

Data Sheet

USAID Mission:	Kazakhstan
Program Title:	Health and Population
Pillar:	Global Health
Strategic Objective:	115-0320
Status:	Continuing
Planned FY 2006 Obligation:	\$3,380,000 FSA
Prior Year Unobligated:	\$22,000 FSA
Proposed FY 2007 Obligation:	\$2,599,000 FSA
Year of Initial Obligation:	2001
Estimated Year of Final Obligation:	2007

Summary: USAID's quality primary health care (PHC) objective is helping Kazakhstan reform its health system in order to ensure utilization of quality, client-oriented, cost-effective primary health care services. USAID's program in Kazakhstan has a special focus on improving the quality of maternal, child, and reproductive health services. USAID provides essential technical assistance and support to the country's efforts to control infectious diseases like HIV/AIDS and tuberculosis (TB), with increasing efforts to reduce the spread of multi-drug resistant TB. Kazakhstan has demonstrated a commitment to collaborate with USAID programs to improve health outcomes.

Inputs, Outputs, Activities:

FY 2006 Program:

Address Other Health Vulnerabilities (\$1,307,000 FSA, \$22,241 FSA carryover). USAID's health reform program, ZdravPlus II, will continue to support the Government of Kazakhstan (GOK) to increase utilization and quality of primary health care (PHC) services through the implementation of the National Health Reform Program. ZdravPlus II will provide technical assistance to the Ministry of Health (MOH) to increase equity among and efficiency of PHC centers. ZdravPlus II and the Ministry of Health will develop a national monitoring system to assess the quality and cost-efficiency of resource use in the health sector, and USAID will assist with the development of voluntary health insurance. ZdravPlus II will expand its safe motherhood pilots to two additional sites, increasing access to high quality prenatal, postnatal, and delivery care. A family planning component will be added to these pilots in order to decrease abortion rates. ZdravPlus II will continue to assist the Ministry of Health with designing clinical practice guidelines based upon international standards. The Global Development Alliance with ExxonMobil will conduct expanded trainings for PHC professionals on the integrated management of childhood illnesses. USAID will continue to support implementation of the World Health Organization (WHO)-recommended live birth definition. Principal contractors/grantees: Abt Associates (prime), Morehouse University School of Medicine (sub), John Snow Inc. (sub), Boston University (sub), Institute for Sustainable Communities (sub), and the U.S. Centers for Disease Control and Prevention (CDC) (prime).

Prevent and Control Infectious Diseases of Major Importance (\$874,000 FSA). CDC will continue to train Kazakh professionals through the Applied Epidemiology Training Program (AETP). CDC will strengthen tuberculosis (TB) surveillance through the use of epidemiological software to interpret TB data from the National TB Register. Laboratory quality assurance training will continue. USAID's TB Control Program will continue to support the Directly Observed Treatment, Short-course (DOTS) strategy through demonstration of best practices, and will work to strengthen surveillance systems, laboratory quality, and rational drug management. The TB Control Program will strengthen political support for effective TB control, build human and systems capacity, and raise community awareness. The USAID-supported National TB Training Center established at the Karaganda prison will support the establishment of DOTS programs for the country's prison population, and linkages between those systems and the civil TB control service. The TB Control Program will emphasize control of drug resistance and strategies to address HIV-TB co-infection. Principal contractors/grantees: CDC (prime), Project HOPE (prime), Johns Hopkins University Bloomberg School of Public Health (sub), John Snow Inc. (sub), New Jersey Medical School National TB Center (sub), Chemonics International (sub), and CAMRIS International (sub).

Reduce Transmission and Impact Of HIV/AIDS (\$1,199,000 FSA). Through the Central Asian Program on AIDS Control and Intervention Targeting Youth and High-Risk Groups (CAPACITY), USAID will continue to assist the Government of Kazakhstan with implementation of its HIV grant from the Global Fund to Fight AIDS, TB, and Malaria. The project will also increase the capacity of local non-governmental organizations and will leverage the resources of the regional HIV projects funded by the World Bank and the British Department for International Development. CAPACITY will provide training to health professionals to improve counseling, testing, and antiretroviral treatment skills. USAID will improve resource use through integration of HIV/AIDS services into the overall health system. CDC will continue training officials to use data from HIV sentinel surveillance. Principal contractors/grantees: John Snow Inc. (prime), Population Services International (sub), Abt Associates (sub), International HIV/AIDS Alliance (sub), Howard University (sub), and CDC (prime).

