



72011

HEALTH EQUITY AND FINANCIAL PROTECTION DATASHEETS

EUROPE AND CENTRAL ASIA



ACKNOWLEDGEMENTS

These datasheets were produced by a task team consisting of Caryn Bredenkamp (Task Team Leader, Health Economist, HDNHE), Adam Wagstaff (Research Manager, DECHD), Leander Buisman (consultant), Leah Prencipe (consultant) and Devon Rohr (consultant, graphic design), under the overall supervision of the Sector Manager, HDNHE, Nicole Klingen.

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ALBANIA

The Health Equity and Financial Protection datasheets provide a picture of equity and financial protection in the health sectors of low- and middle-income countries. Topics covered include: inequalities in health outcomes, health behavior and health care utilization; benefit incidence analysis; financial protection; and the progressivity of health care financing. Data are drawn from the Demographic and Health Surveys (DHS), World Health Surveys (WHS), Multiple Indicator Cluster Surveys (MICS), Living Standards and Measurement Surveys (LSMS), as well as other household surveys where available. The datasheets use a common set of health indicators for all countries. All analyses are conducted using the health modules of the ADePT software.

INEQUALITIES
IN HEALTH
OUTCOMES

CHILD HEALTH ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005 ²							
Stunting	33.4%	26.7%	28.7%	22.8%	19.0%	26.3%	-0.106***
Underweight	12.1%	8.5%	7.9%	2.0%	2.7%	6.8%	-0.309***
Diarrhea	9.5%	8.4%	7.7%	4.3%	4.1%	6.9%	-0.174***
Acute respiratory infection	8.7%	8.3%	5.6%	5.4%	7.4%	7.1%	-0.075
2008-09 ¹							
Infant mortality rate	29.9	10.3	24.7	17.4	14.3	19.9	-0.127*
Under-five mortality rate	40.1	18.7	29.2	14.2	12.9	24.2	-0.194***
Stunting	30.6%	24.8%	19.9%	20.8%	15.9%	22.7%	-0.122***
Underweight	9.6%	5.1%	5.4%	5.4%	3.7%	6.0%	-0.153**
Diarrhea	5.5%	5.9%	7.2%	3.4%	4.2%	5.4%	-0.063
Acute respiratory infection	9.6%	8.8%	12.7%	5.5%	6.6%	8.9%	-0.098*
Fever	8.1%	8.7%	9.6%	6.8%	5.0%	7.8%	-0.078

INEQUALITIES IN
RISKY BEHAVIOR

RISK FACTORS ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2008-09 ¹							
Smoking (women)	0.8%	1.1%	2.1%	5.0%	11.6%	4.2%	0.519***
Concurrent partnerships	2.5%	2.7%	3.3%	5.5%	8.2%	4.5%	0.268***
Condom usage (more than one partner)	11.6%	2.9%	15.0%	24.0%	40.1%	25.0%	0.310***

INEQUALITIES
IN HEALTH CARE
UTILIZATION

MATERNAL AND CHILD HEALTH INTERVENTIONS ^{1,2}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005 ²							
Full immunization	88.4%	82.7%	85.8%	85.2%	65.2%	82.3%	-0.042***
Contraceptive prevalence	0.2%	0.0%	0.0%	0.1%	0.4%	0.1%	0.284
2008-09 ¹							
Full immunization	91.3%	91.5%	89.7%	86.9%	91.7%	90.2%	-0.002
Skilled antenatal care (4+ visits)	49.3%	53.8%	67.3%	81.3%	91.4%	67.3%	0.137***
Skilled birth attendance	98.7%	99.2%	99.4%	100.0%	100.0%	99.4%	0.003***
Contraceptive prevalence	7.2%	6.1%	7.5%	7.1%	11.4%	7.9%	0.110***

Note:

The Health Equity and Financial Protection datasheets use a standardized selection of indicators (see Measurement of Indicators for full list). When (1) data sources are not available or (2) indicator-specific sample size is less than 250 per quintile for mortality indicators or less than 25 per quintile for all others, indicators are not reported for the country under analysis.

For analysis of inequalities using WHS, DHS and MICS, quintile ranking is based on an asset index. For all other analyses, ranking is based on household consumption. Q = quintile (where quintile 1 is the poorest)

CI = concentration index; ranges between -1 and 1; negative sign indicates that the health outcome takes higher values among the poor

* Significant at 10%, **Significant at 5%, ***Significant at 1%.

Data sources:

1=2008-09 Albania Demographic and Health Survey, 2= 2005 Albania Multiple Indicator Cluster Survey, 3=n/a World Health Survey.

Recommended citation: World Bank. 2012. Health Equity and Financial Protection Datasheet - Albania. Washington, D.C.: World Bank.

For more information and the latest versions of the Health Equity and Financial Protection reports and datasheets, see: www.worldbank.org/povertyandhealth.

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THE WORLD BANK

ARMENIA

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INEQUALITIES
IN HEALTH
OUTCOMES

CHILD HEALTH ^{1a,1b,1c,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2000 ^{1a}							
Infant mortality rate	56.5	50.9	36.4	48.9	26.6	45.1	-0.122**
Under-five mortality rate	57.7	58.3	52.8	53.9	38.2	53.2	-0.082
Stunting	24.8%	19.2%	18.5%	13.1%	13.1%	18.0%	-0.133***
Underweight	2.9%	2.6%	5.2%	1.2%	1.0%	2.5%	-0.159*
Diarrhea	9.1%	6.9%	8.4%	7.8%	7.0%	7.8%	-0.036
Acute respiratory infection	10.7%	11.4%	10.4%	15.1%	11.3%	11.7%	0.040
Fever	16.0%	15.3%	15.2%	23.0%	14.1%	16.6%	0.032
2005 ^{1b}							
Infant mortality rate	46.3	28.6	23.9	32.7	17.5	30.7	-0.144*
Under-five mortality rate	49.2	34.7	34.6	22.8	27.9	35.2	-0.152
Stunting	19.2%	8.7%	15.9%	24.4%	17.0%	17.1%	0.040
Underweight	4.7%	3.1%	4.2%	6.1%	4.4%	4.5%	0.037
Diarrhea	19.9%	16.7%	18.0%	16.9%	13.1%	16.8%	-0.066
Acute respiratory infection	11.2%	5.6%	5.7%	6.9%	11.0%	8.0%	0.021
Fever	16.0%	9.0%	17.8%	20.0%	15.3%	15.7%	0.039
2010 ^{1c}							
Infant mortality rate	22.1	24.1	18.9	12.6	22.5	20.1	-0.008
Stunting	26.4%	19.4%	20.1%	18.0%	20.3%	20.8%	-0.061
Underweight	6.8%	6.2%	7.3%	3.3%	2.2%	5.2%	-0.192***
Diarrhea	5.5%	9.0%	9.7%	9.1%	10.7%	8.8%	0.092
Acute respiratory infection	4.6%	5.2%	6.3%	13.8%	11.2%	8.1%	0.223***
Fever	9.5%	7.4%	10.5%	16.8%	16.4%	12.0%	0.160***

ADULT HEALTH ^{1a,1b,1c,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2000 ^{1a}							
Obesity among non-pregnant women	13.5%	14.4%	14.3%	14.5%	13.7%	14.1%	0.006
2005 ^{1b}							
Obesity among non-pregnant women	11.9%	17.9%	18.3%	18.1%	11.5%	15.5%	-0.002

INEQUALITIES IN
RISKY BEHAVIOR

RISK FACTORS ^{1a,1b,1c,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005 ^{1b}							
Smoking (women)	0.8%	1.1%	1.8%	2.4%	2.7%	1.8%	0.247***
Concurrent partnerships	0.8%	1.2%	1.4%	1.0%	1.2%	1.1%	0.023
2010 ^{1c}							
Smoking (women)	0.2%	0.4%	1.4%	2.4%	4.2%	1.7%	0.488***
Concurrent partnerships	0.3%	0.2%	0.7%	0.5%	0.4%	0.4%	0.133



INEQUALITIES IN HEALTH CARE UTILIZATION

MATERNAL AND CHILD HEALTH INTERVENTIONS ^{1a,1b,1c,2}	Q1	Q2	Q3	Q4	Q5	Total	CI
2000^{1a}							
Full immunization	65.2%	72.2%	72.5%	81.3%	68.0%	71.4%	0.023
Medical treatment of ARI	22.6%	27.7%	27.6%	35.1%	16.4%	26.2%	0.025
Skilled antenatal care (4+ visits)	39.1%	54.2%	79.2%	81.6%	87.2%	67.2%	0.163***
Skilled birth attendance	94.1%	94.3%	99.8%	99.1%	100.0%	97.2%	0.016***
2005^{1b}							
Full immunization	63.1%	57.1%	79.3%	64.6%	50.8%	62.0%	-0.003
Treatment of diarrhea	40.3%	46.8%	35.9%	42.5%	44.7%	41.9%	0.021
Medical treatment of ARI	36.4%	34.4%	33.4%	33.9%	46.4%	37.9%	0.117
Skilled antenatal care (4+ visits)	50.0%	59.1%	78.9%	80.8%	88.5%	72.5%	0.109***
Skilled birth attendance	95.3%	99.4%	100.0%	100.0%	100.0%	99.0%	0.008***
Contraceptive prevalence among women	43.6%	44.9%	43.0%	47.5%	54.0%	47.4%	0.052***
2010^{1c}							
Full immunization	88.9%	84.9%	86.5%	80.9%	79.3%	83.9%	-0.021
Skilled antenatal care (4+ visits)	90.8%	91.3%	97.9%	96.9%	97.0%	94.8%	0.016***
Skilled birth attendance	100.0%	98.8%	100.0%	100.0%	100.0%	99.7%	0.001*
Contraceptive prevalence among women	14.2%	10.5%	17.5%	19.6%	21.6%	16.7%	0.129***

Note:

The Health Equity and Financial Protection datasheets use a standardized selection of indicators (see Measurement of Indicators for full list). When (1) data sources are not available or (2) indicator-specific sample size is less than 250 per quintile for mortality indicators or less than 25 per quintile for all others, indicators are not reported for the country under analysis.

For analysis of inequalities using WHS, DHS and MICS, quintile ranking is based on an asset index. For all other analyses, ranking is based on household consumption. Q = quintile (where quintile 1 is the poorest)

CI = concentration index; ranges between -1 and 1; negative sign indicates that the health outcome takes higher values among the poor

* Significant at 10%, **Significant at 5%, ***Significant at 1%.

Data sources:

1a=2000 Armenia Demographic and Health Survey, 1b=2005 Armenia Demographic and Health Survey, 1c=2010 Armenia Demographic and Health Survey, 2=n/a Multiple Indicator Cluster Survey, 3=n/a World Health Survey.

Recommended citation: World Bank. 2012. Health Equity and Financial Protection Datasheet - Armenia. Washington, D.C.: World Bank.

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AZERBAIJAN

The Health Equity and Financial Protection datasheets provide a picture of equity and financial protection in the health sectors of low- and middle-income countries. Topics covered include: inequalities in health outcomes, health behavior and health care utilization; benefit incidence analysis; financial protection; and the progressivity of health care financing. Data are drawn from the Demographic and Health Surveys (DHS), World Health Surveys (WHS), Multiple Indicator Cluster Surveys (MICS), Living Standards and Measurement Surveys (LSMS), as well as other household surveys where available. The datasheets use a common set of health indicators for all countries. All analyses are conducted using the health modules of the ADePT software.

INEQUALITIES IN HEALTH OUTCOMES

CHILD HEALTH ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2006 ¹							
Infant mortality rate	56.9	54.8	52.3	42.6	31.2	49.0	-0.106**
Under-five mortality rate	63.7	80.8	58.1	50.9	42.2	60.2	-0.112**
Stunting	34.9%	32.5%	26.9%	17.2%	19.2%	27.2%	-0.142***
Underweight	15.6%	10.5%	6.4%	3.0%	4.9%	8.7%	-0.292***
Diarrhea	13.3%	10.6%	9.8%	9.1%	9.6%	10.6%	-0.087*
Acute respiratory infection	5.0%	3.0%	6.1%	3.9%	1.6%	4.0%	-0.121*
Fever	11.9%	8.5%	10.4%	8.1%	8.8%	9.7%	-0.073

ADULT HEALTH ^{1,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2006 ¹							
Obesity among non-pregnant women	11.8%	15.4%	18.2%	22.3%	21.7%	18.1%	0.115***

INEQUALITIES IN RISKY BEHAVIOR

RISK FACTORS ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2006 ¹							
Concurrent partnerships	0.1%	0.2%	0.2%	0.4%	0.1%	0.2%	0.039

INEQUALITIES IN HEALTH CARE UTILIZATION

MATERNAL AND CHILD HEALTH INTERVENTIONS ^{1,2}	Q1	Q2	Q3	Q4	Q5	Total	CI
2006 ¹							
Full immunization	38.3%	40.0%	42.8%	37.8%	66.9%	44.5%	0.097**
Treatment of diarrhea	31.2%	14.3%	41.0%	39.2%	42.3%	32.2%	0.094
Medical treatment of ARI	16.5%	40.4%	54.0%	51.3%	10.9%	37.8%	0.195**
Skilled antenatal care (4+ visits)	20.7%	33.8%	47.0%	69.0%	80.3%	47.5%	0.262***
Skilled birth attendance	79.2%	84.3%	90.6%	98.1%	99.6%	89.3%	0.051***
Contraceptive prevalence among women	42.5%	40.0%	36.0%	40.1%	37.1%	38.8%	-0.012

Note:

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Q = quintile (where quintile 1 is the poorest)

CI = concentration index; ranges between -1 and 1; negative sign indicates that the health outcome takes higher values among the poor

* Significant at 10%, **Significant at 5%, ***Significant at 1%.

