

PROTECTION AND PROMOTION OF HUMAN HEALTH - RUSSIA

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Summary

The article considers urgent problems of social policy dealing with different socioeconomic aspects of people's health protection during the period of market relation's development in Russia. It analyses advantages and disadvantages of the former Soviet public health system for the successful implementation of a present stage health care reform in Russia. Economic crisis after the disintegration of USSR has aggravated the ripened problems of financial maintenance of public health services, resulting in a reduction of essential volume and quality of the basic kinds of medical care. The sharp restriction of resources in public health demands search of the ways of their most effective and rational use in Russia. Inefficiency of macroeconomics creates negative tendencies in health and social well-being of the citizens, patient dissatisfaction, and is aggravated by a low level of expenditures on public health. Health promotion operates through the process of enabling individuals and communities to increase control over the determinants of health and thereby improve their health. Thus, the reforming and perfecting system of public health should be one of the priorities in political, economic and social developing of Russia during the transition to market economy. It is connected, on the one hand, to sharp increasing of the risk groups in the population requiring long and expensive methods of treatment and rehabilitation, on the other hand, with visible decline of availability, equality and equity of the health care system in environment of an excavation of social of economic crisis and generated instability of financing of public health. Healthy public policy in modern Russia should be based on intersectional co-operation, because individual institutions cannot solve the

majority of problems connected with improvement in people's health.

1. Introduction

One major task of social policy of the state is the maintenance of all essential conditions for preservation and improvement of the health of the population. Values of the health indicators of the population are reflected integrative to the degree of successful social and economic achievements of the country, and are major complexities on a way of modern reforms.

Economic crisis in Russia after the disintegration of the USSR has aggravated the ripened problems of financial maintenance of public health services, resulting in a reduction of essential volume, and quality of the basic kinds of medical care.

The sharp restriction of resources in public health demands a search of the ways of their most effective and rational use in Russia. Inefficiency of macroeconomics creates negative tendencies in health and social well-being of the citizens, patient dissatisfaction, and aggravates a low level of expenditures on public health. On the one hand, the number of groups of the population, for which the durable and expensive methods of treatment, and rehabilitation are necessary, is increased; on the other hand, availability, equality, and justice of a system of the medical and sanitary care for the majority of the Russians are reduced.

Thus, the reforming and perfecting system of public health should be one of the priorities in the political, economic, and social development of Russia during the transition to market economy. It causes a necessary realization of the wide list of measures on perfecting the system of public health services called to ensure of necessity of the population in medical help. In view of a difficult economic situation and growing inability of the state to provide medical help at the expense of tools of the budget in the beginning of the 1990s the Law "On health insurance of citizens in the Russian Federation" (28.06.91) was accepted. This law has put a beginning to the important stage in the development of public health services—creation and development of insurance medicine.

The increasing value of the creation of social policy in new economic conditions includes the integration of medical and social activity. Healthy public policy in modern Russia should be based on intersectional cooperation, because individual institutions cannot solve the majority of problems connected with improvements in people's health. The health care system carries important health promotion responsibilities, particularly through the potential leadership roles of health professionals. Current reforms of the national health care system should have a final goal of increased quality of medical and, primarily, preventive care for the population. The cooperation of the sectors of health and social services should be a key issue in removing and reducing risk factors of diseases, accidents, and social problems.

2. Health of the Population of Russia: Modern Problems and Tendencies

Now important criterion of development of company and state is the quality of the

population. In the twenty-first century the registration of this factor acquires all large value for revealing the urgent reasons of an inequality of conditions and standard of living, valuation of adequacy of social policy of the state to medical and social necessities of the citizens. It is known, that the crisis-afflicted socioeconomic situation aggravates negative effects on the tendency of public health, of the unfavorable factors of an environment and image of life, genetic factors, and, that especially important, is medical and organizational factors. The availability of close inter-relation between metrics of health of the population and social settings placed by results of numerous complex researches does not call any more doubts in the scientific world.

The complex socio economic living conditions for the majority of the population of Russia in the beginning of the 1990s have resulted to development of the extremely negative tendencies of health and social well being of the population on a background of a wide circulation of the phenomena of poverty, deprivation, and dis-adaptation. Thus, for Russia the search for new approaches to integrate medical and social activity in questions of protection of health of the citizens is extremely urgent. For want of it, for development of modern domestic technologies in rendering the medical and social help to the population the large value has the treatment of health given by the experts of WHO as “of a state full of physical, spiritual, and social well-being, and not just absence of illnesses and physical defects.”

First of all, it is necessary to mark, that the transients in political, economic, and social development of the country have resulted in the development of a system demographic crisis of the 1990s that was shown in violation of processes of reproduction of the population.

Total fertility rate declined from 2.19 in 1986 to 1.7 in 1990, 1.17 in 1999 (in comparison with 2.14–2.15 required for a simple reproduction of population). This index shows an average number of children that would be born alive to a hypothetical cohort of women if, throughout their reproductive period (15–49 years) age-specific fertility rates for the specified year remained unchanged. During the last years the birth rate was mainly declining (from 17.2 per 1000 in 1987 to 8.3 in 1999). As a whole for the last decade the birth rate was reduced almost twice. In 1997 the total amount of births was 1 214 689, the lowest level in modern Russian history.

