КЫРГЫЗ РЕСПУБЛИКАСЫНЫН САЛАМАТТЫК САКТОО МИНИСТРЛИГИ

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Executive Director
FP 2020
Her Excellency
Mrs. Beth Schlachter

2 July 2019

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Dear Honorable Mrs. Beth Schlachter,

The Ministry of Health of the Kyrgyz Republic expresses its sincere appreciation for the fruitful cooperation in the implementation of programs on Reproductive Health and the global platform FP2020 commitment. Family planning remains one of the priorities of a new project of the National Health Strategy of the Kyrgyz Republic until 2030.

According to the Sustainable Development Goals (SDGs) the achievement of the goal of FP2020 as a critical milestone in ensuring universal access to sexual and reproductive health and rights by 2030. As well as the FP2020 commitment to contribute to the UN Global Secretary General's health strategy women, children and adolescents "Every woman, every child", the Kyrgyz Republic filled out a questionnaire on updating FP2020 commitment for the country for 2018-2019.

The questionnaire monitors progress, as well as the main actions taken by the Ministry of Health of the Kyrgyz Republic and the country team of focal points of the Kyrgyz Republic to achieve ambitious goals and of FP2020 commitment on behalf of women from the medical-social risk group.

I am convinced that our strong political commitment, the desire to improve the quality of life and social development of the population, planned activities and close cooperation with key development partners will enable us to achieve the goals of the Global Strategy.

Enclosed: FP2020 Commitment Updated Questionnaire 2018-2019

Sincerely, Minister of Health Kyrgyz Republic Cosmosbek Cholponbaev

FP2020 Commitment Update Questionnaire 2018-2019 KYRGYZ REPUBLIC



The FP2020 Secretariat surveys FP2020 commitment makers annually to track progress made, activities undertaken, and challenges faced toward fulfilling commitments. We kindly ask you to complete the FP2020 Commitment Update Questionnaire 2018-2019 for Kyrgyz Republic, by 5 July 2019. Your responses support greater information and knowledge sharing, transparency, and accountability among the growing number of FP2020 commitment makers and the broader family planning community. We will share your responses on your country's dedicated country webpage - https://www.familyplanning2020.org/kyrgyzstan - so in-country and global stakeholders alike can follow Kyrgyz Republic's progress in reaching the ambitious goals set on behalf of the women, girls, families, and communities in your country.

FP2020 commitments can be achieved with coordinated actions across multiple sectors and partners at various levels. We hope this will be an opportunity for you to engage with your country focal point team, including a youth representative, and family planning stakeholders in country to jointly review progress.

Please note that the self-reporting process complements the national family planning data consensus workshops that take place during the same time period. If the data consensus workshop for Kyrgyz Republic is scheduled after 5 July 2019, please let us know so we can discuss how to align the commitment-reporting deadline to ensure results from each process are compatible.

Please complete the attached Word document and submit to Martyn Smith (msmith@familyplanning2020.org), Chonghee Hwang (chwang@familyplanning2020.org), and Jordan Hatcher (jhatcher@familyplanning2020.org). Should you have any questions or concerns, please contact Jordan Hatcher at jhatcher@familyplanning2020.org.

Additionally, the Core Conveners of FP2020 are currently gathering input to build a shared vision for family planning post-2020. We look forward to learning from your response and appreciate your partnership in delivering on the promise that is FP2020. Thank you for your time and effort to fill out this questionnaire and provide useful information for the broader partnership.

FP2020 Commitment
Update Questionnaire 2018-2019
KYRGYZ REPUBLIC



The questionnaire includes 1) the 2018 Kyrgyz Republic original commitment, and 2) 6 standard questions to all FP2020 commitment-making countries.

As you provide your updates below on each element of your commitment, kindly focus on:

- Progress made and key challenges or barriers you faced, during the September 2018 June 2019 period.
- Please also include information on any key upcoming commitment-related milestones.
- Lastly, we invite you to reflect on progress per commitment through a self-assessment.