Data sources:

1=2006 Azerbaijan Demographic and Health Survey, 2=n/a Multiple Indicator Cluster Survey, 3=n/a World Health Survey.

Recommended citation: World Bank. 2012. Health Equity and Financial Protection Datasheet - Azerbaijan. Washington, D.C.: World Bank.

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BELARUS

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INEQUALITIES IN HEALTH OUTCOMES

CHILD HEALTH ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005 ²							
Stunting	8.3%	5.3%	4.3%	2.6%	2.0%	4.6%	-0.313**
Underweight	2.6%	2.1%	1.3%	1.6%	0.4%	1.6%	-0.275*
Diarrhea	4.2%	4.4%	3.9%	4.6%	3.1%	4.0%	-0.042
Acute respiratory infection	13.2%	19.3%	21.4%	14.7%	17.3%	17.1%	0.020

INEQUALITIES IN HEALTH CARE UTILIZATION

MATERNAL AND CHILD HEALTH INTERVENTIONS ^{1,2}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005 ²							
Medical treatment of ARI	82.9%	84.8%	94.7%	94.7%	91.8%	90.0%	0.027
Contraceptive prevalence	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	-0.970**

ADULT PREVENTIVE CARE ^{2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005 ²							
Voluntary counseling and testing for HIV	90.7%	88.5%	90.6%	91.7%	88.9%	90.0%	-0.001***

Note:

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Q = quintile (where quintile 1 is the poorest)

CI = concentration index; ranges between -1 and 1; negative sign indicates that the health outcome takes higher values among the poor

* Significant at 10%, **Significant at 5%, ***Significant at 1%.

Data sources:

1=n/a Demographic and Health Survey, 2=2005 Belarus Multiple Indicator Cluster Survey, 3=n/a World Health Survey.

Recommended citation: World Bank. 2012. Health Equity and Financial Protection Datasheet - Belarus. Washington, D.C.: World Bank.

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BOSNIA AND HERZEGOVINA

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INEQUALITIES IN HEALTH OUTCOMES

CHILD HEALTH ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2006 ²							
Stunting	17.2%	11.5%	11.8%	9.6%	6.9%	11.7%	-0.157
Underweight	1.7%	1.7%	0.6%	0.6%	4.0%	1.7%	0.116
Diarrhea	3.6%	5.8%	4.4%	5.4%	4.6%	4.7%	0.038
Acute respiratory infection	7.5%	7.6%	4.8%	5.8%	5.8%	6.4%	-0.052

ADULT HEALTH ^{1,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2003 ³							
Tuberculosis	8.6%	4.4%	2.1%	3.3%	3.0%	4.2%	-0.238**
Obesity among non-pregnant women	4.2%	8.3%	0.3%	1.5%	6.2%	3.8%	-0.081
Road traffic accident	2.9%	0.1%	3.3%	3.3%	0.3%	2.0%	-0.063**
Non-road traffic accident	9.1%	5.5%	4.3%	3.9%	1.8%	4.9%	-0.285
Angina	13.0%	9.7%	4.2%	7.4%	2.7%	7.4%	-0.253***
Arthritis	15.7%	13.8%	11.2%	9.3%	10.0%	12.0%	-0.123
Asthma	4.8%	4.4%	1.4%	6.0%	1.1%	3.5%	-0.129
Depression	9.8%	5.1%	4.9%	9.3%	1.8%	6.2%	-0.142
Diabetes	7.8%	6.6%	5.9%	4.0%	0.6%	4.9%	-0.284***
Difficulty with work and household activities	18.3%	12.8%	7.0%	4.7%	3.9%	9.3%	-0.313***
Poor self-assessed health status	22.8%	11.0%	8.9%	5.1%	6.6%	10.9%	-0.309***

INEQUALITIES IN RISKY BEHAVIOR

RISK FACTORS ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2003 ³							
Smoking (all)	45.8%	45.6%	44.0%	44.1%	41.6%	44.2%	-0.011
Smoking (women)	22.1%	54.3%	40.9%	32.5%	46.3%	39.5%	0.042
Insufficient intake of fruit and vegetables	82.0%	88.3%	83.3%	85.5%	78.2%	83.5%	-0.014
Insufficient physical activity	21.5%	21.5%	29.4%	27.6%	33.4%	26.7%	0.092**
Drinking	2.0%	1.2%	0.3%	0.6%	4.3%	1.6%	0.201
Concurrent partnerships	0.0%	0.8%	5.4%	0.0%	0.8%	1.6%	-0.125

INEQUALITIES IN HEALTH CARE UTILIZATION

MATERNAL AND CHILD HEALTH INTERVENTIONS ^{1,2}	Q1	Q2	Q3	Q4	Q5	Total	CI
2006 ²							
Full immunization	90.4%	91.7%	89.1%	92.1%	89.4%	90.6%	-0.001
Contraceptive prevalence	5.0%	7.0%	9.0%	9.7%	16.1%	9.5%	0.225***



INEQUALITIES IN HEALTH CARE UTILIZATION (CONT.)

ADULT PREVENTIVE CARE ^{2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2003 ³							
TB screening	2.1%	3.0%	2.3%	0.6%	2.9%	2.2%	-0.031
Cervical cancer screening	68.8%	64.7%	92.6%	94.8%	82.8%	80.9%	0.057**
Breast cancer screening	3.0%	9.9%	4.7%	22.5%	16.4%	11.1%	0.264***

ADULT CURATIVE CARE ³	Q1	Q2	Q3	Q4	Q5	Total	CI
2003 ³							
Inpatient or outpatient (12 months)	53.0%	58.9%	52.6%	45.1%	50.8%	52.1%	-0.026
Inpatient (12 months)	13.7%	11.7%	15.5%	11.9%	10.4%	12.6%	-0.033
Inpatient (5 years)	28.4%	24.0%	27.7%	32.2%	24.8%	27.4%	0.006
Outpatient (12 months)	45.7%	54.3%	50.8%	43.7%	49.6%	48.8%	-0.001

FINANCIAL PROTECTION

	Threshold share of total household consumption				
CATASTROPHIC OUT-OF-POCKET SPENDING ³	5%	10%	15%	25%	40%
2003 ³					
Headcount	43.7%	39.8%	33.3%	26.9%	24.8%
Concentration index	-0.076*	-0.087	-0.239***	-0.382***	-0.594***

	Threshold share of nonfood consumption				
CATASTROPHIC OUT-OF-POCKET SPENDING ³	5%	10%	15%	25%	40%
2003 ³					
Headcount	46.2%	44.3%	41.8%	34.3%	30.1%
Concentration index	-0.062	-0.084*	-0.119**	-0.166***	-0.275***

IMPOVERISHMENT ³				
Poverty line at US\$1.25 per capita per day	Consumption including OOP	Consumption excluding OOP	Change	% change
2003 ³				
Percentage in poverty	4.4%	4.6%	0.3 pp	5.8%
Average shortfall from the poverty line	\$0.05	\$0.05	\$0.00	6.3%
Average shortfall from the poverty line, among the poor	\$0.88	\$0.89	\$0.00	0.5%
Poverty line at US\$2.00 per capita per day	Consumption including OOP	Consumption excluding OOP	Change	% change
2003 ³				
Percentage in poverty	7.4%	8.7%	1.3 pp	18.0%
Average shortfall from the poverty line	\$0.10	\$0.11	\$0.01	10.9%
Average shortfall from the poverty line, among the poor	\$1.06	\$1.00	-\$0.06	-6.0%

Note:

The Health Equity and Financial Protection datasheets use a standardized selection of indicators (see Measurement of Indicators for full list). When (1) data sources are not available or (2) indicator-specific sample size is less than 250 per quintile for mortality indicators or less than 25 per quintile for all others, indicators are not reported for the country under analysis.

For analysis of inequalities using WHS, DHS and MICS, quintile ranking is based on an asset index. For all other analyses, ranking is based on household consumption.

Q = quintile (where quintile 1 is the poorest)

CI = concentration index; ranges between -1 and 1; negative sign indicates that the health outcome takes higher values among the poor

* Significant at 10%, **Significant at 5%, ***Significant at 1%.

Poverty lines are at 2005 purchasing power parity, adjusted to current prices using Bosnia and Herzegovina's consumer price index.

Data sources:

1=n/a Demographic and Health Survey, 2=2006 Bosnia and Herzegovina Multiple Indicator Cluster Survey, 3=2003 Bosnia and Herzegovina World Health Survey.

Recommended citation: World Bank. 2012. Health Equity and Financial Protection Datasheet - Bosnia and Herzegovina. Washington, D.C.: World Bank.

For more information and the latest versions of the Health Equity and Financial Protection reports and datasheets, see: www.worldbank.org/povertyandhealth.

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FYR OF MACEDONIA

The Health Equity and Financial Protection datasheets provide a picture of equity and financial protection in the health sectors of low- and middle-income countries. Topics covered include: inequalities in health outcomes, health behavior and health care utilization; benefit incidence analysis; financial protection; and the progressivity of health care financing. Data are drawn from the Demographic and Health Surveys (DHS), World Health Surveys (WHS), Multiple Indicator Cluster Surveys (MICS), Living Standards and Measurement Surveys (LSMS), as well as other household surveys where available. The datasheets use a common set of health indicators for all countries. All analyses are conducted using the health modules of the ADePT software.

INEQUALITIES
IN HEALTH
OUTCOMES

CHILD HEALTH ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005 ²							
Stunting	14.8%	11.0%	13.6%	5.9%	8.5%	11.6%	-0.149***
Underweight	2.9%	1.3%	2.0%	1.4%	1.1%	1.9%	-0.205
Diarrhea	9.8%	8.0%	4.4%	6.8%	3.9%	7.3%	-0.148
Acute respiratory infection	17.1%	13.5%	11.8%	8.8%	10.7%	13.1%	-0.141***

INEQUALITIES IN
RISKY BEHAVIOR

RISK FACTORS ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005 ²							
Concurrent partnerships	15.3%	0.5%	5.0%	8.1%	3.1%	6.1%	-0.163

INEQUALITIES
IN HEALTH CARE
UTILIZATION

MATERNAL AND CHILD HEALTH INTERVENTIONS ^{1,2}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005 ²							
Full immunization	81.1%	93.3%	92.9%	90.3%	98.3%	90.5%	0.029***
Contraceptive prevalence	8.3%	7.8%	7.9%	5.9%	15.8%	9.2%	0.127*

Note:

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For analysis of inequalities using WHS, DHS and MICS, quintile ranking is based on an asset index. For all other analyses, ranking is based on household consumption. Q = quintile (where quintile 1 is the poorest)

CI = concentration index; ranges between -1 and 1; negative sign indicates that the health outcome takes higher values among the poor

* Significant at 10%, **Significant at 5%, ***Significant at 1%.

Data sources:

1=n/a Demographic and Health Survey, 2=2005 FYR of Macedonia Multiple Indicator Cluster Survey, 3=n/a World Health Survey.

Recommended citation: World Bank. 2012. Health Equity and Financial Protection Datasheet - FYR of Macedonia. Washington, D.C.: World Bank.

For more information and the latest versions of the Health Equity and Financial Protection reports and datasheets, see: www.worldbank.org/povertyandhealth.

Photo credit: Yosef Hadar



GEORGIA

The Health Equity and Financial Protection datasheets provide a picture of equity and financial protection in the health sectors of low- and middle-income countries. Topics covered include: inequalities in health outcomes, health behavior and health care utilization; benefit incidence analysis; financial protection; and the progressivity of health care financing. Data are drawn from the Demographic and Health Surveys (DHS), World Health Surveys (WHS), Multiple Indicator Cluster Surveys (MICS), Living Standards and Measurement Surveys (LSMS), as well as other household surveys where available. The datasheets use a common set of health indicators for all countries. All analyses are conducted using the health modules of the ADePT software.

