

ADB Activities in Health-related Areas in the PRC (January 2005)

I. Communicable Diseases

TA 4118-PRC: Combating SARS in the Western Region

ADB has been working in close cooperation with national and international partners under technical assistance (TA) to the People's Republic of China (PRC) for Combating SARS in the Western Region. Executed by the Ministry of Health Foreign Loan Office (MOH-FLO), TA support has flexibly responded to evolving threats and opportunities for collaboration, addressing the immediate threat posed by SARS and other infectious diseases while building critical, longer-term public health system capacities, particularly in rural areas. Assistance to the target Western Region provinces/autonomous regions of Ningxia, Qinghai, Xinjiang, and Yunnan has spanned areas including provincial planning and emergency response capabilities, epidemiological surveillance and other core technical competencies of local health staff, and health education for the public.

The TA has involved effective, if often informal, collaboration with international agencies, namely:

- the World Health Organization (WHO) and China Office of the United States Center for Disease Control Global AIDS Program, which have provided technical guidance in a range of initiatives aimed at improving disease response capacities among staff of centers for disease prevention and control at provincial to county levels, as well as township-level hospitals;
- The United Nations Children's Fund (UNICEF), collaborating in development of school-based information, education, and communication approaches to improve health awareness and self-protection knowledge at the grassroots level.

TA 4142-PRC: Preventing Hiv/Aids On Road Projects In Yunnan Province

Supported by grant financing by the U.K. Department for International Development (DFID), this project will complement the Western Yunnan Roads Development Project Loan by preempting possible effects of road construction on regional HIV/AIDS transmission. It will also more broadly combat the spread of HIV/AIDS by supporting preventive public education and other measures. The TA's specific objective is to reduce the risk of transmission of HIV and sexually transmitted diseases among construction workers, commercial sex workers, truck drivers, and local resident communities, particularly poor and minority groups, who are especially vulnerable.

II. Other Relevant Activities and Partnerships

TA 3992-PRC: Strengthening National Public Nutrition Planning

To promote the long-term goal of improving national nutrition as a key to equitable socioeconomic development in the PRC, the principal objective of the TA is to integrate nutrition within long-term national development planning by assisting the National Development and Reform Commission (NDRC) to formulate sound strategies and action plans for national nutrition. In particular, the TA aims to incorporate key public nutrition-related content into the PRC's Eleventh Five-Year Plan for Social and Economic Development Plan (FYP). Under NDRC, the Public Nutrition and Development Center is charged with day-to-day implementation of the TA. The TA involves direct partnership with UNICEF, which is providing parallel financing

and administering a portion of ADB TA funds; this builds on sustained collaboration between ADB and UNICEF in supporting public nutrition improvement in the PRC and Asia through a series of 3 regional TAs. ADB and UNICEF have also promoted dialogue with WHO, the Food and Agriculture Organization (FAO), and other relevant organizations to ensure consistency and complementarity in efforts.

TA 4215-PRC: Safe Drinking Water and Sanitation for the Rural Poor

To support the long-term goal of providing safe and sustainable water supply and improving rural sanitation, health, and hygiene behavior, the TA aims to help the Government prepare pro-poor rural water supply and sanitation (RWSS) sector policies and a strategic investment framework for integrated RWSS. This work will focus on defining viable models for financing sustainable pro-poor RWSS systems, and related institutional capacity building. The key outputs will be preparation of (i) a medium-term RWSS sector plan and investment strategy for 2006-2010, for inclusion in the PRC's Eleventh FYP; and (ii) a longer-term outline strategy for 2006-2015 linked to realization of related Millennium Development Goal targets.

The TA will also support strategies and planning for information, education, and communication campaigns aimed at prevention of diseases associated with unsafe water and sanitation practices. To facilitate information flows and ensure complementarity and consistency across policy support and other interventions, ADB and DFID are co-organizing a periodic roundtable of international organizations active in PRC water supply and sanitation.

TA 4342-PRC: National Food Safety Regulatory and Strategic Framework

ADB is supporting the State Food and Drug Administration (SFDA, the TA Executing Agency) through TA to help formulate a National Food Safety Regulatory and Strategic Framework. WHO will provide principal technical expertise for implementation, mobilizing and coordinating a team of international and domestic consultants. The objective of the TA is to formulate and build consensus on a comprehensive framework covering food safety policies, laws and regulations, and standards, as well as cross-agency coordination to ensure their effective implementation. The TA design stresses dialogue, information sharing, and complementarity with efforts by other international and domestic organizations, including late-stage work by the Development Reform Center of the State Council, supported by the Canadian International Development Agency. This dialogue is facilitated by WHO's coordination of a periodic donor forum on PRC food safety.

Applied Research and Workshop on Rural Health Protection

ADB-funded research under TA 3607-PRC: Policy Support for Social Security Reform under Tenth Five-Year Plan generated a series of recommendations for a rural health protection system, including (i) stabilizing and legalizing funding sources; (ii) augmenting risk pooling; (iii) strengthening competition and correcting incentives within service provision; (iv) expanding community participation and control; and (v) shifting and enhancing the role of Government, focusing on policy guidance, technical assistance, and organizational structure. Many of these were influential in helping to shape ongoing experiments in rural health provision and work towards a new rural cooperative medical system (RCMS). Building on this work, ADB and MOH-FLO are planning a small-scale research study and forum on RCMS in Spring 2005, under an ongoing multi-sector TA on supporting policy reform.