



Overview: Cooperation on health continues to be a positive area of collaboration between the U.S. and Russia. Under the Bilateral Presidential Commission (BPC) established in July 2009 by Presidents Obama and Medvedev, a Health Working Group was created to expand collaboration on shared priorities such as maternal and child health (MCH) and healthy lifestyles and other issues. Improving the health of the Russian population is a priority for the Government of Russia (GOR), which launched the National Priority Project in 2006 to improve the overall performance of the health system and help address the demographic decline. Death rates, particularly for men, far surpass those of other countries in Europe and the U.S. The rapidly declining population and skewed dependency ratio places a severe burden on Russia's workers. Non-communicable diseases and injuries are major causes of mortality. Alarming increases in cases of HIV infection and drug-resistant tuberculosis further threaten the population's health. USAID and its Russian partners are building a foundation for sustainable development, introducing models and pilots which can be replicated. USAID-supported activities help strengthen the health and social welfare systems by training practitioners in international best practices, management and policy skills, developing interventions and adapting guidelines appropriate for Russia. USAID focuses on improving access to family planning, promoting women's and children's health, controlling infectious diseases such as HIV and TB, and promoting individual responsibility to health. The portfolio has transitioned to a stronger focus on institutionalizing best practices in centers of excellence at the federal and federal district level to disseminate lessons learned to surrounding regions.

Health Statistics

Population: 141,914,509 (January 2010 est. Rosstat)

GDP Per Capita (PPP): \$15,100 (2009 est. CIA)

Population below poverty line: 10.3% (2009 est. Rosstat)

Life Expectancy at birth: 68 years (2008 est. Rosstat)

Male: 62 years (2008 est. Rosstat)

Female: 74 years (2008 est. Rosstat)

Adult Mortality Rate: 273 per 1000 (2008), WHO, 2010)

Maternal Mortality: 24/100,000 live births (2000-2009 WHO)

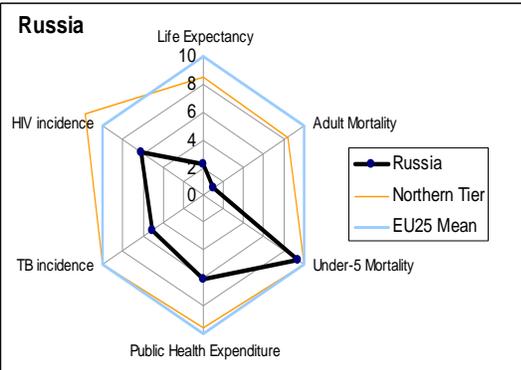
Under-5 Mortality Rate: 11/1000 live births (2008 UNICEF)

Total Health Expenditures Per Capita, PPP int. \$797 (2007 in the WHO 2010 Report)

Health and Social Expenditures: 5.4% of GDP (2007 in the WHO 2010 Report)

Estimated Number of HIV/AIDS Cases: 740,000 (revised UNAIDS estimate, 2009)

Estimated Tuberculosis Incidence: 110/100,000 (2007 in the WHO 2010 Report)



Northern Tier refers to the Czech Republic, Hungary, Poland, Slovakia, and Slovenia.

Health Vulnerability Highlights

From a health perspective, Russia is among the **most vulnerable** countries in Europe and Eurasia. Russia has one of the highest levels of **adult mortality** of all E&E countries (273 per 1000 adult population). **Chronic** diseases such as cardiovascular disease (57%), cancer (14%) and respiratory diseases (4%) account for significant shares of overall mortality in 2008. In Russia, over 1 million people die each year from cardiovascular diseases, 30 million have high blood pressure, and 5 million suffer from chronic cardiovascular diseases. Contributing factors include 40 million **smokers** in Russia (prevalence of smoking any tobacco products in adults is 70% and 28% in males and females respectively (WHO estimates) and an officially registered 2.5 million **alcoholics** (80% men, 20% female). In addition, **injuries** represent a substantial share in overall mortality (12%).