INEQUALITIES IN HEALTH OUTCOMES

CHILD HEALTH ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005 ²							
Stunting	21.8%	15.2%	16.1%	12.0%	8.3%	14.7%	-0.182***
Underweight	2.7%	3.5%	2.8%	2.2%	1.4%	2.5%	-0.119
Diarrhea	9.5%	12.2%	9.2%	14.7%	6.9%	10.4%	-0.025
Acute respiratory infection	13.3%	10.4%	10.2%	12.5%	13.8%	12.1%	0.030

ADULT HEALTH ^{1,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2003 ³							
Tuberculosis	3.8%	4.9%	2.5%	4.4%	5.6%	4.3%	0.052
Obesity among all women	4.1%	5.5%	7.0%	8.9%	8.6%	7.0%	0.130*
Road traffic accident	0.2%	0.3%	0.6%	1.1%	1.1%	0.7%	0.343***
Non-road traffic accident	1.5%	1.9%	2.4%	3.5%	0.6%	2.0%	0.011
Angina	15.4%	17.0%	14.2%	15.6%	10.7%	14.5%	-0.056*
Arthritis	22.4%	22.3%	16.1%	18.6%	12.5%	18.2%	-0.106***
Asthma	6.9%	4.2%	2.7%	2.9%	3.7%	4.0%	-0.132*
Depression	5.7%	5.9%	4.8%	5.8%	5.0%	5.4%	-0.033
Diabetes	1.9%	2.8%	1.6%	2.9%	4.4%	2.7%	0.146**
Difficulty with work and household activities	22.5%	17.8%	15.3%	9.2%	8.5%	14.7%	-0.194***
Poor self-assessed health status	33.6%	24.3%	16.9%	17.1%	11.2%	20.0%	-0.205***

INEQUALITIES IN RISKY BEHAVIOR

RISK FACTORS ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2003 ³							
Smoking (all)	20.9%	27.2%	27.7%	31.5%	35.9%	29.0%	0.096***
Smoking (women)	7.6%	6.6%	5.3%	7.7%	10.8%	7.6%	0.093
Insufficient intake of fruit and vegetables	82.6%	79.9%	78.8%	78.3%	69.6%	77.6%	-0.032***
Insufficient physical activity	1.0%	0.9%	1.0%	1.3%	1.4%	1.1%	0.081
Drinking	12.8%	12.3%	15.9%	17.3%	17.4%	15.3%	0.084***
Concurrent partnerships	5.7%	0.0%	4.8%	4.1%	2.7%	3.5%	-0.042

INEQUALITIES IN HEALTH CARE UTILIZATION

MATERNAL AND CHILD HEALTH INTERVENTIONS ^{1,2}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005 ²							
Contraceptive prevalence among women	9.3%	12.5%	13.8%	15.1%	18.6%	13.9%	0.133



INEQUALITIES
IN HEALTH CARE
UTILIZATION
(CONT.)

ADULT PREVENTIVE CARE ^{2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005 ²							
Voluntary counseling and testing for HIV	82.3%	88.3%	75.6%	86.5%	83.8%	83.6%	0.007
2003 ³							
TB screening	1.3%	2.3%	1.3%	1.2%	1.4%	1.5%	-0.021
Cervical cancer screening	30.5%	25.1%	41.0%	30.2%	38.4%	33.5%	0.058
Breast cancer screening	0.9%	3.0%	2.8%	4.1%	6.3%	3.6%	0.273***

ADULT CURATIVE CARE ³	Q1	Q2	Q3	Q4	Q5	Total	CI
2003 ³							
Inpatient or outpatient (12 months)	28.0%	38.2%	36.6%	38.4%	40.4%	36.7%	0.047***
Inpatient (12 months)	4.1%	5.0%	4.3%	3.0%	4.3%	4.2%	-0.044
Inpatient (5 years)	17.5%	13.6%	13.3%	12.7%	11.3%	13.5%	-0.067*
Outpatient (12 months)	22.3%	31.4%	31.2%	32.4%	32.9%	30.5%	0.047**

FINANCIAL
PROTECTION

	Threshold share of total household consumption				
CATASTROPHIC OUT-OF-POCKET SPENDING ³	5%	10%	15%	25%	40%
2003 ³					
Headcount	32.6%	25.1%	20.4%	13.8%	8.8%
Concentration index	0.138***	0.162***	0.174***	0.186***	0.307***

	Threshold share of nonfood consumption				
CATASTROPHIC OUT-OF-POCKET SPENDING ³	5%	10%	15%	25%	40%
2003 ³					
Headcount	41.1%	39.1%	36.3%	30.8%	25.9%
Concentration index	0.105***	0.089***	0.071***	0.060***	0.025

IMPOVERISHMENT ³				
Poverty line at US\$1.25 per capita per day	Consumption including OOP	Consumption excluding OOP	Change	% change
2003 ³				
Percentage in poverty	25.6%	29.3%	3.7 pp	14.4%
Average shortfall from the poverty line	\$0.12	\$0.14	\$0.02	15.7%
Average shortfall from the poverty line, among the poor	\$0.46	\$0.47	\$0.01	1.1%
Poverty line at US\$2.00 per capita per day	Consumption including OOP	Consumption excluding OOP	Change	% change
2003 ³				
Percentage in poverty	46.6%	51.2%	4.6 pp	9.8%
Average shortfall from the poverty line	\$0.41	\$0.46	\$0.05	12.2%
Average shortfall from the poverty line, among the poor	\$0.84	\$0.86	\$0.02	2.2%

Note:

The Health Equity and Financial Protection datasheets use a standardized selection of indicators (see Measurement of Indicators for full list). When (1) data sources are not available or (2) indicator-specific sample size is less than 250 per quintile for mortality indicators or less than 25 per quintile for all others, indicators are not reported for the country under analysis.

For analysis of inequalities using WHS, DHS and MICS, quintile ranking is based on an asset index. For all other analyses, ranking is based on household consumption. Q = quintile (where quintile 1 is the poorest)

CI = concentration index; ranges between -1 and 1; negative sign indicates that the health outcome takes higher values among the poor

* Significant at 10%, **Significant at 5%, ***Significant at 1%.

Poverty lines are at 2005 purchasing power parity, adjusted to current prices using Georgia's consumer price index.

Data sources:

1=n/a Demographic and Health Survey, 2=2005 Georgia Multiple Indicator Cluster Survey, 3=2003 Georgia World Health Survey.

Recommended citation: World Bank. 2012. Health Equity and Financial Protection Datasheet - Georgia. Washington, D.C.: World Bank.

For more information and the latest versions of the Health Equity and Financial Protection reports and datasheets, see: www.worldbank.org/povertyandhealth.

Photo credit: Yuri Mechitov

KAZAKHSTAN

The Health Equity and Financial Protection datasheets provide a picture of equity and financial protection in the health sectors of low- and middle-income countries. Topics covered include: inequalities in health outcomes, health behavior and health care utilization; benefit incidence analysis; financial protection; and the progressivity of health care financing. Data are drawn from the Demographic and Health Surveys (DHS), World Health Surveys (WHS), Multiple Indicator Cluster Surveys (MICS), Living Standards and Measurement Surveys (LSMS), as well as other household surveys where available. The datasheets use a common set of health indicators for all countries. All analyses are conducted using the health modules of the ADePT software.

INEQUALITIES
IN HEALTH
OUTCOMES

CHILD HEALTH ^{1a,1b,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
1995 ^{1a}							
Infant mortality rate	30.3	49.0	40.4	55.2	32.8	41.4	0.057
Under-five mortality rate	23.2	32.5	60.6	71.4	35.5	43.9	0.139**
Stunting	30.6%	20.4%	16.9%	11.9%	4.1%	18.2%	-0.262***
Underweight	7.3%	7.7%	8.7%	6.1%	3.1%	7.0%	-0.089
Diarrhea	20.1%	12.6%	14.6%	18.5%	12.5%	16.0%	-0.032
Acute respiratory infection	6.2%	1.6%	1.8%	11.9%	5.4%	5.3%	0.155
Fever	9.1%	11.9%	6.7%	16.7%	17.1%	11.6%	0.153**
1999 ^{1b}							
Infant mortality rate	73.0	64.0	77.9	27.3	43.3	58.9	-0.131***
Under-five mortality rate	74.7	52.4	92.8	37.1	31.8	59.6	-0.141***
Stunting	17.2%	14.7%	11.8%	7.7%	11.6%	13.1%	-0.139**
Underweight	3.5%	3.9%	4.5%	2.2%	5.3%	3.8%	-0.025
Diarrhea	13.7%	12.0%	15.2%	13.9%	12.6%	13.6%	0.028
Acute respiratory infection	2.7%	4.0%	2.9%	4.0%	1.2%	3.0%	-0.025
Fever	14.2%	9.0%	15.4%	12.8%	9.4%	12.5%	-0.012
2006 ²							
Stunting	20.7%	19.0%	18.6%	14.7%	13.6%	17.8%	-0.084***
Underweight	5.7%	5.8%	5.1%	4.3%	2.6%	4.9%	-0.110***
Diarrhea	1.1%	2.1%	1.4%	2.9%	2.0%	1.8%	0.162**
Acute respiratory infection	3.7%	5.7%	6.5%	6.9%	7.0%	5.7%	0.131***

ADULT HEALTH ^{1a,1b,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
1995 ^{1a}							
Obesity among non-pregnant women	13.2%	12.9%	18.8%	17.1%	19.0%	16.4%	0.089***
1999 ^{1b}							
Obesity among non-pregnant women	11.9%	13.6%	11.2%	15.0%	11.6%	12.7%	0.005
2002-03 ³							
Tuberculosis	66.2	45.3	37.8	22.9	41.6	42.7	-0.150*
Obesity among non-pregnant women	70.9	117.4	95.3	125.4	168.0	112.5	0.169**
Road traffic accident	1.0%	0.4%	0.7%	1.2%	0.8%	0.8%	0.027
Non-road traffic accident	2.8%	1.7%	2.6%	2.0%	1.8%	2.2%	-0.086
Angina	13.0%	19.9%	8.3%	5.8%	5.7%	10.5%	-0.206***
Arthritis	16.8%	27.3%	18.0%	8.2%	12.6%	16.6%	-0.117***
Asthma	1.5%	2.6%	3.0%	2.2%	1.8%	2.2%	-0.016
Depression	1.8%	1.5%	2.3%	1.2%	0.3%	1.4%	-0.163*
Diabetes	1.7%	4.4%	1.7%	2.1%	0.5%	2.1%	-0.187
Difficulty with work and household activities	6.3%	5.3%	3.7%	1.0%	0.9%	3.4%	-0.346***
Poor self-assessed health status	9.1%	14.6%	6.8%	2.2%	2.5%	7.0%	-0.276***



INEQUALITIES IN RISKY BEHAVIOR

RISK FACTORS ^{1a,1b,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2002-03 ³							
Smoking (all)	23.0%	27.6%	24.6%	28.3%	26.2%	25.9%	0.012
Smoking (women)	5.6%	9.1%	9.8%	18.0%	19.2%	12.4%	0.216***
Insufficient intake of fruit and vegetables	95.2%	91.6%	93.1%	87.0%	84.6%	90.3%	-0.024***
Insufficient physical activity	48.6%	55.7%	64.0%	58.7%	59.5%	57.3%	0.040***
Drinking	7.4%	3.2%	5.8%	6.0%	6.7%	5.8%	0.017
Concurrent partnerships	11.1%	2.4%	15.3%	8.5%	3.7%	8.7%	-0.141*

INEQUALITIES IN HEALTH CARE UTILIZATION

MATERNAL AND CHILD HEALTH INTERVENTIONS ^{1a,1b,2}	Q1	Q2	Q3	Q4	Q5	Total	CI
1995 ^{1a}							
Full immunization	25.8%	21.4%	22.6%	32.2%	41.4%	27.2%	0.111**
Skilled antenatal care (4+ visits)	75.8%	89.8%	82.2%	88.3%	93.7%	84.9%	0.032***
Skilled birth attendance	99.4%	100.0%	98.8%	100.0%	100.0%	99.6%	0.002
1999 ^{1b}							
Full immunization	70.2%	75.6%	77.2%	80.0%	62.3%	73.1%	0.004
Treatment of diarrhea	15.2%	29.5%	30.9%	47.4%	50.8%	32.0%	0.246***
Skilled antenatal care (4+ visits)	76.6%	78.5%	82.5%	79.7%	82.7%	79.8%	0.015
Skilled birth attendance	99.0%	99.2%	98.5%	99.0%	100.0%	99.1%	0.001
2006 ²							
Full immunization	82.1%	58.0%	59.7%	86.2%	70.1%	71.0%	0.035
Contraceptive prevalence	27.5%	32.3%	34.3%	36.5%	39.3%	34.2%	0.064***

