

Road to Results

ACHIEVING SUCCESS STEP BY STEP

Primary Health Care Clinics Partner with Uzbek Mahallas to Promote Community Health

December 2004

“Before, I used to think that people did not need to know much about medicine, but now, I think differently. I have understood that it is more important to prevent diseases than treat them.”

Sobitjon Usmonov, Mahalla Committee Member

Since taking over as the chairman of the Mahalla Committee in Hodjiabad, Andijon Oblast, Sobitjon Usmonov has been responsible for many activities in his community. And, now that he has become a member of a Mahalla Health Initiative Group, an activity set in motion by the USAID-funded ZdravPlus project, Usmonov’s role as a community leader has taken on even more importance.

Since independence in 1991, the Uzbek government has encouraged the existence and role of the mahalla or “community” through increasing its legal status. Each mahalla is governed by a community-elected leader and assembly. The roles of the mahalla have included propagating laws and prikazes, keeping the mahalla clean, marriage counseling, advising on social functions such as weddings and funerals and providing birth and place of residence certificates. Until recently, however, the mahallas were not active in promoting good health practices in their communities.

The mahalla represents an existing pool of local opinion leaders who, because of their status within the community, have the potential to greatly influence health-related attitudes and behaviors. With the goal of developing this potential, in January 2004, ZdravPlus launched a new initiative which built on the existing Mahalla structure — Mahalla Health Initiative Groups (MHIGs). The goal of this initiative was to utilize the mahalla and its opinion leaders to foster greater collaboration and cohesion among health centers, SVPs, and their respective mahallas.

Through meetings held with the Ferghana Association of SVPs, seven SVP physicians volunteered their facilities and respective

communities to pilot the MHIGs: four in Ferghana Oblast (Tashlaq, Oltiariq, Kirgili, and Ozbekiston Rayons), and three in Andijon Oblast (Ulugnor, Bo’z, and Ho’jaobod Rayons). Each MHIG was comprised of mahalla committee members, the doctor and patronage nurse from the SVP, respected elders, teachers, and a health center instructor. The main goal of each group has been to foster greater involvement of the community in SVP health promotion activities and to develop joint health promotion activities for the health center and SVPs. In addition members of the MHIGs provide health information directly to the population.



By establishing such groups as a link between the medical community and people’s everyday lives, health becomes a community-wide issue. Educating opinion leaders on health topics and healthy lifestyles practices and then involving them in sharing information on those topics — topics traditionally seen as the responsibility of medical professionals — gives those suggested practices more legitimacy. The advice that the population is receiving from their doctors and nurses as part of ZdravPlus health promotion campaigns is often contradictory to established practices — such as the importance of exclusive



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breastfeeding of babies under 6 months. When these messages are reinforced by community leaders whom people respect and trust, it is more likely that the advice will be followed and that people will adopt healthier lifestyles.

To date, ZdravPlus has conducted four seminars with each MHIG on team building skills and diarrhea, anemia, hypertension and the importance of breast milk. After each seminar discussions were held on how the group would disseminate the information within the community, on what kinds of events would be organized and on who would be responsible for organizing the events.

As Mahalla leader Usmonov notes, “I have learned methods of teaching the population about prevention of diseases and working with them through using these methods. I do my best not only to understand myself, but also help others to understand as well. I have been working on preventing diseases and improving the population’s knowledge on health. During mahalla meetings we used to discuss only organizational issues, now we discuss health issues as well.”

The MHIGs are finding all kinds of innovative and culturally appropriate ways to bring health information to their communities. One example particularly stands out: following the anemia seminar, one MHIG group member, a religious leader, used the many large dinners he was invited to during Ramadan to inform men about importance of proper nutrition. He provided information about how fathers, husbands, and fathers-in-law need to be more involved in getting the women and children in their families eat iron-rich foods. This MHIG member was particularly effective in motivating men to be more proactive in what kind of food products are purchased for consumption by their households.

Another example of the MHIG’s health promotion work involves the establishment of a “health corner” by MHIG members in the mahalla committee office near the cash desk. Pregnant women and nursing

mothers receive a government payment for child care so they visit the mahalla office at least once a month. This gives mahalla members a prime opportunity to educate this important group about keeping themselves and their children healthy and also gives the women the opportunity to ask questions and receive answers from knowledgeable and respected sources.

“When I speak to people,” explains Usmonov, “I always share my experiences with them. In the past, when my children and grandchildren turned three months old, I made sure they were given supplementary food. Now I say they must not have any extra food unless they are six months old. As a result, my grandchildren rarely fall ill... When young mothers come to my office, I always speak to them about the importance of breast milk and prevention of infectious diseases. This makes young mothers and their in-laws very happy. We also cooperate with the women activists of our mahalla and religious leaders, because they are the members of the group as well. I speak to people about health at my work and at various meetings, and they enlighten people in the weddings and at traditional events. The teachers in our group speak about health in schools and kindergartens as well.”

Usmonov continues, “our mahalla is very happy with this group. People realize that everything that is done is for the sake of their health and future. I am proud of being a member of this group and helping the people by being close to them.”

Sobitjon Usmonov’s experiences as a member of a MHIG are similar to those of other MHIG members. Although changing the attitudes of group members towards health promotion activities has not been easy, many now recognize that as natural opinion leaders, not only can they have influence on mahalla activities, but that by working together with their SVP and health center, by teaching others what they learn during health seminars, and by adopting healthier life styles themselves, they are helping their communities to stay healthy.

For more information

Office in Kazakhstan

39 Begalina Street
Almaty, Kazakhstan 480100
Tel: (3272)915-775, 919-285
Fax: (3272)919-370
E-mail: office@zplus.kz

Office in Kyrgyzstan

1 Togolok Moldo Street
Bishkek, Kyrgyzstan 720405
Tel: (996-312)663-816, 663-708
Fax: (996-312)661-024
E-mail: abt_bish@infotel.kg

Office in Uzbekistan

16 Bozbozor Street
Tashkent, Uzbekistan 700007
Tel: (998-71)169-2212, 169-1491
Fax: (998-71)169-1492
E-mail: abt@zdravplus.uz

Office in Tajikistan

10 Chapaeva Street
Dushanbe, Tajikistan 734025
Tel: (992-372)276-265, 231-717
Fax: (992-372)276-265
E-mail: zdrav@tajnet.com

Office in Turkmenistan

43 Gyorogly Street, # 4
Ashgabad, Turkmenistan 744020
Tel: (993-12)344-242
Fax: (993-12)344-242
E-mail: natalyazp@online.tm