SECTION I: QUESTIONNAIRE FOR COMMITMENT UPDATE

COMMITMENT OVERVIEW

Recognizing the importance of meeting the population's needs for family planning in the Kyrgyz Republic, the Ministry of Health is committed to making a commitment to accelerate the progress, which is ensuring the people's rights to access family planning services, including contraceptives, by:

- 1. Strengthening political will in the implementation of the family planning program to achieve the Kyrgyz Republic's commitments under the Sustainable Development Goals;
- 2. Willingness to finance family planning in order to ensure reliable supply and reasonable use of modern means of contraception for vulnerable segments of the female population;
- 3. Providing quality health services for family planning through the implementation of WHO recommendations and raising the awareness among population about family planning.

1. FINANCIAL COMMITMENTS:

- 1.1. Increase public funding for purchasing of contraceptives in 2019 at least for one million soms in comparison with 2018 for women from the list of high medical and social risk of maternal mortality approved by the Ministry of Health of the Kyrgyz Republic
- 1.2. Develop a 5-year plan to gradually increase public funding to meet the needs of 50% of women in the high medical and social risks of maternal mortality by 2023
- a) Please provide an update below on achievements made in July 2018 June 2019 in support of these elements of your commitment, including any key upcoming commitment-related milestones:
- 1.1. In 2019 the state funding for the purchase of contraceptives for women at high medical and social risks of maternal mortality ¹ increased by one million soms compared with 2018. The amount for 2019 is 4.2 million soms. When reviewing the Medium-Term Expenditure Framework for 2019, the Ministry of Health introduced a budget performance indicator on the coverage of contraceptives for women at high medical and social risks of maternal mortality in the structure of the budget program of the Ministry of Health in section of funding sources with a description of a budget measure. The

Ministry of Health announced a tender for a purchase of oral contraceptives in May 2019 and the process is in progress.

1.2. A program of the five-year plan to gradually increase the state budget for the procurement of contraceptives to cover needs of 50% of women at high medical and social risks of maternal mortality by 2023 has been developed. This document reflects a list of contraceptives for procurement under the state budget, taking into account their quality, safety and efficacy; identifies categories of women of reproductive age at high medical and social risk groups in order to ensure them with contraceptives purchased from the state budget; forecasts contraceptive needs of women from medical and social risk groups for the next 5 years; proposes a mechanism for monitoring and evaluation of the effectiveness of using contraceptives purchased under the public funds. A decree of the Ministry of Health for approval of the five-year plan is in progress.

b) Please mark X below how you assess progress toward elements of your commitment:

Achieved OR On-Track () / In-Progress OR Off-Track ()

c) If you marked "In-Progress" OR "Off-Track" in the above question, what are the key challenges or barriers you face in achieving these elements of your commitment?

2. **POLICY COMMITMENTS:**

- 2.1. Develop a program to protect the health of women, newborns, children and adolescents for 2019-2030 with a costed plan of action and budget, including a package of indicators
- 2.2. Eliminate barriers in the registration of modern methods of catraceptives in the Kyrgyz Republic and help increase the number and variety of contraceptives available in the market of the Kyrgyz Republic
- 2.3. Include to the Additional Drug Package under the State Guarantees Program of the Kyrgyz Republic the injectable, barrier contraceptives and contraceptives for emergency contraception
- a) Please provide an update below on achievements made in July 2018 June 2019 in support of these elements of your commitment, including any key upcoming commitment-related milestones:
- 2.1. A sectoral program on health of women, newborns, children and adolescents for 2020-2030 will be developed within the implementation of the Government's "Unity, trust, creation" Development Program for 2018-2022 and Government's "Healthy people a prosperous country" Program on protection of public health and development of health system for 2019-2030. This program will include a set of indicators to measure program-targeted approach of the Ministry of health for investment in health of women, newborns, children and adolescents. The sectoral program will

prioritize family planning program in the Kyrgyz Republic in order to ensure universal access to information, services and modern family planning methods as part of efforts to achieve sexual and reproductive health of population and respect their reproductive rights.