ADULT PREVENTIVE CARE ^{2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2002-03 ³							
TB screening	55.0%	44.7%	49.0%	38.1%	44.8%	46.3%	-0.047**
Voluntary counseling and testing for HIV	95.0%	95.6%	93.1%	98.1%	97.8%	96.0%	0.008*
Cervical cancer screening	91.9%	96.3%	95.2%	97.0%	97.4%	95.6%	0.011***
Breast cancer screening	36.6%	40.3%	47.4%	44.2%	49.8%	43.6%	0.058*
2006 ²							
Voluntary counseling and testing for HIV	82.0%	84.8%	86.4%	89.0%	93.0%	87.6%	0.025***

ADULT CURATIVE CARE ³	Q1	Q2	Q3	Q4	Q5	Total	CI
2002-03 ³							
Inpatient or outpatient (12 months)	59.9%	67.1%	66.8%	54.4%	57.0%	61.0%	-0.022
Inpatient (12 months)	10.2%	8.6%	9.6%	5.6%	9.4%	8.7%	-0.025
Inpatient (5 years)	18.3%	19.2%	17.1%	12.8%	18.6%	17.2%	-0.027
Outpatient (12 months)	57.3%	61.2%	65.5%	54.2%	53.1%	58.2%	-0.023

FINANCIAL PROTECTION

	Threshold share of total household consumption				
CATASTROPHIC OUT-OF-POCKET SPENDING	5%	10%	15%	25%	40%
2002-03 ³					
Headcount	51.1%	31.5%	19.6%	7.8%	3.0%
Concentration index	-0.028*	-0.020	0.017	0.175***	0.389***

	Threshold share of nonfood consumption				
CATASTROPHIC OUT-OF-POCKET SPENDING	5%	10%	15%	25%	40%
2002-03 ³					
Headcount	62.7%	50.7%	39.7%	24.5%	12.2%
Concentration index	-0.017	-0.036**	-0.030	-0.020	0.100***

IMPOVERISHMENT				
Poverty line at US\$1.25 per capita per day	Consumption including OOP	Consumption excluding OOP	Change	% change
2002-03 ³				
Percentage in poverty	3.0%	4.2%	1.2 pp	40.8%
Average shortfall from the poverty line	\$0.01	\$0.01	\$0.00	26.3%
Average shortfall from the poverty line, among the poor	\$0.35	\$0.31	-\$0.04	-10.3%
Poverty line at US\$2.00 per capita per day	Consumption including OOP	Consumption excluding OOP	Change	% change
2002-03 ³				
Percentage in poverty	9.7%	12.4%	2.7 pp	28.0%
Average shortfall from the poverty line	\$0.06	\$0.07	\$0.02	25.6%
Average shortfall from the poverty line, among the poor	\$0.62	\$0.61	-\$0.01	-1.9%

Note:

The Health Equity and Financial Protection datasheets use a standardized selection of indicators (see Measurement of Indicators for full list). When (1) data sources are not available or (2) indicator-specific sample size is less than 250 per quintile for mortality indicators or less than 25 per quintile for all others, indicators are not reported for the country under analysis.

For analysis of inequalities using WHS, DHS and MICS, quintile ranking is based on an asset index. For all other analyses, ranking is based on household consumption. Q = quintile (where quintile 1 is the poorest)

CI = concentration index; ranges between -1 and 1; negative sign indicates that the health outcome takes higher values among the poor

* Significant at 10%, **Significant at 5%, ***Significant at 1%.

Poverty lines are at 2005 purchasing power parity, adjusted to current prices using Kazakhstan's consumer price index.

Data sources:

1a=1995 Kazakhstan Demographic and Health Survey, 1b=1999 Kazakhstan Demographic and Health Survey,

2=2006 Kazakhstan Multiple Indicator Cluster Survey, 3=2002-03 Kazakhstan World Health Survey.

Recommended citation: World Bank. 2012. Health Equity and Financial Protection Datasheet - Kazakhstan. Washington, D.C.: World Bank.

For more information and the latest versions of the Health Equity and Financial Protection reports and datasheets, see: www.worldbank.org/povertyandhealth.

Photo credit: Martin Fodor

KYRGYZ REPUBLIC

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INEQUALITIES IN HEALTH OUTCOMES

CHILD HEALTH ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
1997 ¹							
Infant mortality rate	87.8	69.0	75.4	51.1	46.2	67.6	-0.132***
Under-five mortality rate	99.5	96.7	95.1	50.7	51.8	80.1	-0.154***
Stunting	42.0%	36.9%	30.6%	22.9%	24.3%	32.6%	-0.137***
Underweight	7.6%	9.5%	10.9%	6.5%	5.3%	8.1%	-0.036
Diarrhea	21.1%	19.3%	18.7%	13.6%	13.6%	17.8%	-0.077*
Acute respiratory infection	5.3%	5.8%	3.6%	3.7%	2.8%	4.4%	-0.101
Fever	14.1%	13.0%	13.8%	12.4%	12.6%	13.3%	-0.009
2005-06 ²							
Stunting	25.4%	18.9%	16.0%	15.8%	14.9%	18.4%	-0.114***
Underweight	2.0%	2.4%	5.6%	3.4%	2.2%	3.1%	0.067
Diarrhea ²	2.5%	3.2%	4.7%	3.2%	4.9%	3.7%	0.092
Acute respiratory infection	7.2%	12.9%	13.3%	9.6%	10.7%	10.7%	0.041

ADULT HEALTH ^{1,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
1997 ¹							
Obesity among non-pregnant women	5.8%	5.2%	10.9%	10.9%	9.8%	8.7%	0.112***

INEQUALITIES IN RISKY BEHAVIOR

RISK FACTORS ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005-06 ²							
Concurrent partnerships	2.1%	1.1%	3.3%	4.1%	1.8%	2.6%	0.144

INEQUALITIES IN HEALTH CARE UTILIZATION

MATERNAL AND CHILD HEALTH INTERVENTIONS ^{1,2}	Q1	Q2	Q3	Q4	Q5	Total	CI
1997 ¹							
Full immunization	73.9%	76.9%	80.3%	79.7%	75.8%	76.9%	0.009
Skilled antenatal care (4+ visits)	83.2%	86.8%	95.0%	95.2%	91.1%	89.6%	0.027***
Skilled birth attendance	96.2%	98.2%	98.0%	99.7%	100.0%	98.2%	0.008***
2005-06 ²							
Contraceptive prevalence among women	32.8%	24.6%	33.7%	33.9%	29.8%	30.9%	0.009

ADULT PREVENTIVE CARE ^{2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005-06 ²							
Voluntary counseling and testing for HIV	52.4%	61.8%	83.3%	83.7%	93.8%	79.9%	0.095*



Note:

The Health Equity and Financial Protection datasheets use a standardized selection of indicators (see Measurement of Indicators for full list). When (1) data sources are not available or (2) indicator-specific sample size is less than 250 per quintile for mortality indicators or less than 25 per quintile for all others, indicators are not reported for the country under analysis.

For analysis of inequalities using WHS, DHS and MICS, quintile ranking is based on an asset index. For all other analyses, ranking is based on household consumption. Q = quintile (where quintile 1 is the poorest)

CI = concentration index; ranges between -1 and 1; negative sign indicates that the health outcome takes higher values among the poor

* Significant at 10%, **Significant at 5%, ***Significant at 1%.

Data sources:

1=1997 Kyrgyz Republic Demographic and Health Survey, 2=2005-06 Kyrgyz Republic Multiple Indicator Cluster Survey, 3=n/a World Health Survey.

Recommended citation: World Bank. 2012. Health Equity and Financial Protection Datasheet - Kyrgyz Republic. Washington, D.C.: World Bank.

For more information and the latest versions of the Health Equity and Financial Protection reports and datasheets, see: www.worldbank.org/povertyandhealth.

Photo credit: Nicholas Van Praag

LATVIA

The Health Equity and Financial Protection datasheets provide a picture of equity and financial protection in the health sectors of low- and middle-income countries. Topics covered include: inequalities in health outcomes, health behavior and health care utilization; benefit incidence analysis; financial protection; and the progressivity of health care financing. Data are drawn from the Demographic and Health Surveys (DHS), World Health Surveys (WHS), Multiple Indicator Cluster Surveys (MICS), Living Standards and Measurement Surveys (LSMS), as well as other household surveys where available. The datasheets use a common set of health indicators for all countries. All analyses are conducted using the health modules of the ADePT software.

INEQUALITIES
IN HEALTH
OUTCOMES

ADULT HEALTH ^{1,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2003 ³							
Tuberculosis	9.7%	11.6%	7.8%	12.9%	6.7%	9.7%	-0.040
Road traffic accident	1.1%	0.0%	2.3%	1.6%	2.9%	1.6%	0.246*
Non-road traffic accident	10.2%	9.6%	6.6%	10.7%	9.6%	9.3%	-0.022
Angina	33.0%	32.8%	27.6%	13.0%	8.2%	22.5%	-0.250***
Arthritis	17.7%	24.5%	16.1%	14.9%	7.1%	16.0%	-0.151***
Asthma	7.3%	5.8%	4.2%	4.2%	2.5%	4.7%	-0.182**
Depression	7.4%	11.2%	6.5%	4.5%	4.3%	6.8%	-0.161**
Diabetes	9.1%	9.4%	6.8%	7.3%	1.5%	6.7%	-0.210***
Difficulty with work and household activities	16.2%	24.9%	14.0%	12.3%	4.1%	14.3%	-0.198***
Poor self-assessed health status	32.2%	31.3%	17.9%	15.5%	8.9%	20.8%	-0.247***

INEQUALITIES IN
RISKY BEHAVIOR

RISK FACTORS ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2003 ³							
Smoking (all)	43.6%	30.6%	33.5%	33.5%	34.1%	34.8%	-0.032
Insufficient intake of fruit and vegetables	83.8%	76.9%	80.9%	80.7%	64.4%	77.0%	-0.039***
Drinking	15.3%	4.9%	7.0%	8.3%	5.7%	8.0%	-0.161*

INEQUALITIES
IN HEALTH CARE
UTILIZATION

ADULT PREVENTIVE CARE ^{2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2003 ³							
TB screening	10.3%	14.2%	17.2%	16.4%	16.2%	15.0%	0.078
Cervical cancer screening	78.5%	92.6%	96.9%	96.9%	94.8%	93.9%	0.020
Breast cancer screening	22.5%	39.7%	45.5%	37.1%	47.1%	39.7%	0.057

ADULT CURATIVE CARE ³	Q1	Q2	Q3	Q4	Q5	Total	CI
2003 ³							
Inpatient or outpatient (12 months)	62.0%	68.8%	60.5%	65.4%	71.0%	65.7%	0.013
Inpatient (12 months)	20.4%	18.5%	19.1%	15.5%	18.4%	18.3%	-0.043
Inpatient (5 years)	40.3%	42.5%	44.4%	37.5%	32.6%	39.4%	-0.044
Outpatient (12 months)	53.7%	56.6%	44.9%	64.6%	64.9%	57.3%	0.039



FINANCIAL PROTECTION

	Threshold share of total household consumption				
CATASTROPHIC OUT-OF-POCKET SPENDING	5%	10%	15%	25%	40%
2003 ³					
Headcount	37.5%	26.8%	21.1%	15.6%	13.0%
Concentration index	0.005	-0.062	-0.193***	-0.330***	-0.794***

	Threshold share of nonfood consumption				
CATASTROPHIC OUT-OF-POCKET SPENDING	5%	10%	15%	25%	40%
2003 ³					
Headcount	44.6%	38.6%	31.6%	23.6%	17.4%
Concentration index	0.010	-0.031	-0.055	-0.139**	-0.327***

IMPOVERISHMENT				
Poverty line at US\$1.25 per capita per day	Consumption including OOP	Consumption excluding OOP	Change	% change
2003 ³				
Percentage in poverty	5.5%	5.7%	0.2 pp	4.4%
Average shortfall from the poverty line	\$0.06	\$0.06	\$0.00	2.7%
Average shortfall from the poverty line, among the poor	\$1.03	\$1.02	-\$0.02	-1.7%
Poverty line at US\$2.00 per capita per day	Consumption including OOP	Consumption excluding OOP	Change	% change
2003 ³				
Percentage in poverty	7.2%	7.7%	0.5 pp	6.3%
Average shortfall from the poverty line	\$0.11	\$0.12	\$0.00	2.9%
Average shortfall from the poverty line, among the poor	\$1.45	\$1.40	-\$0.05	-3.2%

Note:

The Health Equity and Financial Protection datasheets use a standardized selection of indicators (see Measurement of Indicators for full list). When (1) data sources are not available or (2) indicator-specific sample size is less than 250 per quintile for mortality indicators or less than 25 per quintile for all others, indicators are not reported for the country under analysis.

