

Uzbekistan is a gateway to a market of over 300 million people toward CIS countries, with reduced transport costs, due to its geographical centrality, as regards exports from Europe.

At the heart of Central Asia, Uzbekistan plays a key role in both the economic development and the security of the region and is thus an important partner country for Europe and other world countries in terms of development cooperation.

A good industrial structure (automotive, hydrocarbons, electronics, chemicals, pharmaceuticals, food) placing strong emphasis on modernization and acquisition of high technology places Uzbekistan among the CIS countries with the highest market potentials. However, competition is very tough, especially with China.

Market of 35 million people, by far the most populous country in Central Asia, with strong rate of population growth. Much is under 35 years old, leading to higher propensity to consume. The middle class constitutes an important segment of the population with good entrepreneurial vitality.

Uzbekistan's Ambitious Reforms



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Reading time

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After a long period of standstill, Uzbekistan's President, Shavkat Mirziyoyev, elected in 2016, has embarked on an ambitious course of reform aimed at turning the country into a democratic market econo-

my and is putting a focus on regional and international cooperation. Looking to the future, such an evolving country, recording discrete rates of economic growth, could play an important role for international trade.

Population	35.7 million
Government	Presidential Republic (with most important political powers in the hands of the president)
Language	Uzbek official language; Russian remains a vehicular language
Religion	Islam (96.5%)

	2020	2023 est.	2024 est.
GDP per capita at current prices (US\$)	1,796	2,486	2,600
Unemployment rate (%)	7.5	6.4	6.1
Export of goods & services (% of GDP)		30.4	
Import of goods & services (% of GDP)		43.5	

Uzbekistan is a landlocked country with a long history of protectionism and state interventionism in all economic sectors that have, for decades, slowed down economic growth and isolated the country's productive system from international demand. **Although its economic-commercial system remains conditioned by pervasive control by the authorities on every type of activity, mainly aimed at strengthening national production, President Mirziyoyev's ambitious reformist agenda includes a substantial opening towards foreign countries.** The aims of his "Development strategy for a new Uzbekistan 2022-2026" include increasing the effectiveness of the administration, strengthening the rule of law and developing a free civil society, developing the private sector, stimulating domestic and, above all, foreign investments, and improving the social protection system. Aware of the country's imperfect record, the government has made the fight against corruption and respect for the rule of law one of the reform's cornerstones.

In its foreign policy, Uzbekistan is committed to neutrality and non-alliance. Its heavy economic dependence on Russia makes it difficult for Uzbekistan to take a clear stance on Russia's war of aggression against Ukraine. The country is working to

expand Central-Asian cooperation and is scaling up its activities in regional and international organizations. In July 2022, the European Union and Uzbekistan concluded negotiations on an Enhanced Partnership and Cooperation Agreement which includes new areas of cooperation and significantly improves the regulatory framework for trade and economic relations.

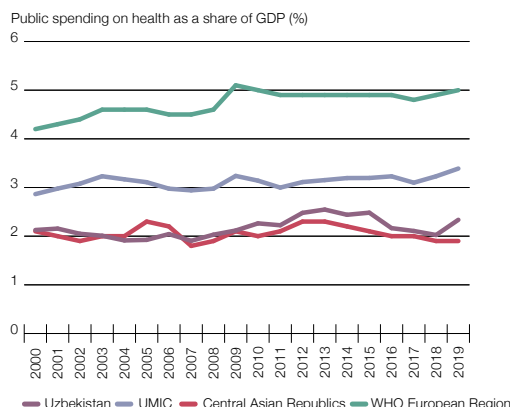
Not excessively affected by international recession of recent years, the country, according to official figures that need, however, to be considered cautiously, has recorded a constant growth rate of around 7-8% (only interrupted by the COVID-19 health crisis in 2020).

