

### NEW RESEARCH: ACCESS TO HEALTH CARE IN KYRGYZSTAN

Kyrgyzstan's constitution gives all citizens the right to free of charge health care in state-owned and financed facilities, but new research highlights that many citizens cannot access health services and face high payments at the point of use.

Health is a vital national investment: inequalities in health are estimated to result in a 1.4% loss of GDP<sup>1</sup>, or 4 billion soms every year in the case of Kyrgyzstan. The situation requires urgent action.

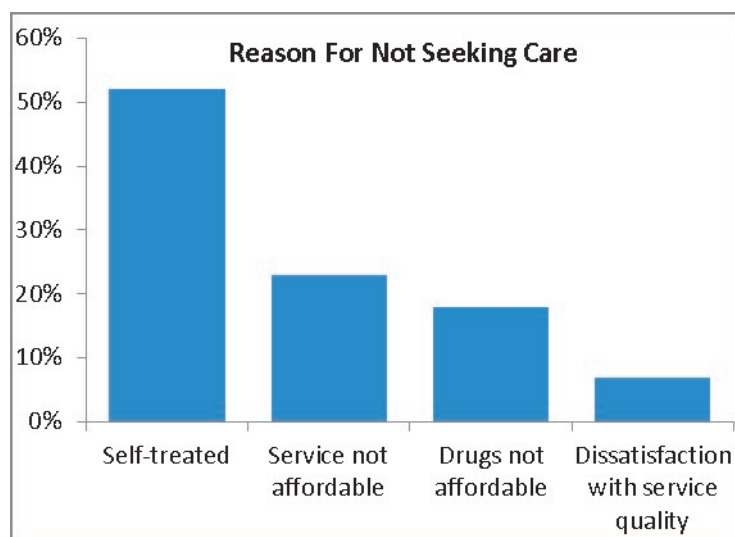
This policy brief provides results from a nationally-representative household survey of 1,800 randomly selected people in 2010 from the Health in Times of Transition (HITT) study (<http://www.hitt-cis.net>). Further details on the research can be found in the source listed below.

#### KEY STUDY FINDINGS

##### People do not access care when needed

40% of respondents had accessed health care when they experienced a problem serious enough to require medical attention in the past four weeks. Access to care is particularly poor in rural areas and for lower income groups.

More than half of respondents self treated instead of seeking care, which may be because home-based treatment is a cheaper substitute for health services. Affordability of drugs and services were also common reasons for not seeking care.



##### People who access care face high payments

	Respondents that accessed care	
	Made a payment	Average cost of payment
Outpatient Care	51%	350 KGS
Inpatient Care	31%	1,540 KGS
Drugs	84%	1,000 KGS

93% of respondents who had used health care in the past 4 weeks had made a payment for drugs or services. Considering that the average monthly salary in Kyrgyzstan is 9,300 soms, these payments for health care are likely to place significant burden on household resources.

<sup>1</sup>Mackenbach JP, Meerdink WJ, Kunst AE. (2007) *Economic implications of socioeconomic inequalities in health in the European Union*. Luxembourg, European Commission.

## POLICY RECOMMENDATIONS

### *Pharmaceutical Policy*

Accessibility and affordability of medical drugs is crucial for disease control and drug resistance.

- Health care providers should receive ongoing training to enable them to identify and prescribe generic drugs, rather than more expensive branded drugs.
- Prescribing practice and identification of generic drugs should be integrated into medical education.
- Restrictions or protocols for prescribing in primary care should be introduced, to aid providers in making a rational selection of affordable drugs.
- Educate patients to dispel the perception that generic drugs are lower quality.

### SOURCE:

BALABANOVA, D., ROBERTS, B., RICHARDSON, E., HAERPFER, C. & MCKEE, M. 2011. Health Care Reform in the Former Soviet Union: Beyond the Transition. Health Services Research.

<http://www.ncbi.nlm.nih.gov/pubmed/22092004>

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