Tuberculosis (TB) is the leading cause of death among infectious diseases (1.4% death from TB out of 1.6% of deaths from infectious diseases). Russia is ranked 13th among the 22 high burden countries in 2008 according to

the most recent WHO estimates. A particular concern is the level of multi-drug resistant TB (MDR-TB), including extensively drug resistant TB (XDR-TB), which render the most powerful antibiotics ineffective. Russia has an estimated 43,000 cases of MDR-TB, the third largest globally in 2008 (after India and China).

Russia continues to experience a declining population due to a low replacement rate and high adult mortality which poses threats to economic stability and to Russia's role as a global partner. In an attempt to increase the birth rate, the Russian government implemented a birth incentive program in 2007 that offers payments to women for having an additional child. It is unclear whether this program has been effective and it may contribute to the already high levels of child abandonment through increased deliveries among high risk women. High abortion rates are another concern and although abortion rates declined from in the past decade, the rates (38/1,000 women of reproductive age) remain among the worlds highest and play a significant role in maternal mortality and morbidity and overall fertility rates. **Family planning** programs integrated into maternal and child health programs in Russia have experienced a level of success in the past 15 years however much remains to be done. Issues of inequality, access, and **child abandonment** are also very critical, particularly as the GOR has prioritized moving children out of institutions into family-based care.

In 2006, more than two-thirds of all reported new **HIV** infections in the E&E region occurred in Russia. The epidemic continues to be concentrated primarily among injecting drug users (IDUs) but is increasingly spread to women, most of who are still estimated to be IDUs themselves or be sexual partners of IDUs. Over 55,000 HIV+ individuals are receiving antiretroviral therapy out of the 420,000 registered HIV/AIDS patients.

USAID Health Programs

Tuberculosis

Technical Support for Tuberculosis Control Activities (08/1999 - 09/2010) – This WHO grant supported TB control programs in Orel, and Vladimir Oblasts, and Chuvashiya Republic, as well as policy, advocacy and coordination activities at the federal level. The activity contributes to Russia's efforts to fight the increasing TB incidence and mortality rates by adapting and introducing WHO's Stop TB Strategy (DOTS and DOTS-Plus) in 3 target regions. WHO worked closely with 2 regions and the Federal TB Research Institutes to establish Centers of Excellence in Orel for MDR TB treatment and in Vladimir for Infection Control that serve as advanced training sites for practical TB experience for health professionals in surrounding regions. WHO technical assistance has also helped promote applications to the international Green Light Committee which approves work on MDR TB programs globally. *Implementer: WHO*

Tuberculosis Control and Social Support Activities (09/2001 – 09/2010) – This activity contributes to GOR TB Control efforts in 7 target regions: Belgorod, Pskov, Khabarovsk Kray, Khakassia, Adygeya, Jewish Autonomous, and Buryatia. The program fights TB morbidity and mortality by promoting the global DOTS principles (Directly Observed Short Therapy), including DOTS Plus (treatment of MDR TB patients) through trainings and seminars. IFRC, works through the local Russian Red Cross (RRC) on innovative out-reach services and a community involvement model promoting home visits and social support programs improving patient adherence as well as a pre and post release program for prisoners. *Implementer: International Federation of the Red Cross and Red Crescent Societies (IFRC)*

Infection Control Program (2009) - KNCV helped strengthen TB infection control efforts in IFRC pilot sites and worked collaboratively with the Vladimir Infection Control Center of Excellence to expand the dissemination of the internationally approached best practices in infection control. *Implementer: KNCV (Global Bureau Field Support)*

