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Tajikistan: Maternal and Child Health Integrated Care Project

Project Name	Maternal and Child Health Integrated Care Project
Project Number	51010-002
Country	Tajikistan
Project Status	Proposed
Project Type / Modality of Assistance	Grant
Source of Funding / Amount	Grant: Maternal and Child Health Integrated Care Project
Amount	concessional ordinary capital resources lending / Asian Development Fund US\$ 32.00 million
Strategic Agendas	Inclusive economic growth
Drivers of Change	Governance and capacity development Knowledge solutions Partnerships
Sector / Subsector	Health - Health sector development and reform
Gender Equity and Mainstreaming	Gender equity
Description	The project is aligned with the following impact: health status and well-being of mothers and children in the project districts improved. The project will have the following outcome: Coverage of women and children with quality MCH services improved. Project districts are Sh. Shohin, Rasht, and Fayzobod. The project outputs are (i) integrated delivery of quality maternal and child health services in project districts improved; (iii) infrastructure and equipment for maternal and child health services in project districts improved; and (iiii) knowledge on maternal and child health services in project districts improved, and (iii) knowledge on maternal and child health services in project districts improved. Output 1: Integrated delivery of quality maternal and child care services in project districts improved. The project will (i) enhance human workforce planning and capacity building through the development of the human resource planning and deployment strategy for project targeted districts; institutional capacity building for Continuous Medical Education (CME); and strengthening of clinical capacities in the project districts; in operationalize effective maternal and child health (MCH) referral system between community, primary health care (PHC) and district level hospitals in managing MCH services through development/revision and enforcement of referral pathways, institutionalization of the feedback mechanism between different layers of the MCH service delivery levels in project districts; and integration of vertical programs into PHC; (iii) institutionalize Continuous Quality Improvement (CQI) system at national, sub-national and facility levels and establishing a supportive supervision system; and (ivi) plot case-based financing mechanism at project district hospitals. Output 2: Infrastructure and equipment for MCH services in project district hospitals (CDH) and DHCs building; (ii) supply of medical equipment and medical furniture to refurbished district hospitals and provision of basic equipment to PHC fac

Project Rationale a Linkage to Country/Regional S	strategy	The pursuit of sustainable development goals is echoed in the _National Health Strategy for Tajikistan 2010 2020_ which envisions strengthening of maternal, newborn, child and adolescent health, prevention and control of infectious diseases, decreasing the burden of preventable non-communicable diseases, and strengthening PHC. The government approved the Strategic Plan for the Rationalization of Medical Facilities in the Republic of Tajikistan for 2010 2020 (No. 169 dated 1 April 2011) to rationalize health service delivery. The rationalization plan envisions an integration of health services across levels of care and types of providers. The project builds on ADB's operational plan for health to support inclusiveness and reduce vulnerabilities in Asia and the Pacific. ADB will contribute to the integration of primary and secondary care concentrating on maternal and child health which is key for better quality and efficient provision of services. The project will consolidate different pilots of development partners, which focuses on either primary health care or secondary care, into an integrated concept. Integrated care refers to integration across primary, secondary, and tertiary health services to provide more continuous care to patients through the improved coordination of services, and improving efficiencies in health service delivery to inform the project and the ongoing country health reforms.	
Impact		Health status and well-being of mothers and children in selected districts improved Sustainable Development Goals 3.	
Outcome		Coverage of women and children with quality MCH services improved	
Outputs		Integrated delivery of quality maternal and child care services in project districts improved Infrastructure and equipment for MCH services rationalized and improved Knowledge on maternal and child health and health seeking behaviors improved	
Geographical Locat	tion	Nation-wide	
Safeguard Catego	ories		
Environment		В	
Involuntary Resettl	ement	С	
Indigenous Peoples	5	С	
Summary of Envi	ronmenta	l and Social Aspects	
Environmental Asp	ects		
Involuntary Resettl	ement		
Indigenous Peoples	5		
Stakeholder Com	municatio	n, Participation, and Consultation	
During Project Desi	ign		
During Project Impl	lementatior	1	
Business Opport	unities		
Consulting Services	The project will require an estimated 1,071 person-months of national individual consultants (including project administration group staff); 6 person-months international individual consultant; 461 person-months for project consulting firms; 12 person-months audit firm; and 324 person-months for direct contracting. Advance contracting will be undertaken for the recruitment of project administration group manager and key technical staff, project implementation support firm, design and civil works supervision firm, integrated materna and child health and behavior change communication firm, financial management consultant, and integrated care consultant.		
Procurement	The project will construct/renovate district hospitals and district health centers. The project will provide various medical equipment, IT equipment and other related accessories to the hospitals and district primary health care clinics to cost more than \$100,000, using open competitive bidding (OCB) procedures. Request for quotation will be used for procurement of project administration group equipment, furniture and vehicle. Advance contracting will be undertaken for the procurement of project administration group office furniture, office equipment and vehicles.		
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Responsible ADB O		Lavado, Rouselle	
•	•	Central and West Asia Department	
Responsible ADB D	Ivision	CWSS	

Executing Agencies

Ministry of Health and Social Protection of the Population of the Republic of Tajikistan Shevchenko Street 69 Dushanbe Tajikistan

Timetable	
Concept Clearance	07 Feb 2018
Fact Finding	06 Aug 2018 to 17 Aug 2018
MRM	17 Sep 2018
Approval	- ·
Last Review Mission	- ·
Last PDS Update	28 Sep 2018
Project Page	https://www.adb.org/projects/51010-002/main
Request for Information	http://www.adb.org/forms/request-information-form?subject=51010-002
Date Generated	09 November 2018

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