For analysis of inequalities using WHS, DHS and MICS, quintile ranking is based on an asset index. For all other analyses, ranking is based on household consumption. Q = quintile (where quintile 1 is the poorest)

CI = concentration index; ranges between -1 and 1; negative sign indicates that the health outcome takes higher values among the poor

* Significant at 10%, **Significant at 5%, ***Significant at 1%.

Poverty lines are at 2005 purchasing power parity, adjusted to current prices using Latvia's consumer price index.

Data sources:

1=n/a Demographic and Health Survey, 2=n/a Multiple Indicator Cluster Survey, 3=2003 Latvia World Health Survey.

Recommended citation: World Bank. 2012. Health Equity and Financial Protection Datasheet - Latvia. Washington, D.C.: World Bank.

For more information and the latest versions of the Health Equity and Financial Protection reports and datasheets, see: www.worldbank.org/povertyandhealth.

Photo credit: Curt Carnemark

MOLDOVA

The Health Equity and Financial Protection datasheets provide a picture of equity and financial protection in the health sectors of low- and middle-income countries. Topics covered include: inequalities in health outcomes, health behavior and health care utilization; benefit incidence analysis; financial protection; and the progressivity of health care financing. Data are drawn from the Demographic and Health Surveys (DHS), World Health Surveys (WHS), Multiple Indicator Cluster Surveys (MICS), Living Standards and Measurement Surveys (LSMS), as well as other household surveys where available. The datasheets use a common set of health indicators for all countries. All analyses are conducted using the health modules of the ADePT software.

INEQUALITIES IN HEALTH OUTCOMES

CHILD HEALTH ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005 ¹							
Infant mortality rate	20.9	21.5	31.3	20.6	18.9	22.8	-0.037
Under-five mortality rate	29.4	25.3	55.6	29.3	23.8	33.1	-0.022
Stunting	15.9%	11.3%	14.2%	6.3%	7.4%	11.3%	-0.147***
Underweight	6.3%	5.1%	2.1%	2.7%	1.0%	3.4%	-0.287***
Diarrhea	7.5%	2.2%	6.3%	9.5%	11.8%	7.5%	0.188***
Acute respiratory infection	5.2%	5.8%	7.0%	6.6%	10.4%	7.1%	0.108*
Fever	10.9%	10.2%	16.3%	17.6%	22.2%	15.6%	0.152***

ADULT HEALTH ^{1,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005 ¹							
Obesity among non-pregnant women	17.6%	21.3%	19.5%	19.1%	14.5%	18.3%	-0.045***

INEQUALITIES IN RISKY BEHAVIOR

RISK FACTORS ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005 ¹							
Smoking (women)	1.2%	2.4%	3.1%	8.4%	17.0%	7.1%	0.466***
Concurrent partnerships	7.8%	8.8%	8.4%	13.7%	21.6%	12.6%	0.228***
Condom usage (more than one partner)	20.0%	15.0%	30.1%	28.0%	32.7%	27.8%	0.103***

INEQUALITIES IN HEALTH CARE UTILIZATION

MATERNAL AND CHILD HEALTH INTERVENTIONS ^{1,2}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005 ¹							
Full immunization	90.0%	94.4%	95.5%	75.6%	86.2%	88.7%	-0.021*
Medical treatment of ARI	41.9%	46.1%	72.6%	57.9%	68.1%	60.0%	0.069
Skilled antenatal care (4+ visits)	66.9%	81.0%	83.2%	84.6%	84.3%	80.5%	0.037***
Skilled birth attendance	99.4%	99.3%	100.0%	99.8%	100.0%	99.7%	0.002*
Contraceptive prevalence among women	49.4%	46.1%	51.4%	52.5%	53.9%	51.2%	0.030***

Note:

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For analysis of inequalities using WHS, DHS and MICS, quintile ranking is based on an asset index. For all other analyses, ranking is based on household consumption.

Q = quintile (where quintile 1 is the poorest)

CI = concentration index; ranges between -1 and 1; negative sign indicates that the health outcome takes higher values among the poor

* Significant at 10%, **Significant at 5%, ***Significant at 1%.

Data sources:

1=2005 Moldova Demographic and Health Survey, 2=n/a Multiple Indicator Cluster Survey, 3=n/a World Health Survey.

Recommended citation: World Bank. 2012. Health Equity and Financial Protection Datasheet - Moldova. Washington, D.C.: World Bank.

For more information and the latest versions of the Health Equity and Financial Protection reports and datasheets, see: www.worldbank.org/povertyandhealth.



MONTENEGRO

The Health Equity and Financial Protection datasheets provide a picture of equity and financial protection in the health sectors of low- and middle-income countries. Topics covered include: inequalities in health outcomes, health behavior and health care utilization; benefit incidence analysis; financial protection; and the progressivity of health care financing. Data are drawn from the Demographic and Health Surveys (DHS), World Health Surveys (WHS), Multiple Indicator Cluster Surveys (MICS), Living Standards and Measurement Surveys (LSMS), as well as other household surveys where available. The datasheets use a common set of health indicators for all countries. All analyses are conducted using the health modules of the ADePT software.

INEQUALITIES IN HEALTH OUTCOMES

CHILD HEALTH ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005-06 ²							
Stunting	13.9%	7.1%	5.7%	5.8%	5.2%	7.8%	-0.184**
Underweight	4.9%	2.5%	1.5%	0.5%	1.7%	2.3%	-0.342**
Diarrhea	8.5%	4.8%	1.7%	6.7%	3.4%	5.1%	-0.154*
Acute respiratory infection	9.5%	12.2%	14.2%	11.1%	10.0%	11.4%	0.015

INEQUALITIES IN RISKY BEHAVIOR

RISK FACTORS ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005-06 ²							
Concurrent partnerships	0.0%	0.0%	4.2%	0.0%	0.0%	0.9%	-0.142***

INEQUALITIES IN HEALTH CARE UTILIZATION

MATERNAL AND CHILD HEALTH INTERVENTIONS ^{1,2}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005-06 ²							
Contraceptive prevalence	1.0%	0.6%	0.6%	0.7%	1.1%	0.8%	0.036

Note:

The Health Equity and Financial Protection datasheets use a standardized selection of indicators (see Measurement of Indicators for full list). When (1) data sources are not available or (2) indicator-specific sample size is less than 250 per quintile for mortality indicators or less than 25 per quintile for all others, indicators are not reported for the country under analysis.

For analysis of inequalities using WHS, DHS and MICS, quintile ranking is based on an asset index. For all other analyses, ranking is based on household consumption. Q = quintile (where quintile 1 is the poorest)

CI = concentration index; ranges between -1 and 1; negative sign indicates that the health outcome takes higher values among the poor

* Significant at 10%, **Significant at 5%, ***Significant at 1%.

Data sources:

1=n/a Demographic and Health Survey, 2=2005-06 Montenegro Multiple Indicator Cluster Survey, 3=n/a World Health Survey.

Recommended citation: World Bank. 2012. Health Equity and Financial Protection Datasheet - Montenegro. Washington, D.C.: World Bank.

For more information and the latest versions of the Health Equity and Financial Protection reports and datasheets, see: www.worldbank.org/povertyandhealth.



RUSSIAN FEDERATION

The Health Equity and Financial Protection datasheets provide a picture of equity and financial protection in the health sectors of low- and middle-income countries. Topics covered include: inequalities in health outcomes, health behavior and health care utilization; benefit incidence analysis; financial protection; and the progressivity of health care financing. Data are drawn from the Demographic and Health Surveys (DHS), World Health Surveys (WHS), Multiple Indicator Cluster Surveys (MICS), Living Standards and Measurement Surveys (LSMS), as well as other household surveys where available. The datasheets use a common set of health indicators for all countries. All analyses are conducted using the health modules of the ADePT software.

INEQUALITIES IN HEALTH OUTCOMES

ADULT HEALTH ^{1,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2003 ³							
Tuberculosis	10.3%	8.9%	5.5%	3.5%	8.3%	7.3%	-0.118
Obesity among non-pregnant women	14.8%	13.7%	13.5%	9.9%	19.9%	14.3%	0.004
Road traffic accident	1.0%	0.5%	0.3%	1.5%	1.7%	1.0%	0.182
Non-road traffic accident	8.2%	7.5%	6.1%	10.1%	8.8%	8.1%	0.036
Angina	43.4%	37.6%	22.9%	11.5%	15.3%	25.7%	-0.262***
Arthritis	36.7%	31.2%	17.9%	13.6%	11.3%	21.8%	-0.257***
Asthma	1.8%	5.1%	3.0%	3.2%	6.3%	3.9%	0.123
Depression	2.2%	2.6%	2.5%	2.2%	7.3%	3.4%	0.192
Diabetes	3.5%	3.7%	2.3%	1.5%	5.4%	3.3%	-0.003
Difficulty with work and household activities	29.3%	18.4%	11.9%	6.3%	4.6%	14.1%	-0.362***
Poor self-assessed health status	38.8%	27.1%	15.6%	10.5%	6.5%	19.7%	-0.345***

INEQUALITIES IN RISKY BEHAVIOR

RISK FACTORS ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2003 ³							
Smoking (all)	21.4%	21.3%	33.5%	27.9%	33.3%	27.5%	0.094***
Smoking (women)	29.5%	16.9%	22.9%	11.8%	19.5%	18.0%	-0.046
Insufficient intake of fruit and vegetables	93.8%	82.4%	82.0%	83.0%	73.1%	82.8%	-0.041***
Insufficient physical activity	42.6%	49.4%	49.7%	55.6%	38.4%	47.0%	-0.001
Drinking	11.3%	7.4%	6.8%	8.9%	8.3%	8.5%	-0.048
Concurrent partnerships	18.3%	13.1%	7.7%	12.8%	6.8%	10.5%	-0.113

INEQUALITIES IN HEALTH CARE UTILIZATION

ADULT PREVENTIVE CARE ^{2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2003 ³							
TB screening	45.1%	46.3%	55.2%	47.8%	50.1%	48.9%	0.021
Voluntary counseling and testing for HIV	91.0%	100.0%	97.3%	95.8%	100.0%	97.6%	0.007**
Cervical cancer screening	86.1%	97.9%	89.3%	95.4%	98.3%	94.4%	0.016***
Breast cancer screening	9.8%	12.8%	20.6%	26.7%	33.2%	21.4%	0.239***

ADULT CURATIVE CARE ³	Q1	Q2	Q3	Q4	Q5	Total	CI
2003 ³							
Inpatient or outpatient (12 months)	64.6%	69.1%	61.9%	64.1%	63.3%	64.6%	-0.009
Inpatient (12 months)	11.1%	15.3%	13.6%	14.6%	13.1%	13.6%	0.004
Inpatient (5 years)	33.1%	35.1%	31.4%	30.0%	28.7%	31.7%	-0.043
Outpatient (12 months)	56.8%	63.2%	51.4%	57.9%	56.5%	57.1%	-0.005



FINANCIAL PROTECTION

	Threshold share of total household consumption				
CATASTROPHIC OUT-OF-POCKET SPENDING	5%	10%	15%	25%	40%
2003 ³					
Headcount	42.5%	31.5%	25.4%	6.6%	3.5%
Concentration index	-0.139***	-0.261***	-0.395***	0.033	-0.240***

	Threshold share of nonfood consumption				
CATASTROPHIC OUT-OF-POCKET SPENDING	5%	10%	15%	25%	40%
2003 ³					
Headcount	51.6%	46.7%	41.9%	21.0%	12.5%
Concentration index	-0.073***	-0.107***	-0.145***	0.101**	0.145**

IMPOVERISHMENT				
Poverty line at US\$1.25 per capita per day	Consumption including OOP	Consumption excluding OOP	Change	% change
2003 ³				
Percentage in poverty	20.5%	21.6%	1.0 pp	5.1%
Average shortfall from the poverty line	\$0.20	\$0.21	\$0.01	5.8%
Average shortfall from the poverty line, among the poor	\$0.98	\$0.98	\$0.01	0.6%
Poverty line at US\$2.00 per capita per day	Consumption including OOP	Consumption excluding OOP	Change	% change
2003 ³				
Percentage in poverty	24.8%	26.8%	2.0 pp	8.1%
Average shortfall from the poverty line	\$0.37	\$0.39	\$0.03	6.9%
Average shortfall from the poverty line, among the poor	\$1.48	\$1.46	-\$0.02	-1.1%

Note:

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For analysis of inequalities using WHS, DHS and MICS, quintile ranking is based on an asset index. For all other analyses, ranking is based on household consumption. Q = quintile (where quintile 1 is the poorest)

CI = concentration index; ranges between -1 and 1; negative sign indicates that the health outcome takes higher values among the poor

* Significant at 10%, **Significant at 5%, ***Significant at 1%.