- 2.2. Based on contraceptives registries http://reglek.kg/#/registry and http://212.112.103.101/reestr in the Kyrgyz Republic, the following registered:
- 14 brands of drugs related to the segment of oral contraceptives (Belara, Jess, Diane35, Dimia, Janine, Kleira, Lindinet 20, Lindinet 30, Locipil, Midiana, Novinet®, Regulon, Ripevidon® Tri-Regol);
- 2 brands of non-hormonal contraceptives for intravaginal use in 7 dosage forms (Benatex and Farmatex):
- emergency contraception and post-contraceptive drugs (Mirolut Postinor and Escapel);
- IUDs (Yunona, T Cu);
- Injectables (Depo-Provera 150mg);
- 11 companies producing condoms of 14 trade marks (Contex, Vie'tex, Durex, M.DIOR, PUR, Masculan, VIZIT, Sico, VIVA, Velvet).

However, the most modern contraceptives are not yet registered in the Kyrgyz Republic, namely, uterine rings, contraceptive patches, hypodermic injectable contraceptives, female condoms and implants. The Ministry of Health is conducting advocacy measures to expand the contraceptive market, in particular aiming at registering microdozed oral contraceptives and implants. The National list of essential drugs and medical devices was approved on June 6, 2018, No. 274, and the followings were included:

- 3 oral contraceptives (Levonorgestrel 30 mcg + ethinyl estradiol 150 mcg, Norethisterone 35 mcg + ethinylestradiol 1 mg, levonorgestrel 150 mcg;
- 2 injectable hormonal contraceptives (Medroxyprogesterone acetate 150 mg / ml, norethisterone enanthate 200 mg / ml;
- progestogens Medroxyprogesterone acetate 5g;
- intrauterine device (intrauterine system with a reservoir containing 52 mg of levonorgestrel and copper-containing devices);
- progesterone releasing vaginal ring containing 2.074 g of micronized progesterone;
- implants (single-rod etonogestrel-releasing implant containing 68 mg of etonogestrel and double-stem levonorgestrel-releasing implant, each rod contains 75 mg of levonorgestrel (150 mg total).

The Resolution of the Government of the Kyrgyz Republic "Registration of Medical Products" entered into its force on February 14, 2019, where the registration procedure was changed in line with the Eurasian Economic Union. The pharmaceutical companies can use the simplified procedure to register contraceptives, which have already included into the list of the National list of essential drugs approved by the Ministry of Health.

2.3. Since 2018, DMPA injectable contraceptives 150 mg were included in the Additional Drug Benefit Package of the Mandatory Health Insurance Fund under the Government of the Kyrgyz

Republic. Emergency contraceptive drugs are in the reviewing process for further inclusion into the Additional Drug Benefit Package under the State Guarantees Program of the Kyrgyz Republic.

b) Please mark X below how you assess progress toward elements of your commitment:

Achieved OR On-Track () / In-Progress OR Off-Track ()

c) If you marked "In-Progress" OR "Off-Track" in the above question, what are the key challenges or barriers you face in achieving these elements of your commitment?

3. PROGRAMMATIC COMMITMENTS:

- 3.1. Increase the use of contraceptives by women of reproductive age to 30% by the end of 2020.
- 3.2. Improve the quality of family planning services through the implementation of WHO recommendations and clinical protocols for family planning with monitoring the implementation of clinical protocols.
- 3.3. Revise the curriculum for family planning of the Kyrgyz State Medical Inististute for Continuous Education with a focus on couseling and practical skills on long acting methods of contraception. Develop an electronic package of documents for family planning for distance learning.
- 3.4. Raise awareness among the population on family planning through communication activities and involvement of Republican Health Promotion Center and village health committees.
- a) Please provide an update below on achievements made in July 2018 June 2019 in support of these elements of your commitment, including any key upcoming commitment-related milestones:
- 3.1. According to the Medium-Term Expenditure Framework for 2019-2021 of the Ministry of Health of the Kyrgyz Republic, the use of contraceptives by women of reproductive age will be gradually increased up to 30% by the end of 2020.
- 3.2. Three clinical protocols on IUDs, progestin-only contraceptives and COCs have been developed and implemented. A clinical protocol on implants and injectable contraceptives of the progestin-type DMPA 104 mg has also developed and is in the reviewing process. From June 2019, the Ministry of Health will initiate development of a clinical protocol on surgical sterilization on the basis of the Law of the Kyrgyz Republic on Reproductive Rights of Citizens and Guarantees of their Implementation dated July 4, 2015 No.148. The Kyrgyz State Medical Institute for Continuous Education developed FP monitoring tool for key health policy decision makers of healthcare organizations and healthcare providers of family planning services. A training for trainers on introduction of this tool was conducted in 2019; two workshops are planned for 2020.