Targeted Technical Assistance and Operations Research in TB (10/2006 - 09/2010) – USAID supports the Centers for Disease Control and Prevention (CDC) to provide technical advice on TB control programs in 3 target regions with WHO. Priority areas include management of MDR TB, laboratory strengthening, infection control, and operational research on drug resistance and the effectiveness of second line drugs used for MDR TB. CDC was instrumental in assisting the Vladimir TB dispensary in becoming a Center of Excellence for Infection Control. Collaborating with national TB institutions, the CDC has contributed to modernizing TB diagnostic laboratories and is advancing research preventing the spread of MDR-TB. *Implementer: CDC (Global Bureau Field Support)*

Drug Quality (10/2007 - 09/2010) - The US Pharmacopeia, Inc. (USP) provides technical assistance in the area of prevention of antimicrobial resistance, training on drug use guidelines and improved drug quality control. The project is working with local drug manufacturing companies to improve manufacturing practices and promote GMP accreditation from WHO for second line drugs for MDR TB. *Implementer: US Pharmacopeia (Global Bureau Field Support)*

HIV/AIDS

PreventAIDS (10/2005 - 05/2010) Completed – PreventAIDS helped to strengthen the capacity of both governmental and non-governmental sectors to improve HIV prevention services, enhances collaboration, and develop models of HIV prevention and care to reach vulnerable populations (injection drug users and partners, sex workers and clients, and special at-risk youth aged 14-25) in order to prevent a generalized HIV/AIDS epidemic in selected regions. *Implementer: Population Services International (PSI)*

HIV Prevention for At-Risk Populations in Russia (04/2010 - 04/2015) – Building on the accomplishments of PreventAIDS in selected regions, the new activity will contribute to strengthening a sustained delivery of HIV prevention interventions for most-at-risk populations, primarily injecting drug users. The new project will have two major objectives: 1) consolidate a standard prevention approach for transmission related to injection drug use; 2) institutionalize a standardized approach to HIV prevention related to injection drug use. The new activity will include a federal and regional policy advocacy component and small grants for demonstration projects in selected regions. *Implementer: Population Services International (PSI)*

HIV/AIDS Treatment and Care Partnerships (09/2008 - 09/2011 HHS Twinning Project) – Through interventions jointly developed by the US-Russia partners, this program helped to create a replicable and integrated model of HIV/AIDS care and treatment for people living with HIV, including HIV-positive pregnant women among target populations in 2 regions of Russia: St Petersburg and Orenburg. . The program also contributed to strengthening continuous postgraduate education on HIV/AIDS for health and social care professionals by developing several curriculum on HIV/AIDS which were approved by the Ministry of Health and Social Development. *Implementer: American International Health Alliance (AIHA) [HHS, Twinning Program]*

Strategic Health Partnership Initiative Program (10/2007 - 10/2010) – The primary purpose of the program is to foster international partnership and gain shared experiences in confronting HIV/AIDS and TB. Russian laboratory experts participate in joint consultations with USG country teams in implementing a tiered, quality-assured laboratory system to support PEPFAR initiatives in third countries. This collaboration strengthens Russia's healthcare services by educating professionals on the magnitude of the HIV/AIDS and TB epidemics, improves respective training curricula at the Russian medical schools and helps advance Russia's integration into the international public-health community. *Implementer: American International Health Alliance*

HIV/AIDS Health Care Improvement Project (1/2004 - 2011) – The program focuses on scaling-up successful HIV treatment and care service models demonstrated in pilots during 2004-2006 in St. Petersburg and Orenburg. The objectives of the scale up include integration of VCT into the general health care system, decentralizing follow-up of HIV patients to local polyclinics, increasing coverage of HIV patients with basic care and support (including TB testing), and enrolling more patients in ART. These objectives are consistent with the GOR's National Priority Project on "Health". *Implementer: University Research Company (Global Bureau Field Support)*

Faith-Based HIV/AIDS Prevention and Care Program – (09/2007 - 10/2010) - This program aims to strengthen the capacity of the Russian Orthodox Church and other faiths significantly present in Russia in preventing the spread of the epidemic, reducing stigma and discrimination, and providing care and support to people living with HIV/AIDS and other affected population groups. *Implementer: United Nations Development Program*