FY 2007 Program:

Address Other Health Vulnerabilities (\$1,137,000 FSA). ZdravPlus II will continue its support for Kazakhstan's National Health Reform and Development Program. ZdravPlus II also will develop the framework for paid health services to allow more flexibility for health centers to manage their own resources. Safe motherhood pilots will be expanded to additional districts, and data collected from the family planning components of these pilots will be used to advocate for reduced abortion rates. USAID will support implementation of the World Health Organization-recommended live birth definition at the national level. Principal contractors/grantees: same implementers as above; additional contractors/grantees to be determined (TBD).

Prevent and Control Infectious Diseases of Major Importance (\$564,000 FSA). CDC will continue AETP to support the Ministry of Health with investigation of infectious disease outbreaks through a trained cadre of public health epidemiologists. CDC will strengthen surveillance for TB through the expanded use of epidemiological software for interpreting National TB Register data. The TB Control Program will support the establishment and function of a sustainable training system. USAID's TB Control and CAPACITY programs will work together to reduce HIV and TB co-infection. Principal contractors/grantees: same implementers as above; additional contractors/grantees TBD.

Reduce Transmission and Impact of HIV/AIDS (\$898,000 FSA). CAPACITY will continue to strengthen implementation of the national strategy to prevent and control HIV/AIDS. USAID's inter-agency agreement with CDC will be extended to intensify and extend efforts on HIV sentinel surveillance training. Principal contractors/grantees: same implementers as above; additional contractors/grantees TBD.

Performance and Results: Building on the Government of Kazakhstan's increased commitment to health reform, USAID made important steps to increase the quality, equity, and efficiency of the health system. USAID programs introduced evidence-based medical practices, improved medical and nursing education, and addressed infant, child, and maternal health issues. USAID's health reform program exceeded its target for the percentage of outpatient visits in primary health care clinics, indicating that service delivery and quality improvement interventions are taking effect. The Government has demonstrated its strong commitment to improve the health system by increasing health expenditures steadily since 2001, from 1.97% to 3.06% of the GDP. USAID's policy work with the Government improved equity in health care: the ratio of per capita health spending between rich and poor oblasts has decreased from 4.85 to 2.09 over the past five years. Technical assistance enabled the country to produce valid, scientifically-sound surveillance data on the status of the HIV/AIDS epidemic, while the TB Program demonstrated progress, with an 8% decrease in mortality rates and a 3.8% decrease in incidence rates. USAID's technical assistance on TB control in Kazakhstan's penitentiary system led to a decrease in TB mortality and incidence among prisoners by 20%, respectively, since 2003. With USAID support, Kazakhstan's Ministry of Health has piloted a model program on prevention of mother to child transmission of HIV/AIDS in four sites. Data reported to date indicates that the rate of HIV prophylactic treatment for mothers increased from 44% to 83%, and that treatment for newborns increased from 21% to 76%. By program's end, these activities will help Kazakhstan to reform its health system in order to ensure utilization of quality, cost-effective primary health care services, and to control existing HIV/AIDS and TB epidemics.

US Financing in Thousands of Dollars

Kazakhstan

115-0320 Health and Population	CSH	ESF	FSA
Through September 30, 2004			
Obligations	0	997	48,021
Expenditures	0	997	41,894
Unliquidated	0	0	6,127
Fiscal Year 2005			
Obligations	2,000	0	4,967
Expenditures	389	0	6,558
Through September 30, 2005			
Obligations	2,000	997	52,988
Expenditures	389	997	48,452
Unliquidated	1,611	0	4,536
Prior Year Unobligated Funds			
Obligations	0	0	22
Planned Fiscal Year 2006 NOA			
Obligations	0	0	3,380
Total Planned Fiscal Year 2006			
Obligations	0	0	3,402
Proposed Fiscal Year 2007 NOA			
Obligations	0	0	2,599
Future Obligations	0	0	4,240
Est. Total Cost	2,000	997	63,229