Healthcare - Just as most former Soviet Union countries, Uzbekistan's health sector has suffered since the loss of the former Soviet Union government's subsidies and support; the quality of its healthcare declined and emigration deprived the health system of many practitioners. Since then, the country has rolled out several key health schemes to enhance productivity and simultaneously ensure proper accessibility. **Furthermore, in recent years, it has embarked on an ambitious process to modernize and expand its health system and make progress towards universal health coverage.** These developments have laid a

robust foundation for future changes and have increased capacity to develop a more efficient and responsive national health system. **Healthcare provision is primarily public, with a basic benefits package paid for and provided by the state and officially free of charge to all citizens but, for most of the population, many health services (including many primary, secondary, and tertiary services) fall outside the scope of this package.** Shortfalls for health needs not met by state-funded services are usually paid out-of-pocket by individuals (especially the chronically ill), with consequences for financial protection and access to services. In the last several years, government spending on health increased quite significantly (with a goal to reach 5% of GDP, from current 3.1%), but so did out-of-pocket expenditure, now accounting for over half of health spending.

Having been an extremely centralized system under the former Soviet Union, Uzbekistan has gradually been introducing elements of decentralization to regional and district levels, especially on administrative issues. State health services are funded through national taxation, and health workers in the public sector are salaried employees. **Comprehensive health service delivery reforms are currently under way, following the "Concept on health devel-**

Public spending on health as a percentage of GDP is higher than in Central Asia overall



Notes: GDP: gross domestic product; UMIC: upper middle-income countries in the WHO European Region; averages are unweighted.

Source: European Observatory on Health Systems and Policies, WHO Europe, Susannah Robinson. Reference Numbers ISBN: 978 92 890 5922 0

opment of the Republic of Uzbekistan 2019–2025”, adopted in 2018, with plans to revise the package of services and medicines, including a presidential resolution establishing mandatory health insurance. This concept is being put into practice, since 2021, through a pilot project in *Syrdarya oblast* (region), with the intention to scale up these reforms to the entire country by 2025. The role of the private sector has expanded in recent years, with an ongoing process of transfer from public to private and public-private partnerships, also by attracting foreign investments, to increase the quality and coverage of services.

Oral Health - Dentistry in Uzbekistan has seen advancements in recent years, but access to quality dental care, affordability of treatments, regulation of practices, and public awareness about oral health are all areas that require attention and improvement. **With its diverse population and geographical spread, the country**

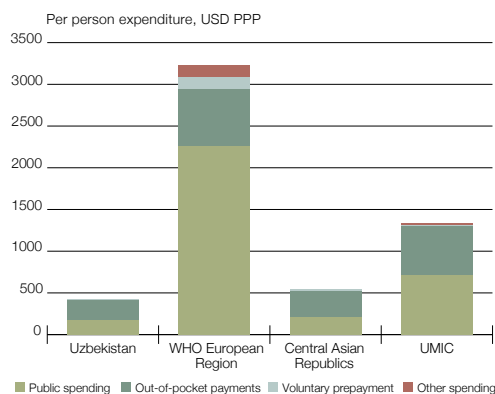
encounters challenges in providing equal access to dental services, especially in rural areas where shortages of dental professionals are widespread, also many people living in remote regions have no access to basic dental services, leading to a high prevalence of dental diseases and oral health problems. Furthermore, many Uzbeks neglect routine check-ups and oral hygiene practices and seek dental assistance only when problems become severe. While public dental services are available, the private sector often provides more advanced and specialized treatments, however, dental care affordability remains a concern for many individuals. Additionally, there is a need for greater regulation and oversight of dental practices in Uzbekistan. Currently, there are concerns about the quality and safety of some dental procedures, as well as the ethical conduct of some practitioners. Strengthening regulations and enforcing standards of care can help improve the overall quality of dental services in the country.

The Republic of Uzbekistan is administratively divided into 12 regions. The main therapeutic and preventive, organizational, methodological, and advisory center of the dental service is the Republican Dental Polyclinic, in Tashkent, the capital city of the Republic of Uzbekistan. Dental care is provided to residents of Tashkent in 3 dental clinics for adults and one children’s dental clinic, in addition there is a dental department at one of the city hospitals, a dental office at a student polyclinic and 28 dental offices in a private healthcare system.