- 3.3. The Kyrgyz State Medical Institute for Continuous Education (KSMICE) has developed edistance learning package on family planning with certification of 40 credit hours upon completion (http://www.ksmi.kg/elearning/enrol/index.php?id=72). The KSMICE strengthened capability of 12 teachers, and it is planned to conduct 8 e-distance learning courses to cover 50 healthcare providers at the primary healthcare level. A training module on the postpartum and post-abortion insertion/removal of the IUD has developed, 382 medical personnel have been trained using SWAP funds. 232 primary healthcare specialists have been trained on FP module.
- 3.4. The Republican Health Promotion Center under the Ministry of Health of the Kyrgyz Republic conducted the following activities:
- Refresh-trainings on health for Health Promotion specialists using the methodological manual of "Healthy Lifestyle" (HLS) curricula of schools that includes modules on "Sexuality Education. Family planning". Trained 150 people.
- Training "Learning to be healthy: STI, family planning" for teachers of vocational schools at the Republican research and methodology center of vocational education system (16 hours, 14 people trained);
- Training for HLS school teachers within the courses of Pedagogical Retraining Institute named after I. Arabaev (Adolescent health in a life cycle, 22 people trained).
- 12 TV programs on family planning have been broadcasted; seven round tables and working meetings with local partners were organized; 100,000 copies of leaflets and booklets for the public printed out.
- b) Please mark X below how you assess progress toward elements of your commitment:

Achieved OR On-Track () / In-Progress OR Off-Track ()

c) If you marked "In-Progress" OR "Off-Track" in the above question, what are the key challenges or barriers you face in achieving these elements of your commitment?

SECTION II: STANDARD QUESTIONNAIRE

Please respond to all parts of the following 6 questions:

- 1. How has your country integrated adolescents and youth representatives, and/or representatives from marginalized groups (e.g. lowest-income, people with disabilities, out of school, minority groups, remote or displaced populations, etc.) into the FP2020 Focal Point team and/or country's FP technical working group or country engagement working group?
 - The Technical Working Group of the Advisory Council on Family Planning under the Ministry of Health includes a civil society representative working with people with disabilities, namely, Public Association Union of Disabled People of Issyk-Kul Oblast "Equality" (Chairman of the Board is also the President of the Association of Disabled People's Organizations of Issyk-Kul Oblast KR).