Poverty lines are at 2005 purchasing power parity, adjusted to current prices using Russian Federation's consumer price index.

Data sources:

1=n/a Demographic and Health Survey, 2=n/a Multiple Indicator Cluster Survey, 3=2003 Russian Federation World Health Survey.

Recommended citation: World Bank. 2012. Health Equity and Financial Protection Datasheet - Russian Federation. Washington, D.C.: World Bank.

For more information and the latest versions of the Health Equity and Financial Protection reports and datasheets, see: www.worldbank.org/povertyandhealth.

Photo credit: Yuri Kozyrev

SERBIA

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INEQUALITIES IN HEALTH OUTCOMES

CHILD HEALTH ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005-06 ²							
Stunting	11.7%	8.5%	6.9%	8.5%	5.5%	8.3%	-0.125***
Underweight	5.1%	1.0%	0.8%	0.4%	1.8%	1.8%	-0.362***
Diarrhea	7.3%	5.1%	4.0%	4.9%	4.7%	5.2%	-0.096**
Acute respiratory infection	12.2%	10.1%	12.1%	12.4%	9.9%	11.4%	-0.017

INEQUALITIES IN RISKY BEHAVIOR

RISK FACTORS ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005-06 ²							
Concurrent partnerships	3.5%	5.2%	2.8%	7.2%	6.9%	5.2%	0.131

INEQUALITIES IN HEALTH CARE UTILIZATION

MATERNAL AND CHILD HEALTH INTERVENTIONS ^{1,2}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005-06 ²							
Contraceptive prevalence	0.1%	0.1%	0.1%	0.2%	0.1%	0.1%	0.085

ADULT PREVENTIVE CARE ^{2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005-06 ²							
Voluntary counseling and testing for HIV	67.4%	74.5%	79.8%	83.7%	94.7%	84.2%	0.055***

Note:

The Health Equity and Financial Protection datasheets use a standardized selection of indicators (see Measurement of Indicators for full list). When (1) data sources are not available or (2) indicator-specific sample size is less than 250 per quintile for mortality indicators or less than 25 per quintile for all others, indicators are not reported for the country under analysis.

For analysis of inequalities using WHS, DHS and MICS, quintile ranking is based on an asset index. For all other analyses, ranking is based on household consumption.

Q = quintile (where quintile 1 is the poorest)

CI = concentration index; ranges between -1 and 1; negative sign indicates that the health outcome takes higher values among the poor

* Significant at 10%, **Significant at 5%, ***Significant at 1%.

Data sources:

1=n/a Demographic and Health Survey, 2=2005-06 Serbia Multiple Indicator Cluster Survey, 3=n/a World Health Survey.

Recommended citation: World Bank. 2012. Health Equity and Financial Protection Datasheet - Serbia. Washington, D.C.: World Bank.

For more information and the latest versions of the Health Equity and Financial Protection reports and datasheets, see: www.worldbank.org/povertyandhealth.

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TAJIKISTAN

The Health Equity and Financial Protection datasheets provide a picture of equity and financial protection in the health sectors of low- and middle-income countries. Topics covered include: inequalities in health outcomes, health behavior and health care utilization; benefit incidence analysis; financial protection; and the progressivity of health care financing. Data are drawn from the Demographic and Health Surveys (DHS), World Health Surveys (WHS), Multiple Indicator Cluster Surveys (MICS), Living Standards and Measurement Surveys (LSMS), as well as other household surveys where available. The datasheets use a common set of health indicators for all countries. All analyses are conducted using the health modules of the ADePT software.

INEQUALITIES IN HEALTH OUTCOMES

CHILD HEALTH ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005 ²							
Stunting	37.4%	36.1%	37.1%	28.8%	25.4%	33.1%	-0.079***
Underweight	20.2%	16.1%	15.1%	11.0%	10.7%	14.8%	-0.134***
Diarrhea	18.2%	11.6%	13.2%	11.0%	11.8%	13.3%	-0.103***
Acute respiratory infection	3.6%	5.1%	3.8%	3.4%	3.7%	3.9%	-0.038
Fever	10.2%	8.1%	6.2%	6.5%	6.0%	7.5%	-0.125***

INEQUALITIES IN RISKY BEHAVIOR

RISK FACTORS ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005 ²							
Mosquito net use by children	2.1%	0.5%	0.6%	1.2%	0.9%	1.1%	-0.117

INEQUALITIES IN HEALTH CARE UTILIZATION

MATERNAL AND CHILD HEALTH INTERVENTIONS ^{1,2}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005 ²							
Full immunization	13.2%	16.4%	24.1%	34.9%	40.0%	25.4%	0.213**
Treatment of diarrhea	58.3%	60.3%	55.6%	58.1%	59.7%	58.4%	0.007
Contraceptive prevalence among women	20.7%	22.3%	22.8%	24.9%	26.8%	23.6%	0.055***

Note:

The Health Equity and Financial Protection datasheets use a standardized selection of indicators (see Measurement of Indicators for full list). When (1) data sources are not available or (2) indicator-specific sample size is less than 250 per quintile for mortality indicators or less than 25 per quintile for all others, indicators are not reported for the country under analysis.

For analysis of inequalities using WHS, DHS and MICS, quintile ranking is based on an asset index. For all other analyses, ranking is based on household consumption.

Q = quintile (where quintile 1 is the poorest)

CI = concentration index; ranges between -1 and 1; negative sign indicates that the health outcome takes higher values among the poor

* Significant at 10%, **Significant at 5%, ***Significant at 1%.

Data sources:

1=n/a Demographic and Health Survey, 2=2005 Tajikistan Multiple Indicator Cluster Survey, 3=n/a World Health Survey.

Recommended citation: World Bank. 2012. Health Equity and Financial Protection Datasheet - Tajikistan. Washington, D.C.: World Bank.

For more information and the latest versions of the Health Equity and Financial Protection reports and datasheets, see: www.worldbank.org/povertyandhealth.

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TURKEY

The Health Equity and Financial Protection datasheets provide a picture of equity and financial protection in the health sectors of low- and middle-income countries. Topics covered include: inequalities in health outcomes, health behavior and health care utilization; benefit incidence analysis; financial protection; and the progressivity of health care financing. Data are drawn from the Demographic and Health Surveys (DHS), World Health Surveys (WHS), Multiple Indicator Cluster Surveys (MICS), Living Standards and Measurement Surveys (LSMS), as well as other household surveys where available. The datasheets use a common set of health indicators for all countries. All analyses are conducted using the health modules of the ADePT software.

INEQUALITIES IN HEALTH OUTCOMES

CHILD HEALTH ^{1a,1b,1c,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
1993 ^{1a}							
Infant mortality rate	106.7	80.2	72.1	54.5	29.2	72.4	-0.204***
Under-five mortality rate	137.7	99.1	88.4	74.0	29.3	91.0	-0.226***
Stunting	40.3%	32.0%	20.7%	11.6%	5.6%	23.8%	-0.315***
Underweight	18.6%	9.5%	6.9%	4.1%	2.1%	8.9%	-0.372***
Diarrhea	14.2%	14.6%	13.4%	12.5%	11.8%	13.4%	-0.048*
Acute respiratory infection	5.0%	5.6%	5.3%	4.1%	3.8%	4.9%	-0.064
Fever	38.0%	29.2%	28.2%	26.6%	25.6%	30.0%	-0.081***
1998 ^{1b}							
Infant mortality rate	74.4	60.2	50.3	36.7	29.7	52.5	-0.182***
Under-five mortality rate	87.5	71.3	58.9	44.4	42.3	63.4	-0.157***
Stunting	31.5%	24.9%	16.8%	10.7%	4.7%	18.8%	-0.306***
Underweight	14.0%	8.1%	4.8%	3.4%	1.9%	7.0%	-0.377***
Diarrhea	38.7%	34.1%	32.7%	23.1%	16.9%	30.1%	-0.150***
2003 ^{1c}							
Infant mortality rate	67.0	44.1	33.3	24.5	15.4	39.3	-0.257***
Under-five mortality rate	91.6	57.5	45.7	27.3	29.7	53.1	-0.243***
Stunting	30.5%	15.5%	12.1%	4.9%	4.6%	14.9%	-0.371***
Underweight	6.8%	3.4%	2.6%	0.7%	0.7%	3.2%	-0.425***
Acute respiratory infection	36.8%	33.3%	27.1%	25.0%	21.1%	29.5%	-0.109***
Fever	47.7%	48.0%	39.8%	33.0%	27.0%	40.3%	-0.109***

ADULT HEALTH ^{1a,1b,1c,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
1993 ^{1a}							
Obesity among non-pregnant women	12.8%	23.7%	18.8%	21.5%	18.1%	19.1%	0.034
1998 ^{1b}							
Obesity among non-pregnant women	17.2%	20.9%	21.5%	20.8%	13.9%	19.0%	-0.022
2003 ^{1c}							
Tuberculosis	13.2%	11.8%	9.4%	9.4%	7.1%	10.2%	-0.040*
Road traffic accident	1.4%	1.2%	1.8%	1.7%	1.7%	1.5%	0.145***
Non-road traffic accident	3.3%	2.5%	3.5%	2.2%	2.8%	2.8%	0.037
Angina	5.6%	8.8%	6.3%	6.1%	4.2%	6.2%	0.008
Arthritis	8.8%	10.3%	7.7%	9.1%	6.7%	8.5%	0.033
Asthma	2.8%	5.8%	3.4%	3.3%	4.4%	3.9%	0.106**
Depression	4.7%	6.8%	7.0%	9.0%	8.9%	7.3%	0.201***
Difficulty with work and household activities	19.2%	14.9%	11.0%	10.3%	8.4%	12.8%	-0.110***
Poor self-assessed health status	15.5%	9.8%	7.5%	6.0%	3.9%	8.5%	-0.195***
2003 ^{1c}							
Obesity among non-pregnant women	20.2%	26.6%	23.5%	23.2%	19.5%	22.7%	-0.018



INEQUALITIES IN RISKY BEHAVIOR

RISK FACTORS ^{1a,1b,1c,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2003 ³							
Smoking (all)	31.1%	31.0%	32.4%	33.6%	36.2%	32.8%	0.087***
Insufficient intake of fruit and vegetables	89.1%	83.5%	78.5%	79.8%	73.5%	80.9%	-0.018***
Insufficient physical activity	27.6%	27.1%	27.9%	28.0%	26.6%	27.4%	0.056***
Drinking	7.1%	7.9%	9.8%	11.2%	16.6%	10.5%	0.244***
2003 ^{1c}							
Smoking (women)	17.0%	21.7%	25.2%	29.2%	39.9%	27.5%	0.170***

INEQUALITIES IN HEALTH CARE UTILIZATION

MATERNAL AND CHILD HEALTH INTERVENTIONS ^{1a,1b,1c,2}	Q1	Q2	Q3	Q4	Q5	Total	CI
1993 ^{1a}							
Full immunization	41.2%	62.8%	68.1%	82.6%	81.8%	65.3%	0.132***
Skilled antenatal care (4+ visits)	10.0%	22.8%	33.7%	57.1%	76.0%	36.5%	0.357***
Skilled birth attendance	44.1%	71.4%	84.7%	95.4%	99.1%	76.6%	0.150***
1998 ^{1b}							
Full immunization	29.6%	38.8%	51.3%	59.0%	69.1%	47.9%	0.163***
Treatment of diarrhea	22.2%	26.4%	34.4%	27.2%	25.6%	27.0%	0.066**
Skilled antenatal care (4+ visits)	14.0%	28.8%	45.4%	60.0%	84.1%	43.3%	0.321***
Skilled birth attendance	54.3%	79.5%	89.3%	95.2%	99.4%	81.7%	0.113***
2003 ^{1c}							
Full immunization	33.0%	55.4%	61.3%	70.8%	73.6%	58.2%	0.149***
Medical treatment of ARI	29.4%	43.1%	53.4%	57.3%	62.8%	45.2%	0.160***
Skilled antenatal care (4+ visits)	16.0%	38.3%	56.9%	69.5%	86.0%	49.6%	0.287***
Skilled birth attendance	59.9%	81.9%	92.0%	96.6%	99.4%	83.9%	0.100***
Contraceptive prevalence	50.7%	52.6%	51.6%	55.6%	57.9%	54.3%	0.029***

FINANCIAL PROTECTION

	Threshold share of total household consumption				
CATASTROPHIC OUT-OF-POCKET SPENDING	5%	10%	15%	25%	40%
2003 ³					
Headcount	38.9%	29.6%	22.6%	13.7%	7.4%
Concentration index	0.034***	0.020*	0.022	0.014	0.019

	Threshold share of nonfood consumption				
CATASTROPHIC OUT-OF-POCKET SPENDING	5%	10%	15%	25%	40%
2003 ³					
Headcount	45.4%	38.6%	33.4%	24.4%	16.2%
Concentration index	0.035***	0.013	0.011	-0.005	-0.032*

IMPOVERISHMENT				
Poverty line at US\$1.25 per capita per day	Consumption including OOP	Consumption excluding OOP	Change	% change
2003 ³				
Percentage in poverty	8.1%	10.5%	2.4 pp	30.2%
Average shortfall from the poverty line	\$0.04	\$0.06	\$0.01	30.0%
Average shortfall from the poverty line, among the poor	\$0.55	\$0.55	\$0.00	-0.1%
Poverty line at US\$2.00 per capita per day	Consumption including OOP	Consumption excluding OOP	Change	% change
2003 ³				
Percentage in poverty	18.2%	22.0%	3.8 pp	21.0%
Average shortfall from the poverty line	\$0.14	\$0.18	\$0.04	26.2%
Average shortfall from the poverty line, among the poor	\$0.78	\$0.81	\$0.03	4.3%

Note:

The Health Equity and Financial Protection datasheets use a standardized selection of indicators (see Measurement of Indicators for full list). When (1) data sources are not available or (2) indicator-specific sample size is less than 250 per quintile for mortality indicators or less than 25 per quintile for all others, indicators are not reported for the country under analysis.