Dental care is also provided in dental departments at the Republican Clinical Hospital and the hospital for military personnel, dental offices at the Republican Children’s Hospital. The Ministry of Health of the Republic of Uzbekistan employs 241 dental specialists, including 46 orthopedists, 3 orthodontists, 68 therapists, 11 surgeons, 25 dentists, 88 dental technicians and 159 nurses. The provision of medical personnel per 10 000 of the population in 2014 was: -by districts, 1.82

-by city Tashkent, 3.2 ●

Health expenditure per capita is slightly below the Central Asian average



Notes: 2019 data. PPP: purchasing power parity; UMIC: upper middle-income countries in the WHO European Region; averages are unweighted.

Source: European Observatory on Health Systems and Policies, WHO Europe, Susannah Robinson. Reference Numbers ISBN: 978 92 890 5922 0

Prevalence of Oral Diseases, 2019

Prevalence of untreated caries of deciduous teeth in children 1-9 years (%)	Prevalence of untreated caries of permanent teeth in people 5+ years (%)	Prevalence of severe periodontal disease in people 15+ years (%)	Prevalence of edentulism in people 20+ years (%)
47.7	34.1	12.7	8.6

Source: World Health Organization, WHO 2022 “Oral Health Country Profile” WHO/UCN/NCD/MND/UZB/2022.1.

Economic Impact Related to Treatment and Prevention of Oral Diseases, 2019

Total expenditure on dental healthcare in million (US\$)	218
Per capita expenditure on dental healthcare (US\$)	6.6
Per capita current health expenditure in PPP, int\$ (2019)	418
Total productivity losses due to 5 oral diseases in million (US\$)	167

Notes: Total expenditure on dental healthcare in million (US \$): Estimate of total annual national expenditure on dental healthcare in outpatient dental care (public and private) in 2019. Per capita expenditure on dental healthcare (US \$): Estimate of the annual national per capita expenditure on dental healthcare for outpatient dental care (public and private) in 2019. Total productivity losses due to 5 oral diseases in million (US \$): Estimate of total productivity losses in 2019 resulting from combined impact of 5 untreated oral diseases including caries in deciduous and permanent teeth, severe periodontal disease, edentulism, and other oral conditions as defined by GBD. (Data source: Jevdjevic & Listl 2022.). Taken from: World Health Organization, WHO 2022 “Oral Health Country Profile” WHO/UCN/NCD/MND/UZB/2022.1.

Policies, Measures and Resources, 2021

Implementation of tax on sugar-sweetened beverages (SSB)	no
Existence of a national oral health policy/strategy/action plan (operational/drafting stage)	no
Presence of dedicated staff for oral health working on NCDs at the MoH	yes

Notes: Presence of dedicated staff for oral health working on NCDs at the MoH: Presence of technical/professional staff in the unit/branch/department working on NCDs in the Ministry of Health dedicating a significant portion of their time to oral health. (Data source: WHO NCD Country Capacity Survey, NCD CCS; 2021.).

Oral Health Workforce

	Total Number	Per 10,000 population (2014-2019)
Dentists, 2014	4,520	1.5
Technicians, 1996	2,106	

World Health Organization, WHO 2022 “Oral Health Country Profile” WHO/UCN/NCD/MND/UZB/2022.1/Malmö University.

Availability of Procedures for Detecting, Managing and Treating Oral Diseases in the Primary Care Facilities in the Public Health Sector, 2021

Oral health screening for early detection of oral diseases	unavailable
Urgent treatment for providing emergency oral care & pain relief	available
Basic restorative dental procedures to treat existing dental decay	available

(Data source: WHO NCD Country Capacity Survey, NCD CCS; 2021.). Taken from: World Health Organization, WHO 2022 “Oral Health Country Profile” WHO/UCN/NCD/MND/UZB/2022.1.

Outlook on Uzbekistan, main sources:

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