

Strengthening the response to noncommunicable diseases in Turkmenistan

Overview

Shifting disease patterns and an ageing population have contributed to a rise in noncommunicable diseases in Turkmenistan, accounting for 81% of all-cause mortality in 2011.¹ With the anticipated doubling of the elderly population by 2030, concerted action to improve population health and reorientate the health system to manage the rising burden of noncommunicable diseases has received widespread support. In 2013, the WHO European Ministerial Conference on the Prevention and Control of Noncommunicable Diseases in the Context of Health 2020 was convened in Ashgabat, Turkmenistan, from which Member States adopted the Ashgabat

Declaration on the Prevention and Control of Noncommunicable Diseases in the Context of Health 2020. The Conference served to accelerate the development of a response to noncommunicable diseases. An intersectoral steering committee spanning 38 government ministries and departments was established to design the National Health 2020 Action Plan 2014–2020 to guide implementation of the Ashgabat Declaration in Turkmenistan with support from WHO. A baseline assessment of risk factors for noncommunicable diseases, conducted using the WHO STEPwise approach to surveillance (STEPS), helped inform the Plan's design. Building on the existing primary care network,

as well as several recent national initiatives to improve population health, the proposed Plan aims to improve health promotion and disease prevention; increase population health literacy and individual engagement with health; modernize existing care facilities; introduce electronic communication technology; and conduct research on noncommunicable diseases. In 2014, the Plan was officially adopted by presidential decree and is currently in the early stages of implementation. Ongoing data collection and surveillance by the Ministry of Health and Medical Industry will allow the impact of the Plan to be evaluated as it progresses.

Problem definition

Noncommunicable diseases have become the leading cause of morbidity and mortality in Turkmenistan, accounting for 81% of all-cause mortality in 2011;¹ cardiovascular disease alone accounted for nearly 30% of all-cause mortality in 2010.² Despite changing health needs, the health system of Turkmenistan has remained predominately orientated around the delivery of acute, reactive services and, thus, ill-equipped to meet the growing burden of chronic disease. With the elderly population expected to double by 2030 to 7.9%, the health system of Turkmenistan faced increasing

pressures to prioritize health services delivery transformations in order to meet further expected increases in chronicity and multimorbidities (Box 1).

Box 1

What problems did the initiative seek to address?

- High level of chronic disease within a rapidly ageing population.
- Orientation of the health system towards acute, reactive care rather than proactive, chronic care.

Health services delivery transformations

Timeline of transformations

Observing demographic shifts and rising chronicity in the early 2010s, the national government has set noncommunicable diseases high on the agenda. In late 2013, the WHO European Ministerial Conference on the Prevention and Control of Noncommunicable Diseases in the Context of Health 2020 was convened in Turkmenistan's capital, Ashgabat. The subsequent adoption of the Ashgabat Declaration by Member States inspired the push to develop a national strategy on noncommunicable disease prevention and control in

Turkmenistan (Table 1). Securing approval by presidential decree in May 2014, the Plan is currently in the early stages of implementation.

Description of transformations

Selecting services. An important focus of Turkmenistan’s response to noncommunicable diseases has been the development of disease prevention services, including increased access to immunizations such as the human papilloma virus (HPV) vaccine, improving screening programmes for priority chronic diseases, improving monitoring of key risk indicators such as blood pressure, blood glucose levels and cholesterol, and the provision of health education to chronic patients to aid self-management.

Designing care. Guidelines already in place for the prevention and management of chronic diseases have been updated to reflect current evidence and best practices. New standards for the diagnosis and treatment of noncommunicable diseases are currently in development and an emphasis on health education and patient self-management has been highlighted in order to help increase patients’ role in the care planning process.

Organizing providers. Primary care facilities are well distributed across the country with plans to continue to reduce the population typically covered per general practitioner, prioritizing also an increased number of supporting health professionals in primary care practices. The anticipated introduction of electronic communication technology in 2017 aims to strengthen communication channels between providers to improve coordination.

Managing services. The majority of care continues to be managed through polyclinics at the district level under direction from the Ministry of Health and Medical Industry of Turkmenistan. At present, other actors, including local nongovernmental

Table 1
What were the chronological milestones for the initiative?

