



CASE STUDY

Making Development Work in Afghanistan: A Case Study of the Health Sector

Against all odds, a quiet and peaceful revolution has been taking place in Afghanistan. Since 2001, after decades of war and misrule, major gains in health care and health status have unfolded for the Afghan people. Access to health services is improving through the training of new health care personnel, and under-5 mortality is decreasing as the quality of service delivery improves and immunization rates rise.

CONDITIONS IN 2001

By 2001, Afghanistan's health infrastructure was demolished. Insecurity and a lack of health care providers, especially female providers after years of Taliban rule, were major challenges to health care delivery, particularly in the South and along border regions. Geographic isolation and cultural barriers posed further obstacles. Under these conditions, the country had some of the world's highest rates of infectious disease and maternal and child mortality. Maternal mortality, for example, was estimated at 1,600 deaths per 100,000 live births, the second highest ratio in the world.¹ Life expectancy was just 45 years for women and 47 years for men.² In addition to high burdens of malaria and tuberculosis (TB), Afghanistan remained one of the few countries in the world with live polio virus.³



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A young Afghan mother receives oral contraceptives and family planning education during a visit to her midwife.

HEALTH IMPROVEMENTS SINCE 2001

Despite the many challenges, substantial improvements have occurred since 2001 through the collaborative efforts of the Afghan Government, USAID, and other donors. Thousands of lives are being saved each year. More than 90 percent of children are now immunized against polio.⁴ Under-5 mortality has dropped by 26 percent, to 191 deaths per 1,000 live births, and deaths of infants before age 1 have dropped by 22 percent, to 129 deaths per 1,000 live births.⁵ The number of TB treatment facilities has tripled,⁶ and TB cases have fallen by 60 percent.⁸ More than 670 health facilities have been constructed or renovated, and thousands of health workers, including physicians, midwives, community health workers, nurses, and laboratory technicians, have received pre- or in-service training.⁶ USAID support in 13 provinces has contributed greatly to progress in these and other areas, as shown in the table below.

Health indicator	2000–2003	2006–2008
Population with access to basic health services (%)	9 ⁴	84 ⁷
Health facilities with at least one skilled female health provider (%) ⁸	38	76
Married women in rural areas using modern family planning method (%) ⁹	5	16
Pregnant women in rural areas receiving antenatal care (%) ⁸	5	32
Pregnant women in rural areas delivering with skilled birth attendant (%) ⁸	6	19
National immunization coverage (% children completed diphtheria-pertussis-tetanus immunizations)	31 ⁴	77 ¹ /34 ⁵

THE PATH TO SUCCESS

While the rehabilitation of Afghanistan's health system is far from complete, tremendous successes have taken place in the past eight years. Afghan ownership and international donor coordination and collaboration are at the heart of this success. To achieve national coverage and avoid unnecessary duplication of efforts, the Ministry of Public Health (MoPH) has apportioned the country's 34 provinces among donors, including USAID, and also organizes regular donor meetings. USAID assistance has focused on the following areas:

- **Creating health care standards.** In 2002, the MoPH collaborated with USAID, other donors, and international experts to determine major priorities for rebuilding the health system and, in 2003, introduced two standardized health care packages – the Basic Package of Health Services (BPHS) and the Essential Package of Hospital Services (EPHS) – for use nationwide. These packages allowed the MoPH to improve the quality, efficiency, and equity of facility operations and services, and provided an opportunity to increase public trust in government services throughout the country.
- **Building capacity to create greater Afghan ownership.** The MoPH, USAID, and other donors rehabilitated and reinforced key health information systems, including financial management and procurement systems. The improved systems enabled the MoPH to plan and manage activities, allocate resources, and monitor expenditures. To strengthen human resources capacity, USAID has trained nearly 17,000 of the 43,611 community health workers (approximately 40 percent) currently practicing in the country,² and has supported midwifery training schools,¹⁰ with more than 1,150 midwives trained.¹¹
- **Providing financial support to the MoPH.** As a result of its strong and continuous leadership in program and financial management, the MoPH is the first Afghan ministry certified by the U.S. Government as ready to receive and manage direct assistance. In the 13 USAID-supported provinces, up to \$236 million in health funding will be provided directly to the MoPH over the next five years to manage the delivery of the BPHS and EPHS programs to 8.5 million people.

ONGOING USAID SUPPORT

The achievements in Afghanistan's health sector over a relatively short period of time are encouraging, but health conditions for many Afghans remain dire. USAID will continue to support the key building blocks of Afghanistan's health system and meet the country's health service priorities at the central and provincial levels. USAID-supported health information, education, and communication programs will continue to work from the ground up to empower individuals, families, and communities to protect their health. Along with the Afghan Government and the international community, USAID will continue to build upon the impressive successes described here to ensure a better future for the Afghan people.

¹ Bartlett LA, et al. Maternal mortality in Afghanistan: Magnitude, causes, risk factors, and preventability. Afghanistan Ministry of Public Health, CDC, and UNICEF. 2002. (2002 data)

² Population Reference Bureau. (2003 data)

³ WHO Vaccine Preventable Diseases Monitoring System. December 2008. (2001 data)

⁴ USAID. Improving access to basic health care in Afghanistan: Effectively aligning for stability in delivering core services. 2008.

⁵ Afghanistan Health Survey. 2006.

⁶ USAID Afghanistan Health Overview. October 2008.

⁷ Ministry of Public Health Afghanistan. April 2009.

⁸ USAID Afghanistan. Afghanistan health status at a glance (brochure). 2008.

⁹ USAID Afghanistan Office of Social Sector Development. Afghanistan Health Overview. November 2008.

¹⁰ USAID. Training Afghan midwives. March 2006.

¹¹ JHPIEGO Health Services Support Project. 2009.



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Dedication of a USAID-funded health facility, Badakhshan Province, Afghanistan, April 2006. The Minister of Public Health addresses the largest public gathering in the history of the Sar-e-Maidan community.