- a. If yes, how has this engagement influenced achieving your FP2020 commitment? Please also share successes and/or lessons learned from these engagements.
- b. If not, what challenges have you faced in working with these groups? (Please give examples)
- Although, the access to family planning (FP) services has been generally improved over the past 20 years, there are still political, cultural and social barriers remaining that prevent vulnerable and disadvantaged groups from accessing these services and fully exercising their reproductive rights. The fact of limited access to FP services not always reflected in national statistics that shields existing inequalities within the country. Adolescent birth rate: often associated with lower levels of contraceptive use, lack of friendly services that considers interests and needs of young people, as well as availability of comprehensive sexuality education.
- 2. How is your Government integrating family planning into universal health coverage (UHC)-oriented schemes and what is/are the mechanism(s) being used or considered? What specific actions were taken in the past year surrounding integration?
- 3. Has your Government organized the 2019 data consensus workshop?
 - a. If yes, did the FP2020 Focal Points participate in your country's 2019 data consensus workshop? If so, what insights were gained?
 - Not. Ensuring the population's guaranteed access to human rights issues, especially among women of reproductive age at high medical and social risk groups, is a key element for the achievement of nationally agreed development goals of ensuring universal access to reproductive health. These goals are priorities for the Kyrgyz Republic and commitments have been made to achieve the Sustainable Development Goals (Target 3.1.; 3.7; 5.6), which require further coordination and comprehensive actions in this area.
 - b. Were domestic expenditure data reviewed as part of the data consensus meeting? If so, please share insights and challenges you had in reviewing and validating these data.
 - In 2018, a Chairman of the Public Council of the Ministry of Finance worked on a collection of information on costs associated with family planning in the Kyrgyz Republic. Information was collected among governmental (Ministry of Health, Mandatory Health Insurance Fund), non-governmental (NGOs) and private sector organizations (healthcare organizations at the primary and secondary healthcare levels). Special questionnaires developed by the Netherlands Interdisciplinary Demographic Institute (NIDI) were submitted to obtain funding data. All stakeholders directly or indirectly involved in family planning, including governmental and non-governmental organizations, insurance and private sector companies completed these questionnaires. Analysis of data extracted from the Ministry of Health's annual reports was also made. The report included information about flows of consolidated budget of health sector in the Kyrgyz Republic, which is formed from the state budget, Mandatory Health Insurance Fund and special funds, civil sector, private insurance companies, private clinics and development partners.
 - 4. In the past year, were any efforts made to improve resilience and/or emergency preparedness of family planning systems in country?

- Yes, the Ministry of Health with the Ministry of Emergency Situations assists in strengthening national preparedness and response mechanisms in providing sexual and reproductive health (SRH), and annually enhances capacity of national experts and healthcare providers to strengthen emergency preparedness measures by integrating minimum initial service package (MISP) for SRH, where one of the components is family planning. In 2018–2019, 47 specialists trained on MISP. The MISP is reviewed on a regular basis. The latest was resulted in a review of humanitarian response and emergency preparedness situation in terms of protection of SRH, including FP. The analysis revealed a need for technical assistance to national stakeholders and governments to better integrate family planning as part of reproductive health into national and inter-agency emergency preparedness plans. In order to fill this gap, in 2019 a joint practical simulation exercise on MISP is planned to determine the assessment of the readiness of the MoH, MoES and local governments to ensure the MISP, including planning during crisis.

- 5. Have you worked to improve quality of care/rights based family planning in your programs?
- a. Do your family planning programs provide a broad range of contraceptive methods (long-term, permanent, or short acting)? Do you provide comprehensive information and counseling on all available methods, including information on any risks or side effects?
- Yes, information and advice on all available methods, including information on any risks or side effects, are provided by healthcare providers during appointments with patients.

The Ministry of Health conducted three practical training for maternity hospitals on the introduction of IUD within 2018 - 2019 (post-placental, postpartum within 48 hours and during the Caesarean section). As a result, participants together with trainers introduced 68 IUDs in the postpartum period that were based on informational consent of women in the maternity hospitals.

- b. To ensure a user-centered approach, do clients get a chance to provide feedback after clinic visits either through questionnaires, surveys, or suggestion boxes?
- In all healthcare organizations there are boxes for complaints and suggestions from patients, and in individual clinics, questionnaires have been introduced to assess patient satisfaction.
- c. Are your clinics open to improve accessibility and availability of services?
- Yes, open.
- 6. FP2020 and partners are currently gathering input to build a shared vision for family planning post-2020, in consultation with stakeholders at the country and global level. Have you had an opportunity to participate in any way in this consultation process (e.g. online survey, consultative calls, etc.)?

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- No, there was no opportunity to participate in the consultation process.

Please provide the following information for the Government's point of contact for this update

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□ Date of Self-Report: June 20, 2019