2013	WHO European Ministerial Conference on the Prevention and Control of Noncommunicable Diseases in the Context of Health 2020 held in Turkmenistan; Ashgabat Declaration adopted by Member States.
2013–2014	Baseline assessment survey carried out; development of a national plan to guide the prevention and control of noncommunicable disease begins.
2014	National Health 2020 Action Plan 2014–2020 approved by presidential decree; implementation of Plan begins.
Present	Continued implementation of the National Health 2020 Action Plan 2014–2020.

organizations have been involved in implementing programmes promoting healthy lifestyles and preventing noncommunicable diseases. Health facilities are being modernized and equipped with a standardized level of basic equipment to promote consistent quality of care across rural and urban areas.

Improving performance. General practitioners and paediatricians have participated in ad hoc trainings on health promotion and noncommunicable diseases, with additional conferences planned for all health professionals.

Engaging and empowering people, families and communities
Recent efforts to increase population health literacy and empower individuals with health information are helping to build a more participatory approach to health services delivery. Mass health education campaigns are led by the national Health Information Centre, which regularly organizes television and radio broadcasts covering issues linked to noncommunicable diseases; for example, the television programme “Health of the Nation – the Country’s Wealth”. The Centre also regularly prints and distributes leaflets and other materials on health

promotion and disease prevention. Patient access to electronic medical records is being gradually phased in towards the increased involvement of patients in their care; several areas in Ashgabat already offer this service. Electronic educational materials for patients are also being developed.

Health system enabling factors

Over the past two decades, there has been strong government support for health improvement and steady financial commitment to the health system. Furthermore, Turkmenistan has adopted strong tobacco-control laws, a national nutrition programme and other health promoting policies and strategies in recent years. The National Health 2020 Action Plan 2014–2020 for the implementation of the Ashgabat Declaration builds on these positive trends (Table 3). Approved by presidential decree in 2014, the Plan and proposed health reforms have benefited from widespread support across all government ministries and departments.

The national Health Information Centre has been charged with developing relevant training programmes for health professionals

Table 2

How was the delivery of health services transformed through the initiative?

Before	After
Selecting services	
Services available for detection and management of noncommunicable diseases and associated risk factors; essential drugs, tests and procedures to manage chronic conditions generally available.	Strengthening of interventions to reduce noncommunicable disease burden; key focus areas include promoting healthy environments, increasing health education, expanding immunization programmes, improving screening and strengthening chronic disease management.
Designing care	
Government approved guidelines exist for the treatment and management of the most common noncommunicable diseases.	Guidelines on the prevention and management of noncommunicable diseases updated to reflect current evidence and best practices; patients expected to play a greater role in care planning as health literacy improves.
Organizing providers	
Strong primary care network in place; general practitioners each serve populations of around 1000 people; specialists concentrated in urban areas; weak communication channels among providers.	Plans to encourage relocation of specialists to underserved areas; introduction of electronic communications to link providers anticipated in 2017.
Managing services	
Strong network of health facilities across the country, but need for modernization; health facilities managed at the district level.	Planned introduction of electronic communication technology and updates to health facilities; civil society organizations play a key role in supporting healthy lifestyle programmes.
Improving performance	
Need to strengthen professional capacities in the areas of health promotion and noncommunicable diseases.	Ad hoc training programmes and conferences on health promotion and noncommunicable diseases offered to all health professionals.

to support the implementation of new health promotion and disease prevention services. University curricula for health professionals are being updated to include increased training on health promotion, disease prevention and noncommunicable disease management. Additionally, new medical specialties relating to noncommunicable diseases will be created. Special training opportunities are also to be made available to specialists as an incentive to work in underserved areas. Financial incentives, such as housing assistance, will also be offered to specialists to further encourage relocation.

Responsibility for surveillance of noncommunicable diseases and associated risk factors is shared across several offices within the Ministry of Health and Medical Industry of Turkmenistan. The WHO STEPwise approach to surveillance (STEPS) was adopted prior to the initiative and representative baseline data on the current status of risk factors for noncommunicable diseases was collected from a nationally representative sample. Continued data collection and monitoring will allow progress made through the initiative to be evaluated. Adoption of electronic medical records, currently being phased in across the country, will further facilitate the monitoring of health system performance and population health.