HIV/AIDS Policy Advocacy against AIDS (10/2003 - 09/2010) – Completed - The objective of this project was to avert a wide-scale HIV/AIDS epidemic in Russia through the mobilization and active engagement of high-level public officials and business communities in addressing the country's HIV/AIDS epidemic. The implementer supported the activities of the Duma Parliamentary Working Group on HIV/AIDS and other socially significant

diseases. *Implementer: Global Business Coalition on HIV/AIDS, Tuberculosis and Malaria (GBC)*

Healthy Russia 2020 (09/2004 - 12/2011) – The Healthy Russia 2020 (HR2020) program addresses HIV prevention and care among substance abusers using modern concepts of counseling, referral, treatment, case management and social support with the involvement of NGOs. HR2020 has also developed a package of materials to foster healthy lifestyles among vulnerable youth, including topics such as prevention of smoking, alcohol and drug abuse, nutrition and exercise. The package has been approved by the Ministry of Health and Social Development and the Ministry of Education, and HR2020 is currently disseminating the package to several target regions through various channels. *Implementer: Johns Hopkins University*

Family Planning and Reproductive Health

Maternal and Child Health (MCH) Initiative (MCHI) (09/2006 - 12/2009) Completed – The MCHI was a comprehensive reproductive health (RH) and family-planning (FP) project which was designed to improve maternal and newborn healthcare through replicating successful models developed by USAID and other donors for RH, MCH, and prevention of mother to child transmission (PMTCT) of HIV/AIDS in 20 Russian regions. Activities included promoting client-centered family-planning services especially for postpartum and post-abortion clients, family-centered maternity care, essential care of newborns, exclusive breastfeeding and promotion of women's health. Improved birth outcomes and reduced maternal and infant mortality rates were reported for a majority of the target regions. *Implementer: Institute for Family Health*

Institutionalizing Best Practices in Maternal and Child Health (IBP-MCH) (09/2008 - 09/2011) – Building on the success of the MCHI, this project aims to build the capacity of selected federal MCH institutes to serve as centers of excellence to disseminate and promote sustainable approach for advancing best practices in MCH and RH to surrounding regions. The project is also building links between U.S. and Russian MCH/RH experts through a series of high-level exchanges which contribute to the BPC Health Working Group MCH sub-group. *Implementer: John Snow International*

Improving Care for Mothers and Mothers (10/2008 - 12/2010) – Building on the successes and models developed through prior USAID maternal and child health projects and dissemination of other successful international models, this project assists counterparts in 3 Russian oblasts in reducing rates of maternal and infant mortality and morbidity, and to reduce abortion rates through more appropriate use of family planning and modern contraceptive methods. Improvement teams at 22 health care facilities in the three project regions are working on improvements targeted toward 10 clinical goals in the area of reproductive health, obstetrics and pediatrics. The project is also building links between U.S. and Russian MCH/RH experts through a series of high-level exchanges which contribute to the BPC Health Working Group MCH sub-group. *Implementer: University Research Co. (Global Bureau Field Support)*

Child Welfare

Assistance to Russian Orphans (ARO) (09/2006 - 03/2010) Complete - The ARO project focus on issues relating to vulnerable children, orphans and reducing child abandonment. The project developed innovative services, policies and systems to prevent institutionalization of children, preserve families and strengthen family-based care for orphans. Working through national and local experts in 7 regions, ARO provided technical assistance to child welfare administrations and service providers, training for social workers and small grants to introduce and replicate interventions in early crisis identification, family preservation and reunification, early rehabilitation and community integration of disabled children and orphans, and family-based care. The project introduced a regional model of abandonment prevention based on a case management approach to service delivery. The program reached over 50,000 children and families through a network NGOs and governmental institution involved in child welfare reform. *Implementer: IREX in partnership with the Russian NGO National Foundation for Prevention of Cruelty to Children (NFPC).*

New Child Welfare Project (05/2010 - 04/2014) - In May 2010, USAID/Russia will launch a new 4-year child welfare project to support child welfare reform in Russia through the development of a toolkit which will define a minimum package of child welfare services with guidelines for their implementation and tools for regional strategies development, monitoring and evaluation. The project will also build the capacity of a few regional Centers of Excellence to serve as training sites for social workers and administrators from regions across Russia.