For analysis of inequalities using WHS, DHS and MICS, quintile ranking is based on an asset index. For all other analyses, ranking is based on household consumption. Q = quintile (where quintile 1 is the poorest)

CI = concentration index; ranges between -1 and 1; negative sign indicates that the health outcome takes higher values among the poor

* Significant at 10%, **Significant at 5%, ***Significant at 1%.

Poverty lines are at 2005 purchasing power parity, adjusted to current prices using Turkey's consumer price index.

Data sources:

1a=1993 Turkey Demographic and Health Survey, 1b=1998 Turkey Demographic and Health Survey, 1c=2003 Turkey Demographic and Health Survey, 2=n/a Multiple Indicator Cluster Survey, 3=2003 Turkey World Health Survey.

Recommended citation: World Bank. 2012. Health Equity and Financial Protection Datasheet - Turkey. Washington, D.C.: World Bank.

For more information and the latest versions of the Health Equity and Financial Protection reports and datasheets, see: www.worldbank.org/povertyandhealth.

Photo credit: Yosef Hadar

UKRAINE

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INEQUALITIES IN HEALTH OUTCOMES

CHILD HEALTH ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2007 ¹							
Infant mortality rate	23.1	17.7	23.1	28.0	9.2	19.3	-0.101
Under-five mortality rate	18.7	8.0	26.6	42.7	10.9	20.0	0.055

ADULT HEALTH ^{1,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2002-03 ³							
Tuberculosis	9.2%	16.1%	9.0%	5.3%	7.0%	9.3%	-0.111**
Obesity among non-pregnant women	4.5%	9.0%	10.9%	13.0%	19.2%	12.1%	0.217***
Road traffic accident	1.4%	4.0%	1.0%	1.5%	1.3%	1.9%	-0.107
Non-road traffic accident	8.2%	11.1%	8.8%	6.5%	5.9%	8.1%	-0.088*
Angina	22.7%	28.3%	20.2%	18.0%	14.1%	20.7%	-0.084**
Arthritis	21.3%	25.3%	17.3%	13.4%	12.8%	18.1%	-0.117***
Asthma	5.1%	5.4%	3.9%	3.8%	2.8%	4.2%	-0.118*
Depression	4.3%	2.7%	5.7%	2.2%	3.6%	3.7%	-0.041
Diabetes	3.7%	5.4%	3.8%	1.4%	1.0%	3.0%	-0.251***
Difficulty with work and household activities	16.6%	21.0%	12.1%	10.9%	5.4%	13.2%	-0.180***
Poor self-assessed health status	31.4%	32.9%	22.6%	17.0%	15.4%	23.9%	-0.158***

INEQUALITIES IN RISKY BEHAVIOR

RISK FACTORS ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2002-03 ³							
Smoking (all)	26.0%	23.2%	27.2%	26.0%	25.4%	25.5%	0.016
Insufficient intake of fruit and vegetables	62.7%	55.3%	52.1%	51.7%	43.8%	53.0%	-0.062***
Insufficient physical activity	10.0%	9.5%	8.7%	6.6%	8.3%	8.6%	-0.073
Drinking	27.9%	32.1%	36.8%	33.3%	28.8%	31.8%	0.016
2007 ¹							
Smoking (women)	10.2%	8.9%	16.9%	17.4%	19.3%	15.1%	0.144***
Concurrent partnerships	13.9%	10.3%	13.8%	21.9%	19.8%	16.3%	0.126***
Condom usage (more than one partner)	40.4%	46.5%	52.2%	50.2%	54.1%	50.2%	0.033



INEQUALITIES IN HEALTH CARE UTILIZATION

MATERNAL AND CHILD HEALTH INTERVENTIONS ^{1,2}	Q1	Q2	Q3	Q4	Q5	Total	CI
2005 ²							
Contraceptive prevalence	52.5%	49.3%	46.9%	41.3%	31.1%	44.2%	-0.099***
2007 ¹							
Skilled antenatal care (4+ visits)	94.6%	97.0%	97.8%	98.7%	98.6%	97.5%	0.008***
Skilled birth attendance	96.9%	98.9%	100.0%	99.6%	99.3%	99.0%	0.005**
Contraceptive prevalence	28.0%	34.1%	37.9%	40.3%	45.3%	38.3%	0.083***

ADULT PREVENTIVE CARE ^{2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2002-03 ³							
TB screening	27.5%	39.7%	34.4%	31.1%	34.5%	33.4%	0.016
Cervical cancer screening	87.3%	94.3%	93.6%	82.8%	90.7%	89.8%	-0.007
Breast cancer screening	33.1%	25.3%	45.4%	38.4%	52.0%	39.3%	0.101**
Voluntary counseling and testing for HIV	82.2%	94.1%	88.0%	90.4%	82.8%	87.4%	-0.009
2005 ²							
Voluntary counseling and testing for HIV	87.9%	95.0%	88.6%	87.5%	93.2%	90.3%	0.003

UTILIZATION ³	Q1	Q2	Q3	Q4	Q5	Total	CI
2002-03 ³							
Inpatient or outpatient (12 months)	54.3%	60.6%	59.3%	61.3%	59.2%	58.9%	0.017
Inpatient (12 months)	11.4%	20.3%	16.7%	17.0%	8.5%	14.8%	-0.036
Inpatient (5 years)	27.4%	37.6%	34.3%	35.7%	25.4%	32.1%	-0.006
Outpatient (12 months)	45.7%	51.2%	48.0%	51.1%	53.4%	49.9%	0.027

FINANCIAL PROTECTION

	Threshold share of total household consumption				
CATASTROPHIC OUT-OF-POCKET SPENDING ³	5%	10%	15%	25%	40%
2002-03 ³					
Headcount	49.3%	34.0%	26.2%	16.6%	11.5%
Concentration index	0.033*	0.041	0.082**	0.173***	0.199***

	Threshold share of nonfood consumption				
CATASTROPHIC OUT-OF-POCKET SPENDING ³	5%	10%	15%	25%	40%
2002-03 ³					
Headcount	60.6%	51.8%	44.7%	33.1%	24.1%
Concentration index	0.017	0.013	0.017	0.001	0.034

IMPOVERISHMENT ³				
Poverty line at US\$1.25 per capita per day	Consumption including OOP	Consumption excluding OOP	Change	% change
2002-03 ³				
Percentage in poverty	5.0%	6.5%	1.5 pp	29.2%
Average shortfall from the poverty line	\$0.03	\$0.03	\$0.01	21.0%
Average shortfall from the poverty line, among the poor	\$0.50	\$0.47	-\$0.03	-6.4%
Poverty line at US\$2.00 per capita per day	Consumption including OOP	Consumption excluding OOP	Change	% change
2002-03 ³				
Percentage in poverty	12.3%	15.7%	3.3 pp	27.2%
Average shortfall from the poverty line	\$0.09	\$0.12	\$0.02	26.1%
Average shortfall from the poverty line, among the poor	\$0.71	\$0.70	-\$0.01	-0.9%

Note:

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For analysis of inequalities using WHS, DHS and MICS, quintile ranking is based on an asset index. For all other analyses, ranking is based on household consumption. Q = quintile (where quintile 1 is the poorest)

CI = concentration index; ranges between -1 and 1; negative sign indicates that the health outcome takes higher values among the poor

* Significant at 10%, **Significant at 5%, ***Significant at 1%.

Poverty lines are at 2005 purchasing power parity, adjusted to current prices using Ukraine's consumer price index.

Data sources:

1=2007 Ukraine Demographic and Health Survey, 2= 2005 Ukraine Multiple Indicator Cluster Survey, 3=2002-03 Ukraine World Health Survey.

Recommended citation: World Bank. 2012. Health Equity and Financial Protection Datasheet - Ukraine. Washington, D.C.: World Bank.

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UZBEKISTAN

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INEQUALITIES IN HEALTH OUTCOMES

CHILD HEALTH ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
1996 ¹							
Infant mortality rate1	58.5	40.7	38.9	44.1	42.7	45.9	-0.051
Under-five mortality rate1	45.7	33.6	50.8	67.7	42.9	47.4	0.060
Stunting1	41.0%	36.1%	39.4%	29.4%	33.5%	36.4%	-0.049*
Underweight1	20.3%	16.0%	11.4%	12.1%	10.6%	14.8%	-0.140***
Diarrhea1	3.9%	3.3%	6.3%	5.5%	8.8%	5.2%	0.183**
Acute respiratory infection1	0.3%	0.8%	0.6%	1.1%	4.3%	1.2%	0.488***
Fever1	6.2%	7.9%	8.3%	9.6%	10.3%	8.2%	0.083
2006 ²							
Stunting2	21.9%	21.3%	20.3%	18.1%	14.5%	19.4%	-0.072***
Underweight2	5.4%	5.2%	4.2%	3.9%	3.3%	4.4%	-0.105**
Diarrhea2	2.3%	2.7%	2.3%	3.5%	1.8%	2.5%	-0.012
Acute respiratory infection2	5.2%	4.8%	5.0%	5.6%	6.0%	5.3%	0.020

ADULT HEALTH ^{1,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
1996 ¹							
Obesity among non-pregnant women	2.8%	4.3%	7.3%	5.8%	7.3%	5.6%	0.164***

INEQUALITIES IN RISKY BEHAVIOR

RISK FACTORS ^{1,2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2006 ²							
Concurrent partnerships	0.0%	0.2%	0.0%	0.2%	2.0%	0.5%	0.699***

INEQUALITIES IN HEALTH CARE UTILIZATION

MATERNAL AND CHILD HEALTH INTERVENTIONS ^{1,2}	Q1	Q2	Q3	Q4	Q5	Total	CI
1996 ¹							
Full immunization	83.0%	76.5%	82.4%	77.2%	75.7%	79.6%	-0.019
Skilled antenatal care (4+ visits)	81.6%	85.4%	84.5%	88.0%	85.1%	84.7%	0.015*
Skilled birth attendance	91.2%	100.0%	99.0%	99.3%	100.0%	97.4%	0.019***
2006 ²							
Contraceptive prevalence among women	45.0%	43.5%	43.5%	42.1%	40.3%	42.8%	-0.020***

ADULT PREVENTIVE CARE ^{2,3}	Q1	Q2	Q3	Q4	Q5	Total	CI
2006 ²							
Voluntary counseling and testing for HIV	90.9%	89.2%	91.8%	93.1%	94.3%	92.2%	0.010***



Note:

The Health Equity and Financial Protection datasheets use a standardized selection of indicators (see Measurement of Indicators for full list). When (1) data sources are not available or (2) indicator-specific sample size is less than 250 per quintile for mortality indicators or less than 25 per quintile for all others, indicators are not reported for the country under analysis.

For analysis of inequalities using WHS, DHS and MICS, quintile ranking is based on an asset index. For all other analyses, ranking is based on household consumption. Q = quintile (where quintile 1 is the poorest)

CI = concentration index; ranges between -1 and 1; negative sign indicates that the health outcome takes higher values among the poor

* Significant at 10%, **Significant at 5%, ***Significant at 1%.

Data sources:

1=1996 Uzbekistan Demographic and Health Survey, 2=2006 Uzbekistan Multiple Indicator Cluster Survey, 3=n/a World Health Survey.

