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## CARE OF MOTHER AND CHILD – HEALTH PRIORITIES IN THE REPUBLIC OF KAZAKHSTAN



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Over 20 years of independence, Kazakhstan has seen the development of the health system in all directions. In 2011 the republic adopted the State Program "Salamatty Kazakhstan", which aims to reduce morbidity and mortality. In accordance with the laws of the Republic of Kazakhstan, women have the right to infertility treatment, including the use of modern assisted reproductive techniques and technologies that are allowed in the Republic of Kazakhstan.

Active management of third stage of labor, pain relief in labor, the regionalization of perinatal care are divided what kind of assistance they can provide.

**Key words:** Salamatty Kazakhstan, mother's and child's health, perinatal care, reproductive techniques.

Over 20 years of independence, Kazakhstan has seen the development of the health system in all directions. The State Program of Reform and Development of Health of the Republic of Kazakhstan for 2005-2010, one of the priorities is to improve the health and demographic situation, which is primarily related to the health of mother and child [1, 2, 3]. To implement this program, the following measures aimed at enhancing services to the further development of tertiary care, resource utilization, improve quality

of care, the introduction of new reproductive techniques and technologies, development of research programs, followed by the introduction of their results into practical health care [4, 5, 6].

All the regional programs in this case, a program to reduce maternal and infant mortality rates for every country consist of the needs of the region, socio-economic and health characteristics of the country, development of a national program targeted to improve and strengthen reproductive health, including a program to reduce maternal and infant mortality in the Republic of Kazakhstan with the definition of steps and actions to be taken. In 2011 the republic adopted the State Program "Salamatty Kazakhstan", which aims to reduce morbidity and mortality, the uniqueness of the program "Salamatty Kazakhstan," is that it ensures the availability and quality of health services to all citizens, regardless of their place of residence because 40% of Kazakhstan's population lives in rural areas. In addition, the program "Salamatty Kazakhstan" provides an effective cardiac, cardiac surgery

service. The State program implemented a set of national screening programs based on the recommendations of the World Health Organization. National screening program provides an opportunity for every citizen to complete their routine inspection free of cost. According to the results of screening examinations in 6 months more than 856,000 adults and more than 1,7 million children were inspected. The main focus of the State program is the promotion of healthy lifestyles and the principle of shared responsibility for their health rights.

By implementation of State Program maternal and infant mortality will reduce by half, the over all mortality rates will be reduced by 15%, by the year 2015. Decrease in morbidity and mortality from major social diseases, will in turn give the opportunity to increase life expectancy to 70 years. Implementation of the State Program will create a modern and competitive health care system that meets the needs of the population.

World Health Organization considers reproductive health a priority of its activities (resolution WHA 48,10), and calls upon all countries to further develop programs to improve reproductive health, for which it recommends to assess their needs for improving it, to develop medium-and long-term guidelines in accordance with the directions developed by WHO, with particular attention to equality, prospects, participation in need of assistance, in accordance with internationally recognized human rights principles. WHO proposes to regularly observe and assess the achievements, the quality and effectiveness of reproductive health programs. Reproductive health is important and a relevant part of the European strategy "Health 21". In recent years, Kazakhstan has made significant economic growth, which made it possible to substantially increase funding for health care and open up prospects for its further growth. As a socially-oriented organization, now the government pays serious attention to the reproductive health of citizens.

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Despite the positive changes in demographics, there remains a low level of health of women and children. The relevant a topical issue of reproductive health remains and 16% of marriages are infertile. This is largely due to the high incidence of infections, sexually transmitted diseases, high levels of abortion, complications in childbirth and the postpartum period. According to the registered cases in the country statistics reported, 1 in 4 pregnancies end in the artificial interruption. The frequency of births to teenage girls 15 – 19 years tends to increase, and in 2008 was 31.1 per 1.000 population. From year to year, there is an increase in the frequency of preterm birth (2005 – 9.4, 2009 – 17.2) and the number of premature babies increases (2005 – 14.193, 2009 – 20.943). The main causes of maternal mortality (2005 – 40.5, 2009 – 36.9 per 100 thousand live births) are obstetric hemorrhage, gestosis, extragenital pathology. In the 1970-1980's the birth rate in the country was at 24-25 ‰, reaching a peak in 1987 – 26.2‰. The absolute number of births increased steadily from 307.000 in 1970 to 417,000 in 1987, but then began to decrease. In 1991-1999 in Kazakhstan there was a sharp decline in fertility. As a result, the total fertility rate over this time decreased from 21.5‰ in 1991 to 14.0 ‰ in 1999. At the end of the past and the beginning of this century, the situation has improved significantly with fertility: total fertility has increased from 18.42 (2005) to 22.75 (2008), which is associated with stabilization of the economic situation in the country, improvement of living standards, the realization of plans for the birth of children during the crisis.

