five with an acute respiratory infection (ARI).

In addition to its regular activities the DIC has published a landmark booklet on generic drugs, aimed at providing unbiased information about generics to a wide audience. The DIC has also been active in



The USAID-funded ZdravPlus Program provides technical assistance and training to improve the health of Central Asian populations by improving health delivery systems

community outreach, holding a series of trainings for high school students focusing on contraception, food supplementation, analgesics, and side-effects of drugs. A similar innovative program for the elderly has also been held.

A further branching out of activities includes the DIC's membership into the esteemed Eurasia DIC Network in the spring of 2003, thus expanding the Network's area to include Central Asia. The Karaganda DIC published the first Eurasia Network Bulletin in May 2003.

Future plans for the Center include the continuation of its proactive and innovative efforts—recently awarded its first grant, the Center is proving to be a viable and influential NGO.

Almaty Health Information System Development Project

In August 2002, the Almaty City Health Department requested technical assistance from ZdravPlus on a health information systems (HIS) project to develop a population database in order: 1) to ensure the correct registration of patients in outpatient polyclinic facilities, which has a serious impact on the city's health budget; and 2) to provide statistical, clinical, and financial data in order to improve the decision-making process in both the City Health Department and city health facilities.

In December 2003, an integrated population database from two pilot facilities in Almaty, developed through ZdravPlus support, was handed over to the Almaty City Health Department. The Almaty City Health Department, the two pilot health facilities, and ZdravPlus worked together over the course of a year to gather data for the population database through a process of open registration which allowed the population to select a primary health facility of their choice. Trained registrars visited each household in the community explaining the purpose of the registration. As a result, over 60,000 individuals became registered and their data was entered into the population database.

ZdravPlus procured equipment for the project including three full sets of advanced computer work stations, located in pilot health facilities, and a server, based in the City Health Department, then developed the database and provided training to operators and other staff of the pilot health facilities.

The population data that has been entered will serve as a model for creating the integrated population database planned by the City Health Department of Almaty.

Partnership for the Future

February 17, 2004 marked the official signing of a Memorandum of Understanding between Exxon Mobil and USAID to launch the first Global Development Alliance (GDA) in the Central Asia region: a joint partnership with equal funding provided by USAID and a private company— in this case, ExxonMobil. ZdravPlus and its local partner, the Kazakhstan Association of Family Physicians (KAFP), are implementing the project *Partnership: Improving the Health of the Capital's Children* in Astana. The project— which brings together the Astana City Health Department, the Astana Akimat, and the Ministry of Health, to work together with USAID, Exxon Mobil, KAFP, and ZdravPlus— has already provided training to approximately 60 doctors on the WHO's IMCI methodology, and will train approximately 60 more. Thousands of individuals have already received KAFP and ZdravPlus educational information on diarrhea, breastfeeding, and antibiotic use, and dozens are actively mobilized to educate others in their community through skits on these important topics. In addition, television spots help bring home campaign messages on diarrhea and acute respiratory infections, breastfeeding and antibiotic use.

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Since 1994, the ZdravPlus project (and its predecessor ZdravReform) has been working in Central Asia to reform the health care system and improve the quality of medical care provided to the population.

For more information

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