Recommended citation: World Bank. 2012. Health Equity and Financial Protection Datasheet - Uzbekistan. Washington, D.C.: World Bank.

For more information and the latest versions of the Health Equity and Financial Protection reports and datasheets, see: www.worldbank.org/povertyandhealth.

Photo credit: Curt Carnemark, 1994

INTERPRETATION OF RESULTS

INEQUALITIES IN HEALTH OUTCOMES, RISKY BEHAVIOR AND HEALTH CARE UTILIZATION

The tables in this section show how health outcomes, risky behaviors and health care utilization vary across asset (wealth) quintiles and periods. The quintiles are based on an asset index constructed using principal components analysis. The tables show the mean values of the indicator for each quintile, as well as for the sample as a whole. Also shown are the concentration indices which capture the direction and degree of inequality. A negative value indicates that the variable (e.g. stunting or skilled birth attendance) is more concentrated among the poor, while a positive value indicates that the variable is concentrated among the better off. The larger the index in absolute size, the more inequality there is. The statistical significance of the concentration index is also shown, at 1% (***) , 5% (**) and 10% (*) significance levels. For example, if stunting has a concentration index of -0.121***, then stunting is significantly concentrated among the poor.

BENEFIT-INCIDENCE ANALYSIS

Benefit-incidence analysis (BIA) shows whether, and by how much, government health expenditure disproportionately benefits the poor. There are three tables showing, respectively, the distribution of service utilization across consumption quintiles for different types of care, the distribution of user fees, and the distribution of the estimated subsidies. All tables also show the concentration indices which capture the direction and degree of inequality. A negative value indicates that the variable (i.e. utilization, fees or subsidies) is more concentrated among the poor, while a positive value indicates that the variable is concentrated among the better off. The larger the index in absolute size, the greater is the inequality. For example, if the concentration index of subsidies to hospitals is positive, the non-poor benefit more than the poor from government spending on hospital services.

The distribution of subsidies depends on the assumptions made to allocate subsidies to households. Under the constant unit cost assumption, each unit of utilization is assumed to cost the same and is equal to total costs incurred in delivering this type of service (i.e. subsidies plus user fees) divided by the number of units of utilization. Under the constant unit subsidy assumption, the unit subsidy is assumed to be constant, equal to total subsidies for the service in question divided by the number of units of utilization of that service. Under the proportional cost assumption, higher fees are indicative of a more costly type of care; specifically, it is assumed that unit costs and fees are proportional to one another. If the concentration index is negative, then the subsidy to the particular level of care is pro-poor and if the concentration index is positive, then the subsidy is pro-rich. The column labeled "share" shows the distribution of the total subsidy across different levels of care.

FINANCIAL PROTECTION: CATASTROPHIC AND IMPOVERISHING EXPENDITURE

Measures of financial protection relate out-of-pocket spending to a threshold. One approach is to classify spending as 'catastrophic' if it exceeds a certain fraction of household income or consumption or nonfood consumption. Catastrophic payments are defined as health care payments in excess of a predetermined percentage (i.e. 5% to 40%) of their total household spending or nonfood spending. The first line of the first table shows the catastrophic payment "headcount", i.e. the proportion of households with a health payment budget share greater than the given threshold. For example, if the "headcount" figure given in the last column of the first table is 6%, then 6% of households spend more than 40% of their pre-payment income on health payments. The concentration indices in the second line of each table show whether there is a greater tendency for the better off to have out-of-pocket spending in excess of the payment threshold (in which case it takes on a positive value), or whether the poor are more likely to have out-of-pocket spending exceeding the threshold (in which case it takes on a negative value).

Another approach is to classify health spending as 'impoverishing' if it is sufficiently large to make the household cross the poverty line, i.e. the household would not have been poor had it been able to use for general consumption the money it was forced to spend on health care. The extent of impoverishment due to health care expenditure is measured by comparing the extent of poverty computed using household consumption gross and net of out-of-pocket health spending. The table shows three measures of poverty. The first line of the table shows the percentage of the population living below the poverty line, i.e. the poverty "headcount". The second line shows the population's average shortfall from the poverty line, i.e. the "normalized poverty gap"; the normalization is useful when making comparisons across countries with different poverty lines and currency units. Finally, the last line shows the average shortfall from the poverty line, among those who are poor, i.e. the normalized mean positive poverty gap. The last column shows the percentage increase in poverty, the percentage increase in the average shortfall from the poverty line and the percentage increase in the average shortfall from the poverty line among the poor due to out-of-pocket health spending, respectively.

PROGRESSIVITY OF HEALTH FINANCING

The table in this section reports whether overall health financing, as well as the individual sources of finance, is regressive (i.e. a poor household contributes a larger share of its resources than a rich one), progressive (i.e. a poor household contributes a smaller share of its resources than a rich one) or proportional. The 1st through 5th columns show the distribution of consumption and different sources of health care financing. The 6th column shows the summary measures of inequality; in the case of consumption, this is the Gini coefficient and in the case of other sources of financing it is the concentration index. In the 7th column, the Kakwani index (defined as the concentration index less the Gini coefficient) takes on a positive value, then payments are more concentrated among the better off than consumption, and is a sign that payments are progressive. If the Kakwani index is negative, then payments are regressive. The last column shows the contribution of each financing source to total health care financing (obtained from National Health Accounts data).

FOR MORE GUIDANCE ON INTERPRETATION OF RESULTS, SEE:

O'Donnell, O., E. van Doorslaer, A. Wagstaff and M. Lindelow. (2008). Analyzing health equity using household survey data: a guide to techniques and their implementation. Washington, D.C.: World Bank.

Wagstaff, A., M. Bilger, Z. Sajaia and M. Lokshin. (2011). Health equity and financial protection: streamlined analysis with ADePT software. Washington, D.C.: World Bank.

MEASUREMENT OF INDICATORS

INDICATOR	MEASUREMENT	DATA
CHILD HEALTH		
Infant mortality rate	Number of deaths among children under 12 months of age per 1,000 live births (Note: mortality rate calculated using the true cohort life table approach; the DHS reports use the synthetic cohort life table approach)	DHS
Under-five mortality rate	Number of deaths among children under 5 years of age per 1,000 live births (Note: mortality rate calculated using the true cohort life table approach; the DHS reports use the synthetic cohort life table approach)	DHS
Stunting	% of children with a height-for-age z-score <-2 standard deviations from the reference median (Note: z-score calculated using WHO 2006 Child Growth Standards)	DHS, MICS
Underweight	% of children with a weight-for-age z-score <-2 standard deviations from the reference median (Note: z-score calculated using WHO 2006 Child Growth Standards)	DHS, MICS
Diarrhea	% of children with diarrhea (past two weeks)	DHS, MICS
Diarrhea	% of children with diarrhea (past two weeks; youngest child)	WHS
Acute respiratory infection	% of children with an episode of coughing and rapid breathing (past two weeks)	DHS, MICS
Acute respiratory infection	% of children with an episode of coughing and rapid breathing (past two weeks; youngest child)	WHS
Fever	% of children with fever (past two weeks)	DHS, MICS
Fever	% of children with fever (past two weeks; youngest child)	WHS
Malaria	% of children with an episode of malaria (past year; youngest child)	WHS
ADULT HEALTH		
Tuberculosis	% of adults who reported tuberculosis symptoms (past year)	WHS
Obesity among non-pregnant women	% of women aged 15 to 49 with a BMI above 30	DHS
Obesity among all women	% of women aged 18 to 49 with a BMI above 30	WHS
Road traffic accident	% of adults involved in a road traffic accident with bodily injury (past year)	WHS
Non-road traffic accident	% of adults who suffered bodily injury that limited everyday activities, due to a fall, burn, poisoning, submersion in water, or by an act of violence (past year)	WHS
Angina	% of adults ever diagnosed with angina or angina pectoris	WHS
Arthritis	% of adults ever diagnosed with arthritis	WHS
Asthma	% of adults ever diagnosed with asthma	WHS
Depression	% of adults ever diagnosed with depression	WHS
Diabetes	% of adults ever diagnosed with diabetes	WHS
Difficulty with work and household activities	% of adults who have severe or extreme difficulties with work or household activities (past 30 days) (Note: This indicator was created from an ordinal variable with five categories)	WHS
Poor self-assessed health status	% of adults who rate own health as bad or very bad (Note: This indicator was created from an ordinal variable with five categories)	WHS
HIV Positive	Percentage of adults aged 15 to 49 whose blood tests are positive for HIV 1 or HIV 2.	DHS
RISK FACTORS		
Smoking (all)	% of adults who smoke any tobacco products such as cigarettes, cigars or pipes	WHS
Smoking (women)	% of women aged 15 to 49 who smoke cigarettes, pipe or other tobacco	DHS
Smoking (women)	% of women aged 18 to 49 who smoke cigarettes, pipe or other tobacco	WHS
Insufficient intake of fruit and vegetables	% of adults who have insufficient intake of fruit/vegetables (less than 5 servings)	WHS
Insufficient physical activity	% of adults who spend < 150 minutes on walking/ moderate activity/vigorous activity (past week)	WHS
Drinking	% of adults who consume ≥5 standard drinks on at least one day (past week)	WHS
Concurrent partnerships	% of women aged 15 to 49 who had sexual intercourse with more than one partner (past year)	DHS, MICS
Concurrent partnerships	% of women aged 18 to 49 who had sexual intercourse with more than one partner (past year)	WHS
Condom usage (more than one partner)	% of women aged 15 to 49 who had more than one partner in the past year and used a condom during last sexual intercourse	DHS, MICS
Condom usage (more than one partner)	% of women aged 18 to 49 who had more than one partner in the past year and used a condom during last sexual intercourse	WHS
Mosquito net use by children	% of children who slept under an (ever) insecticide treated bed net (ITN) (past night)	DHS, MICS
Mosquito net use by pregnant women	% of pregnant women aged 15 to 49 who slept under an (ever) insecticide treated bed net (ITN) (past night)	DHS
MATERNAL AND CHILD HEALTH INTERVENTIONS		
Full immunization	% of children aged 12-23 months who received BCG, measles, and three doses of polio and DPT, either verified by card or by recall of respondent	DHS, MICS
Treatment of diarrhea	% of children with diarrhea given oral rehydration salts (ORS) or home-made solution	DHS, MICS
Medical treatment of ARI	% of children with a cough and rapid breathing who sought medical treatment for acute respiratory infection (past 2 weeks)	DHS, MICS
Skilled antenatal care (4+ visits)	% of mothers aged 15 to 49 who received at least 4 antenatal care visits from any skilled personnel (doctor, nurse/midwife, auxiliary midwife, feldsher, family nurse, trained birth attendant)	DHS
Skilled birth attendance	% of mothers aged 15 to 49 that were attended by any skilled personnel at child's birth	DHS
Contraceptive prevalence	% of women aged 15 to 49 who currently use a modern method of contraception	DHS, MICS
ADULT PREVENTIVE CARE		
TB screening	% of adults who were tested for tuberculosis (past year)	WHS
Voluntary Counseling and Testing for HIV	% of women aged 18 to 49 who were tested for HIV and were told the results of the test	WHS, MICS
Cervical cancer screening	% of women aged 18 to 69 who received a pap smear during last pelvic examination (past 3 years)	WHS
Breast cancer screening	% of women aged 40 to 69 who received a mammogram (past 3 years)	WHS
ADULT CURATIVE CARE		
Inpatient or outpatient (12 months)	% of adults who used any inpatient or outpatient health care (past year)	WHS
Inpatient (12 months)	% of adults who used any inpatient health care (past year)	WHS
Inpatient (5 years)	% of adults who used any inpatient health care (past 5 years)	WHS
Outpatient (12 months)	% of adults who used any outpatient health care (past year; conditional on having not used any inpatient care past 5 years)	WHS

Note: Unless otherwise noted, all children are under the age of 5 and all adults are aged 18 and older

ABOUT THE HEALTH EQUITY AND FINANCIAL PROTECTION DATASHEETS

The Health Equity and Financial Protection datasheets provide a picture of equity and financial protection in the health sectors of low- and middle-income countries. Topics covered include: inequalities in health outcomes, health behavior and health care utilization; benefit incidence analysis; financial protection; and the progressivity of health care financing. Data are drawn from the Demographic and Health Surveys, World Health Surveys, Multiple Indicator Cluster Surveys, Living Standards and Measurement Surveys, as well as other household surveys, and use a common set of health indicators for all countries in the series. All analyses are conducted using the health modules of the ADePT software. Also available are Health Equity and Financial Protection country reports.

The most recent versions of the Health Equity and Financial Protection reports and datasheets can be downloaded at www.worldbank.org/povertyandhealth.

