The Quality Health Care Project (Quality Project) is a five-year project (2010–2015) funded by USAID and implemented by Abt Associates. The Quality Project aims to improve the health status of Central Asians by building the capacity of national health systems to better meet the maternal and child health (MCH) and other health needs of vulnerable groups.

Overview
Abt Associates has unparalleled experience in improving health care in Central Asia—the Quality Project expands on Abt’s transformational work under the “Zdrav” series of projects (ZdravReform, ZdravPlus, ZdravPlus II), which made significant progress throughout the region in strengthening health systems and improving health service quality. The project, which operates in Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan, and Uzbekistan, focuses on improving the quality of MCH services, tuberculosis (TB) control, and HIV/AIDS prevention, diagnosis, and treatment services. Its approach is to increase population access to evidence-based, high-quality services and institutional capacity to provide those services.

Selected MCH and Family Planning Accomplishments

Training
The Quality Project has provided training and follow-up clinical mentoring to primary health care providers in evidence-based effective perinatal care (EPC) in Kazakhstan, Kyrgyzstan, Tajikistan, and Turkmenistan. The project has established birth preparedness schools that provide prenatal classes to women and their partners on childbirth, essential newborn care, and danger signs in pregnancy. The classes are having an impact. In Kyrgyzstan, a government ruling allows primary health care facilities to set up schools, thus encouraging national scale-up. At a pilot site in Kazakhstan, the percentage of women delivering with a partner increased on average by 25.9 percent over the first two years. Postpartum hemorrhage rates in project EPC sites in Tajikistan decreased from 4.9 percent to 1.5 percent, transfusions from 7 percent to 1 percent.
The Quality Project has provided training in maternal health topics to 2,536 individuals, in child health topics to 2,633 individuals, and in family planning/reproductive health topics to 1,127 individuals. In collaboration with the U.N. Population Fund, the project pilot tested a new competency-based Emergency Obstetrical Care (EmOC) training package in Kyrgyzstan.

Project training and mentoring of Tajik health workers at the community, primary care, and hospital levels in the Integrated Management of Childhood Illness (IMCI) has significantly improved child health; in the Vakhdat region between 2011 and 2012, the IMCI project site saw a 53 percent decrease in the number of malnourished children seen by a community nurse. Project support to the Ministry of Health (MOH) in adapting and using the IMCI computerized adaption and training tool (ICATT) in Turkmenistan and Tajikistan enabled a rapid and cost-effective scale-up of the IMCI program. MOH data from Naryn Oblast in Kyrgyzstan shows a decrease in the child mortality rate from 25 in 2010 to 20.1 in 2011 and in infant mortality from 19.2 in 2010 to 15.4 in 2011.

Family Planning Counseling
A total of 968 women in remote, mountainous areas of Tajikistan were counseled on family planning and 749 accepted a modern contraceptive method during two project-supported family planning access and awareness campaigns.

Quality Improvement
Results reported from continuous quality improvement (CQI) facility sites are promising. In Kochkor Rayon Hospital in Kyrgyzstan, where CQI started in 2010, the early neonatal mortality rate decreased by almost 73 percent and the postpartum hemorrhage rate decreased by about 45 percent. In Kyzylorda City Polyclinic #16 in Kazakhstan, 90 percent of antenatal care outpatients over a nine-month period in 2012 had pregnancy-monitoring gravidograms, against a baseline of 40 percent for a similar period in 2011. Postpartum hemorrhage rates decreased by 60 percent over six months of CQI at the Tursunzade pilot site in Tajikistan.

MCH Policy Making
The Quality Project supports regional governments in developing MCH policies. In Turkmenistan, the project provides technical assistance to the Ministry of Health and Medical Industry and the MCH Institute to improve the quality, scope, and coordination of MCH services through institutionalization of key WHO strategies, including IMCI, EPC, and antenatal care. The project contributed to the Turkmenistan National MCH Strategy for 2012–2016. In Kazakhstan, the project helped finalize the new MCH/family planning/reproductive health roadmap and contributed to a new MOH antenatal care training module.