STRENGTHENING HEALTH EMERGENCY PREPAREDNESS AND READINESS TO ADVANCE HEALTH SECURITY IN THE KYRGYZ REPUBLIC
CURRENT SITUATION AND TRENDS

Health emergency preparedness in Kyrgyzstan has been strengthened in recent years. In 2016, Kyrgyzstan did a voluntary external evaluation of its preparedness and response capacities for health emergencies. This was done in the context of implementing the International Health Regulations (IHR), a treaty signed by 196 countries, including Kyrgyzstan. The IHR (2005) provide an international legal framework for all countries worldwide to protect people from epidemics and other health emergencies. To ensure that countries have an adequate level of public health emergency preparedness, national IHR capacities must be continuously monitored and periodically evaluated.

International Health Regulations Monitoring and Evaluation framework includes the State Party Annual Report (SPAR), the Joint External Evaluation (JEE) Simulation Exercises, and the After-Action Review, which help to provide a comprehensive overview of the status of IHR country capacities, as well as a basis for evidence-based policy-making. Kyrgyzstan submitted the latest SPAR in October 2018, completed the JEE in 2016 and conducted seven simulation exercises in 2018 with support of the World Health Organization and in close coordination with other United Nations agencies and partners.

The government of Kyrgyzstan is committed to further develop and maintain strong emergency preparedness and response capacities. The Ministry of Health and the Ministry of Emergencies have much experience in responding to incidents such as landslides, avalanches and disease outbreaks.

The Joint External Evaluation of Kyrgyzstan’s IHR core capacities demonstrated that Kyrgyzstan has high quality public health service provision and structures in place for a multi-sectoral response to health emergencies at the national, regional and district levels, and there is also an Interdepartmental Committee on Civil Protection, headed by the Prime Minister, that manages emergencies. It also demonstrated areas for further improvement like lack of a whole-of-government, all-hazards approach to national IHR implementation, relative challenges of the national IHR focal point outside the health sector, and fragmented distribution of roles and responsibilities between the various sectors in the context of IHR implementation. There are many inspectorates, centres, agencies and departments under various ministries and at various levels (central, regional and district) responsible for various aspects of IHR implementation. The JEE also demonstrated low availability of human resources and the quality of specialist training in all areas of health, such as epidemiology, chemical and nuclear/radiation safety, nutrition and providing medical assistance. The evaluation has found that there was a high turnover of staff, particularly highly qualified staff, along with inadequate remuneration.
STATE POLICIES IN THE FIELD OF HEALTH EMERGENCIES

Kyrgyzstan has an extensive, wide-ranging national legislative framework at various levels of the legal hierarchy, which includes a large number of regulatory instruments in the field of public health, such as laws on public health, radiation/nuclear safety and chemical security, water safety, in addition to a series of government decrees and more than 40 orders by the Ministry of Health on various aspects of public health.

In addition, there is also legislation at the level of the Eurasian Economic Union (EAEU), of which Kyrgyzstan became a member in August 2015. The relevant EAEU legislation largely concerns the prevention and treatment of communicable diseases, with an emphasis on detection and response, but also covers transboundary public health threats and information sharing.

National legislation on public health was reviewed in 2018 to assess compliance with the IHR. The review highlighted the limitation of national legislation to support coherent implementation of IHR (apart from specific provisions of the IHR, which are covered by particular legislative provisions). Another important conclusion was that the mandate of the national focal point for IHR was not adequately supported for compliance with a whole-of-government, all-hazards approach to IHR. Work also began on the national action plan to support efforts to develop national IHR capacity.

By the Decree of the Government of the Kyrgyz Republic (No. 236 as of April 21, 2017), the Ministry of Health was officially designated as the IHR National Focal Point. By the Order of the Ministry of Health No. 695 as of 2 August 2017, the functions of the IHR National Focal Point have been delegated to the Department of Disease Prevention and State Sanitary-Epidemiological Surveillance.

A significant weakness in relation to IHR implementation from the standpoint of national legislation is that the process is confined almost entirely to the health sector, and partly to the animal health sector, whereas other sectors such as transportation, point of entry authority, and food sector are not included to address relevant IHR core capacities.

Overall state funding for IHR was not reviewed. Individual aspects of IHR, such as control of communicable diseases, epidemiological surveillance, laboratory services, human resources, points of entry, and preparedness are ensured through externally funded programme measures or resources from other donors, such as the Russian Federation, under the agreement between the Kyrgyz Government and the Government of the Russian Federation to provide technical assistance to Kyrgyzstan in the process of its EAEU accession.

On 28 March 2019, during the state visit of the Russian Federation President Vladimir Putin to the Kyrgyz Republic, Kyrgyzstan and Russia signed an agreement between the Ministry of Health of Kyrgyzstan and the Russian Federal Service for the Oversight of Consumer Protection and Welfare on cooperation in implementation of the IHR. This shows, again, needs and Government’s commitment to work towards implementation of the IHR.
POLICY RECOMMENDATIONS:

• Complete the legislative process to strengthen the national focal point’s capacity to fulfil its functions in accordance with an all-hazards, whole-of-government, multidisciplinary approach and improve the coverage of non-health sectors.
• Initiate a government decree on implementation of the IHR that requires all relevant national sectors, in addition to the health sector, to proactively implement IHR at the national level.
• Develop regulatory acts in the field of regulation of biological safety such as a national law on biosafety.
• Ministry of Emergency Situations and Ministry of Health to implement a plan of civil protection and include the Minimum Initial Service Package there and other issues related to reproductive health and family planning.
• Develop a methodology for psychological support during and after emergency situations.
• Strengthen work on implementing international humanitarian laws in Kyrgyzstan and procurement of medicines during emergency situations.
• Standardize and organize the role of volunteers during emergency response and strengthen their capacity to address emergency situations.
• Work towards the implementation and adoption of the national action plan on health security and endorse it by a higher legislative act.
• Develop and endorse a plan on emergency risk communication and highlight the importance of having messages and materials that are ready and tailored for the public.
• Work on the protection and safety of medical staff during emergency response which need to be strengthened in the preparedness phase.

• Provide nutrition to meet the basic food needs of the communities in areas prone to disasters and climate change risks.
• Support the Ministry of Emergencies to enhance community-level risk planning and preparedness in order to ensure access to food and healthy nutrition in case of natural disasters or climate change related shocks.
• Include measures to prevent food related health issues and provision of healthy nutritious food for affected population in emergency preparedness actions.
• Reflect migrants’ health issues more thoroughly in national strategies for emergency and climate change adaptation. In addition, improve interinstitutional cooperation in order to develop and implement more effective emergency and climate change adaptation strategies, as those are related to many different policy fields. For instance, the State Agency for Environmental Protection and Forestry, the State Migration Service, and the Ministry of Emergency Situations should collaborate more closely to understand and manage the current and future dynamics of emergency and climate induced migration in Kyrgyzstan. Civil society should also be involved in these efforts.

This policy brief is based on the outcomes of the Development Dialogue on Health Emergency Preparedness and Readiness in Kyrgyzstan, hosted jointly by the United Nations system and the University of Central Asia in April 2019.