The achievement of positive parameters in the demographic development in general and reproductive health in particular is one of the most important tasks of the Republic of Kazakhstan. National strategy for reproductive health in the country is based on a legal basis. In accordance with the Decree of the President of the State program of reforming the Republic of Kazakhstan for 2005-2010, one of the main priorities of the development strategy of Kazakhstan until 2030 is to improve the health and demographic situation in the republic, which is primarily related to the health of mother and child.

In accordance with the laws of the Republic of Kazakhstan, women have the right to infertility treatment, including the use of modern assisted reproductive techniques and technologies that are allowed in the Republic of Kazakhstan: the donation of gametes, artificial insemination, artificial insemination and embryo implantation. Men and women of marriageable age have the right to possession of germ cells. Citizens have the right to protect their reproductive rights and free reproductive choice, receive services for protecting reproductive health and family planning, obtaining accurate and complete information about the status of their reproductive health, health during pregnancy, childbirth and postpartum.

The law declared that, human cloning is prohibited in the Republic of Kazakhstan. Kazakh legislation establishes that citizens, who are a married couple, have the right to use assisted reproductive techniques and technologies only by mutual agreement. Citizen who has given consent to the use of assisted reproductive techniques and technologies, have the same rights and duties as parents of the child, in respect to his care and maintenance in accordance with the laws of

the Republic of Kazakhstan. Surrogacy is allowed in the country due to medical reasons, which involves the nurturing and the birth of a child under an agreement between the surrogate mother and potential parents with the payment of remuneration or without it. The law established that the surrogate mother is not entitled to refuse to give her child to the persons who have concluded an agreement with her, as well as to transfer the child to other people. When using assisted reproductive techniques and technologies prenatal sex selection is not allowed, except, when there is a possibility of inheritance of diseases related to sex. Our law states that a human embryo can not be obtained for commercial (sales), military and industrial purposes.

Services related to reproductive health of citizens and family planning are provided by both public and private health organizations and individuals engaged in private medical practice, free of charge within the guaranteed amount. Control over the quality of services is carried out by regional offices of the Committee for Quality Control of Medical Services of the Ministry of Health of the Republic of Kazakhstan, by defining line of therapy with existing standards guaranteed amount of assistance includes: an urgent gynecological care, carrying out operative and conservative treatment for benign and malignant tumors. Public funds are used to provide medical assistance to children and adolescents, medical and genetic, consultation prenatal diagnosis, including invasive research. In 2010 infertility treatment by assisted reproductive technologies was included in the guaranteed volume of free medical care and the number of programs for extra corporal fertilization was increased to 350.

Now, according to the Unified National Health System, a woman may choose to give birth, in any institution where she wants, in any place in Kazakhstan. All obstetric facilities in Kazakhstan are working on the WHO "Effective Perinatal Care," which involves simple techniques that do not require extra costs, expensive drugs and expensive equipment. The basic principles of the program are: women should give birth in conditions as close to home, a physiologically natural and desirably, without any intervention. Specialists in obstetrics say that 85% of births require only observation. But 15% is still present complications where help is needed. The WHO program defines clear criteria for when physicians should intervene in the birth process, and when there are indications to use or not to use drugs for induction of labor, and antibiotics during pregnancy and to nursing mothers.

"Effective Perinatal Care," gives importance to the psycho-emotional preparation of the woman for childbirth. Therefore, common partnership delivery is preferred, because it is a lot easier if with a future mother in childbirth there is someone close, with whom she is comfortable and happy like at home.