Implementer: (TBD)

Other Public Health Threats

Haemophilus Type B Infections Prevalence Study and Immunization in the Russian Far East (09/2006 - 02/2010) Completed – This activity assisted the Russian healthcare system by providing a compelling epidemiologic basis for the inclusion of Haemophilus Influenza Type B (Hib) vaccination in the national immunization calendar. The key objectives of the program are to investigate the incidence of Hib infections at selected sites in the Russia Far East; to implement a strategy of prevention of Hib infection in young children in Vladivostok through a pilot vaccination program using the Hib vaccine; and to create recommendations to amend the national immunization calendar. *Implementer: Vishnevskaya-Rostropovich Foundation.*

Non-communicable Diseases Prevention (2010) - Effective primary and secondary prevention programs for cardiovascular disease and other NCDs are necessary to prevent further illnesses and mortality. Promoting prevention and wellness has been chosen as one of the key health priorities under the Bilateral Presidential Commission (BPC) announced in July 2009. Building on the success of previous programs in the area of chronic disease prevention, FY10 funds will be used to launch a policy dialogue between US and Russian policy makers and expert exchanges. *Implementer: University Research Corporation (URC).*

Global Development Alliances (GDAs)

MCH - The Pskov Youth Reproductive Project (2010 - 2012) - Targets the improvement of health and well-being of women, children and youth with three main objectives: 1) reduction of abortion rates, unwanted pregnancies and sexually transmitted infections (including HIV); 2) improvement of reproductive health outcomes by reducing rates of unwanted pregnancies and by improving prenatal care; 3) improvement of parenting skills among young mothers. The project will be implemented in two sites in Pskov oblast: Pskov city and Velikiye Luki. *Implementer: TBD*

Child Welfare - Early Intervention Project (TBD) – This project in Nizhny Novgorod Oblast will work to establish the system of early developmental assistance in selected pilot baby homes for young disabled orphans aged 0-4 in Nizhny Novgorod region. The program will also include activities to reunify children with their birth families. *Implementer: TBD*

Child Welfare - Safe Childhood Project (04/2010 - 04/2012) - The two-year project GDA supported by the Gorbachev Foundation and USAID/Russia will create a high-level child welfare forum to engage representatives from the government, scientific and professional community in exchanging best practices and discussing challenges in child welfare. The project will facilitate information sharing and dissemination of child welfare best practices and policies, through an online forum, expert round-tables, and a Governors' Club to foster dialogue between policy makers and leaders in the field; and a national conference to bring together government representatives from the federal and regional levels, and leading child welfare experts. *Implementer: NFPCG/Gorbachev Foundation*

Child Welfare - Community Reintegration of Street and Neglected Children (07/2004 – 09/2010) – This new GDA project aims to develop a sustainable and replicable model of comprehensive short and long-term social and HIV prevention, care and support services for street children and youth in St. Petersburg to ensure their rehabilitation, improve their access to health, including HIV treatment, services and reduce the rates of HIV transition. The model includes outreach, drop-in centers, a shelter and halfway houses which focus on family reintegration, social adaptation and job training. *Implementer: TBD*

TB - Maximizing Corporate Engagement in Combating TB in Russia (04/2010 – 03/2012) - Private sector engagement in combating TB in Russia by (1) development of accessible sources of information on TB, including a public service announcement (PSA) campaign in the national and regional media, (2) development of educational materials to implement workplace TB awareness and education programs, (3) advocating TB related issues via State Duma Parliamentary Working Group on HIV/AIDS, TB and other socially significant diseases. *Implementer: TBD*