Outcomes

Leaders of the initiative hope to achieve further gains in life expectancy over the next decade as a result of actions taken to reduce the burden of noncommunicable diseases in the population. However, the initiative is still in the early stages and outcomes remain to be seen. The complexity of attributing any population health improvement directly to specific actions taken through the initiative is recognized.

Table 3

How has the health system supported transformations in health services delivery?

System enablers	Example
Accountability	<ul style="list-style-type: none"> National Health 2020 Action Plan 2014–2020 officially adopted by presidential decree in 2014. Recent government laws, policies and strategies align with the Plan; these include strong tobacco control legislation, a healthy nutrition programme and national strategies for cervical and breast cancer reduction.
Incentives	<ul style="list-style-type: none"> Financial incentives will be offered to specialists taking up practice in underserved areas.
Competencies	<ul style="list-style-type: none"> Health Information Centre develops and provides continuing education to health professionals. University curricula will be updated to include increased training on health promotion, disease prevention and noncommunicable disease management.
Information	<ul style="list-style-type: none"> STEPS assessment carried out prior to initiative; representative baseline data collected on population risk factors for noncommunicable disease. Electronic medical records system currently being rolled out nationally. Guidelines for the assessment and monitoring of the initiative are in place and align with the WHO global monitoring framework for noncommunicable diseases.

noncommunicable diseases in Turkmenistan; appointed an intersectoral steering committee to oversee design and implementation of the initiative.

- **Steering committee.** Composed of 38 different government ministries and departments; developed initiative through a collaborative intersectoral approach.

Initiating change

One of the driving forces behind the initiative was the strong political will to improve population health and the commitment of financial resources to this cause. The decision to develop the National Health 2020 Action Plan 2014–2020 was inspired by an international conference organized by WHO, which was convened in Turkmenistan in 2013. “Through the 2013 conference held in Ashgabat, it was decided to ramp up our response to noncommunicable disease and also assume a position of regional and global leadership.” The Ashgabat Declaration endorsed at the closing of the conference further motivated national action within Turkmenistan and provided a guiding framework for change.

Change management

Key actors

The Ministry of Health and Medical Industry of Turkmenistan has worked to build national commitment to addressing the challenges of noncommunicable diseases in Turkmenistan, with partnerships across government ministries (Box 2). Intersectoral collaboration was described as a key factor in promoting inclusive participation across government sectors and achieving broad political support for activities. An intersectoral government committee was established to collectively develop the National Health 2020 Action Plan 2014–2020. WHO and many other international organizations

and foreign governments provided assistance and support to the committee in developing the Plan; for example, through training support and sharing of best practices. While implementation of the Plan falls under the remit of the Ministry of Health and Medical Industry, intersectoral working continues to be important in realizing its goals.

Box 2

Who were the key actors and what were their defining roles?

- **National government.** Led development of the National Health 2020 Action Plan 2014–2020 to address

Implementation

Implementation of the initiative is currently in the early stages and is being guided by the steps laid out in the National Health 2020 Action Plan 2014–2020.

Moving forward

The international forum – Vision for a Healthier Future: Building on our Achievements – was held in Ashgabat in July 2015 to reflect on progress achieved by the initiative so far and share experiences. Implementation of the National Health 2020 Action Plan 2014–2020 is set to continue until 2020, at which point progress will be reviewed to determine future steps.

Highlights

- International attention on key issues was leveraged to generate national momentum and political will for health reform.
- A strong understanding of challenges, supported with baseline data of population health, facilitated the development of the initiative and allowed tailoring to meet population needs.
- Intersectoral partnerships across government ministries helped to keep the initiative on the political agenda and safeguarded health reforms from being undermined by other sectors' policies.
- A well-organized public communication plan and provision of patient education helped improve population health literacy and garner support for the initiative.

1 Institute of Health Metrics and Evaluation. (2013). *Global burden of disease cause patterns*.

2 World Health Organization. (2013). *Strengthening the response to noncommunicable diseases in Turkmenistan*. Copenhagen: Author. Retrieved from <http://www.euro.who.int/en/countries/turkmenistan/publications3/strengthening-the-response-to-noncommunicable-diseases-in-turkmenistan>