### Conclusion

Active management of third stage of labor is practiced for a better contraction of the uterus and removal of placenta. Immediately after birth, in the first minute the woman is injected 10 units of oxytocin in the outer third of the thigh which 3-4 times reduces the amount of bleeding. Pain relief in labor, in particular, to use an epidural anaesthesia during labor is

used under strict medical indications. All organizations for maternal and child health by the Ministry of Health “The regionalization of perinatal care of the Republic of Kazakhstan” are divided into categories depending on their equipment, the level of medical services and what kind of assistance they can provide. The 4<sup>th</sup> level – is the highest. Each institution must apply the “School of the expectant mother,” and courses for future partners in the delivery. Such a school can be attended in any birthing facility of your choice.

Of course, the obstetric institutions differ in the level of services, availability of necessary equipment, but they provide women with adequate care, appropriate medical care during the prenatal and postnatal periods and comfortable environment.

#### REFERENCES

- 1 WHO: Special Programme. Hum. Reproduction // Fertil. Steril. – 1987. – N47. – P. 964-968
- 2 Women’s and Children’s Health: Evidence of Impact of Human Rights World Health Organization – 2013. – P. 140
- 3 Каюпова Н.А. Новые технологии в акушерстве, гинекологии и перинатологии: реальность и возможности (гуманист. и нравственно-правовой аспекты) // Акушер., гинекол. и перинатал. – 2004. – №2. – С. 3-8
- 4 Женщины и мужчины Казахстана: стат. сб. /Под ред. А.А. Смаилова. – Астана, 2010. – 100 с.
- 5 Указ Президента Республики Казахстан от 29 ноября 2010 года №1113 «Об утверждении Государственной программы развития здравоохранения Республики Казахстан «Саламатты Қазақстан» на 2011-2015 годы». <http://online.zakon.kz>
- 6 Приказ Министра здравоохранения и социального развития РК №344 от 12 мая 2015 г. «Об утверждении Правил обеспечения получения гражданами Республики Казахстан и оралманами гарантированного объема бесплатной медицинской помощи». <http://pharm.reviews>

#### ТҰЖЫРЫМ

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#### **АНА МЕН БАЛАНЫҢ ДЕНСАУЛЫҒЫН ҚОРҒАУ – ҚАЗАҚСТАНДАҒЫ БАСЫМДЫҚТАРЫ**

Тәуелсіздіктің 20 жылы ішінде Қазақстан барлық бағыттар бойынша денсаулық сақтау жүйесінің дамуының куәсі болды. Республика сырқаттанушылық пен өлім-жітімді азайтуға бағытталған «Саламатты Қазақстан» мемлекеттік бағдарламасын 2011 жылы қабылдады. Қазақстан Республикасының заңнамасына сәйкес, бедеулігі бар әйелдерге қосалқы репродуктивтік әдістерді пайдалану рұқсат етілді.

**Қорытынды.** Үшінші кезеңді белсенді жүргізу, босану кезінде ауруды басу, акушерлік және перинаталдық көмекті аймақтандырудың асқынудың алдын алудағы маңызы зор.

**Негізгі сөздер:** «Саламатты Қазақстан», ана мен баланың денсаулығы, нәресте күтімі, репродуктивтік әдістер.

#### РЕЗЮМЕ

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#### **ОХРАНА ЗДОРОВЬЯ МАТЕРИ И РЕБЕНКА – ПРИОРИТЕТ- НЫЕ НАПРАВЛЕНИЯ В РЕСПУБЛИКЕ КАЗАХСТАН**

За 20 лет независимости Казахстан стал свидетелем развития системы здравоохранения во всех направлениях. В 2011 году республика приняла государственную программу «Саламатты Қазақстан», которая направлена на снижение заболеваемости и смертности. В соответствии с законодательством Республики Казахстан, женщины имеют право на лечение бесплодия, в том числе с использованием современных вспомогательных репродуктивных технологий, которые разрешены в Республике Казахстан.

**Вывод.** Активное ведение третьего периода, обезболивание родов, регионализация акушерской и перинатальной помощи имеют важное значение в профилактике осложнений.

**Ключевые слова:** «Саламатты Қазақстан», здоровье матери и ребенка, перинатальный уход, репродуктивные технологии.

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