



# TAJIKISTAN



In many ways still living with the legacy of the Soviet era, Tajikistan has been working towards reform of its health system with the support of WHO and key partners, with health systems strengthening and universal health coverage high on the country's agenda.



## NEW NATIONAL HEALTH STRATEGY, 2010-2020

|   |  |   |  |
|---|--|---|--|
| <p><b>8 734 951</b></p> <p>TOTAL POPULATION, (2016)</p>                                     | <p><b>71 YEARS</b></p> <p>LIFE EXPECTANCY AT BIRTH, (2015)</p>   | <p><b>185\$</b></p> <p>TOTAL HEALTH EXPENDITURE PER CAPITA, (2014)</p>        | <p><b>80%</b></p> <p>TUBERCULOSIS TREATMENT COVERAGE, (2016)</p>             |
| <p><b>62%</b></p> <p>OUT OF POCKET EXPENDITURE AS % OF TOTAL HEALTH EXPENDITURE, (2014)</p> | <p><b>7%</b></p> <p>GENERAL GOVERNMENT HEALTH EXPENDITURE AS % OF GENERAL GOVERNMENT EXPENDITURE, (2014)</p> | <p><b>8%</b></p> <p>EXTERNAL AID AS % OF TOTAL HEALTH EXPENDITURE, (2014)</p> | <p><b>53%</b></p> <p>ANTENATAL CARE COVERAGE, (2012)</p>                     |
| <p><b>52</b></p> <p>HOSPITAL BEDS PER 10 000 POPULATION, (2009)</p>                         | <p><b>96%</b></p> <p>RURAL POPULATION WITH ACCESS TO IMPROVED SANITATION FACILITIES, (2015)</p>              | <p><b>96%</b></p> <p>DTP3 IMMUNIZATION COVERAGE AMONG 1-YEAR-OLDS, (2016)</p> | <p><b>90%</b></p> <p>BIRTHS ATTENDED BY SKILLED HEALTH PERSONNEL, (2014)</p> |

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SOURCE: WHO, GHQ & WB

## CURRENT PRIORITIES

Since 2001, Tajikistan has adopted several documents guiding the direction of health reforms. The National Health Strategy 2010-2020 pledged a doubling of public expenditure on health by 2020 and provides the framework for the most recent round of reforms, with a strong emphasis on primary health care and health financing. This policy identified priorities for health sector development in four key areas: governance, health financing, resource generation and service delivery. Progress in implementing the Strategy is tracked by a framework for monitoring and evaluation (updated in 2013). The Strategy furthermore envisages improvements in the prevention of communicable and noncommunicable diseases and the provision of modern and high-technology medical care of good quality. A Health Services Improvement Project, implemented by the Ministry of Health and Social Protection, began in July 2013.

## LINKAGE TO UHC

Historically, the Tajik health system has been structured around input-based financing and significant out-of-pocket payments. With support from WHO to foster dialogue between ministries and with other country partners, Tajikistan is continuing its pivot towards a new financing mechanism that will be conducive to the objectives of universal health coverage.

Another main priority of health reforms has been to strengthen family medicine. In 1998, the Ministry of Health and Social Protection adopted an order envisaging the gradual transition of primary health care towards a system based on general practitioners. The National Health Strategy for 2010-2020 reaffirmed the importance of developing family medicine. Under the reformed system of primary care, health houses and rural health centres are envisaged to provide basic emergency care in rural areas.

Ongoing activities to strengthen primary health care include efforts to strengthen the material basis of primary health care facilities, improve the qualifications of primary health care workers through training programmes, and reward performance.

# WHO SUPPORT TO DATE

- Development of a UHC monitoring matrix (indicators) for 2016-2026
- Costed plan for an institutionalized approach to UHC monitoring matrix 2016-2026
- Policy options for a more pro-poor benefit design and targeting aligned with other financing and service delivery strategies
- Policy dialogue and consensus building around NHP and capacity building for UHC

## Remaining gap: Out-of-pocket payments remain a major source of revenue

↳ **Recommendation: Extend provider payment and basic benefit package nationwide.**

## Remaining gap: Primary health care has low prestige

↳ **Recommendation : Training of primary health care doctors and nurses in family medicine.**

## Remaining gap: Standardized budget lines for inpatient care provide incentives for overcapacity

↳ **Recommendation : Performance based financing scheme at district level**

## Stories from the field: Action for People with Disabilities



In 2016, Tajikistan adopted the National Programme on Rehabilitation of Persons with Disabilities (2017–2020) to improve health, rehabilitation, education and livelihood, and to provide social protection and equal opportunities for people with disabilities.

Tying in with WHO's Health 2020 agenda for the region and the SDGs, the Programme was developed through a consultative process with disabled people's organisations and other stakeholders with support from WHO, USAID and the UN Partnership to Promote the Rights of Persons with Disabilities (UNPPRD).

"On behalf of 80,000 people with disabilities, I want to express my sincere gratitude to all those involved," states Mr Asadullo Zikrihudoev, Chairman of the National Association of Disabled People of Tajikistan.

"The Programme is a big step forward and we are confident that it will improve the health of people with disabilities, as well as support their education, employment and self-esteem for full inclusion in society."



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