

Program Successes in Kazakhstan

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Drug Information Center in Karaganda Oblast Opens

A new Drug Information Center in Karaganda Oblast has opened to provide unbiased drug information to both physicians and patients, improve the formulary development process, promote the most appropriate approaches to case management of specific health problems, and assess drug availability and prices. Experienced physicians, pharmacologists, and pharmacists staff the Center. The Center has rapidly evolved into a drug information dissemination, research, and training center, publishing a quarterly newsletter and providing trainings to health professionals on drug pricing and purchasing, hypertension drug therapy, pharmaco-economics, rational use of antibiotics, and formulary development and use.

Results from the Center's drug pricing and availability surveys serve as practical management tools for oblast policymakers to improve drug availability and access for the population. The MOH is using oblast-level data — drug guidelines and costing data produced by the Drug Information Center — to make more informed national decisions about the financing and provision of health care. The Center's analysis provides accurate information to the MOH as they calculate the costs of various benefit packages and their implications for future health financing.

Keeping Children Healthy Campaign Improves Home Management of Childhood Illness

ZdravPlus' successful Keeping Children Healthy campaign has reached more than two million people in Kazakhstan and is being rolled out to new cities and oblasts. The main purpose of the campaign is to improve the knowledge and practices in recognizing and treating acute respiratory infections and diarrheal diseases, as well as advocating breastfeeding, hygiene, healthy habits, and proper nutrition. Targeted messages were provided through various media channels, print materials, and interactive communication strategies such as mother's groups, puppet shows, and health festivals. The health campaigns followed IMCI training provided by ZdravPlus, enhancing the overall impact of the IMCI strategy on health outcomes.

In all sites, the campaign was implemented through a joint effort of local organizations, such as PHC facilities, Centers for Healthy Lifestyles, health NGOs, and the local government. ZdravPlus and the National Center for Healthy Lifestyles have received numerous requests from health departments to implement the campaign in their oblast. The success of the campaign was due to this comprehensive approach, using different educational and information dissemination techniques, and various channels to deliver unified target messages. Results from pre and post-campaign surveys in Semipalatinsk are impressive with 13% more respondents reporting that they would feed their child more after an episode of diarrhea and 12% fewer respondents reporting that they would cease intake of food during and after an episode of diarrhea. Eight percent more respondents believe that breastmilk should be the only source of liquid and nutrition during the baby's first six months. Almost all of the respondents properly identified the three signs and symptoms that need immediate physician attention when a child is suffering from an acute respiratory infection, and 92% of respondents reported they would seek treatment in a FGP.

Medical Audit in Zhezkazgan and Satpaev Monitors Quality of Care

In 2001, a medical audit was conducted in Zhezkazgan and Satpaev Cities to assess knowledge and practices of family physicians and identify problem areas to develop clinical training programs for the future. The audit was the first attempt to comprehensively assess the impact of clinical training of FGP physicians on the quality of care provided at the PHC level. Over 650 records from 16 facilities were reviewed for six prevalent PHC conditions: arterial hypertension, bronchial asthma, acute respiratory infections in children, diarrhea in children, anemia in adolescent girls and women of reproductive age,



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

and care of pregnant women. Review of the records focused on examining diagnostics, treatment, and management of the conditions.

The records review revealed many positive accomplishments of FGP staff in these two pilot sites, especially when making a diagnosis. FGP staff measured arterial pressure in 97% of hypertension cases, referred 67% of adolescent girls and women of reproductive age for hemoglobin testing justified by high levels of anemia in the region, and measured arterial pressure and tested for hemoglobin level in 93% and 98% of pregnant women, respectively. Deficiencies were noted in other areas of diagnosis, especially when examining children with acute respiratory infections and diarrhea and in under-diagnosing asthma. Treatment or management of these conditions often was lacking, with a continued over-reliance on antibiotics, unnecessary injections of antibiotics, inadequate doses and duration of prescribed treatment. FGP staff were not always familiar with current prescribing trends, had to deal with patient expectations for antibiotics or injections, did not have necessary diagnostic or lab equipment, and often recommended lines of treatment that were cost-prohibitive for patients.

The results of the medical audit informed oblast and facility-level decision-makers, as well as donors about the need for continued and more targeted training in PHC conditions and development of evidence-based clinical guidelines to complement training efforts. For instance, it was decided that WHO's integrated management of childhood illnesses strategy should be introduced in Zhezkazgan. The audit highlighted changes in the system that are necessary to empower PHC providers, such as allowing family physicians to manage pregnant women and children with non-severe cases of diarrhea. A continuous quality improvement project is being implemented in Zhezkazgan to improve diagnosis and treatment of key PHC conditions, and FGP staff will be trained in medical audits as part of ongoing efforts to monitor and improve quality of care.

Monitoring Health System Performance in Karaganda Oblast

ZdravPlus, the Oblast Statistical Analytical Center (*Densauilyk*), and the Karaganda Oblast and city health administrations developed a system to monitor the performance of the 26 PHC facilities in Karaganda City. One goal of the system was to develop and implement it in a participatory way, so that providers have ownership of the system and results are fed back to improve facility performance. Oblast-level health reformers also want to use evaluation results to advocate for continued PHC development and strengthening in an uncertain national policy environment.

The monitoring system is based on objective indicators of performance, combines financial and clinical indicators to simultaneously monitor quality and efficiency, and uses an open, participatory process to interpret and feedback the results to continuously improve the quality of PHC services in a non-punitive fashion. A working group, including representatives from the health department, health providers, academic leaders, and a non-governmental organization, developed the monitoring system to track overall performance and results in meeting health needs, and to identify priority areas to be targeted for improvement by individual facilities and the system as a whole. Data are collected on an ongoing basis, trends are analyzed, and new priorities are set based on the results. Health providers accept the monitoring system because they have been an integral part of its development and implementation, and because it is based on realistic expectations of performance, as opposed to inappropriate centrally-defined targets.

The monitoring system in Karaganda began in 2001, and some early improvements are already visible, such as a reduction in inappropriate ambulance calls. The experience in Karaganda shows that it is possible for providers and government purchasers to work together to set reasonable performance goals and objective mechanisms to track progress toward those goals. Having such a monitoring system in place allows information to be used for priority-setting and objective assessment of progress toward meeting health sector goals, and also allows providers, financing bodies, and policymakers to be more accountable in a constructive way for how resources are being used and whether results are being achieved.

For more information

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