The growth of the mortality rate, which has noticeably quickened in the beginning of the 1990s, badly affects the Russian Federation population dynamics. The amount of deaths per 1000 population was 10.5 in 1987, 11.2 in 1990, 12.2 in 1992, and 15.7 in 1994. During 1995–1998 years some lowering of a mortality of the population is marked. However and in a 1998 this index was still saved on a high level and has made 13.6 on 1000 population. 55% of cases are determined by the number of deaths from diseases of the circulatory system, in 15% from neoplasms and in 14% from accidents, poisonings, and traumas.

In comparison with 1990, in 1999 the number of the dead Russians of working age has increased by 1.4 times. While the level of mortality from diseases of the circulatory system, accidents, poisonings, and injuries, diseases of the digestive system, and diseases of the respiratory system has increased by 1.4–1.9 times, growth in the number

of the deceased from infectious and parasitic illnesses has increased by 2.6 times.

One of the most serious demographic problems of the Russian society is the super high mortality rate of the men of working age. For example, in 1999 the range in levels of mortality of the men and women from diseases of the circulatory system has increased 4.4 times, from accidents, poisonings, and injuries: 5.0 times, diseases of the respiratory system: 5.3 times, from infectious and parasitic diseases: 7.0 times, including from tuberculosis (all forms): 8.9 times (see Table 1).

Causes of death	1990			1999		
	Total population Males and females	Males	Females	Total population Males and females	Males	Females
Death from all causes	488.2	759.2	198.1	676.2	1058.8	274.5
Including:						
-Diseases of the circulatory system	137.2	220.6	47.9	188.2	301.5	69.2
-Accidents, poisonings and injuries	172.1	284.7	51.7	258.5	423.8	85.1
Of them from:						
-Occasional alcohol poisonings	15.6	25.9	4.7	27.4	43.8	10.1
-Suicides	33.9	56.4	9.8	50.0	85.9	12.3
-Homicides	21.4	33.6	8.4	35.6	55.1	15.1
-Diseases of the respiratory system	18.9	30.9	6.1	29.2	48.4	9.1
-Diseases of the digestive system	15.5	23.2	7.1	29.1	44.1	13.3
-Infectious and parasitic diseases	11.6	19.6	2.9	30.5	52.5	7.5
Of them from:						
-Tuberculosis (all types)	9.9	17.5	1.7	27.2	48.0	5.4

Sources: 1. The demographic Yearbook of Russia. State Committee of the Russian Federation on Statistics. Official publication. 1997, p. 412. [Демографический ежегодник России. Официальное издание. Госкомстат России. 1997. –с.412]

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Table 1. Death rates of population in working age (age (in years): males: 16-60; females: 16-55.) by main groups of causes. Russia 1990–1999. (Deaths per 100,000 populations in working age)

In the pattern of the working age population mortality the biggest portion is occupied by accidents, injuries, and poisonings; both among the men, and among the women.

The extremely high levels of mortality among the population in working age from suicides and murders, especially among the men (85.9 and 55.1 per 100 000 males accordingly) causes alarm. And, for the last years in Russia the problem of growth of number of death is staticized as a result of battle traumas and traumatism owing to the

terrorist acts.

In the second place among the reasons of mortality in a working age now are diseases of the circulatory system (up to 28.0% of all cases of death of the population in this age), in the third place—malignant neoplasms (13.4% of all cases of death). Thus, the only transferred three remaining reasons (per the last years in Russia) make about 80% of all cases of death in people of working age.

This situation led to stable natural population decline in Russia from November 1991. The population of the Russian Federation as on 1st January 2000 was 145 559 208. In 1992 natural diminution rate per 1000 persons was: 1.5, in 1999 - 6.4. One of the causes of such unfavorable changes is the continuing population aging process. By the beginning of 2000 the retirement age stratum amounted to 30 176 196 or 20.7% of the total population. Now per 1000 persons of the working age population there are 363 persons of the non-working age (the retired). It is necessary to mark, that, despite activation of migration processes of the population in the middle of the 1990s caused by the objective socioeconomic reasons, the lowering of a population of Russia, most likely, will proceed.

The demographic criterions of health are one of most statistically reliable and informative criterions. At the same time analysis of modern data about disease morbidity of the population is necessary for the complex characteristic of urgent problems of social policy in questions of health protection.

There are some paths of obtaining information about the disease morbidity of the population. Simultaneous address of the population behind a medical help in medical preventive establishments represents itself as the most widespread source of obtaining such items of information. In Russia for organization of authentic keeping of statistical records of data about a disease morbidity on calls of the population it is accepted to take into account the first visit of the doctor concerning the given disease. This visiting doctor registers, with the help of the statistical coupon, the specified diagnosis, in which the sign “+” is put, if the diagnosis of the disease is put for the first time.

Another important index is the indicator of prevalence of diseases (common morbidity), which characterizes a collection of all diseases, being available among the population for the first time detected as in a given year, and the previous years, but concerning which the patient again has addressed in a given year (all statistical coupons of the specified diagnoses).

It is necessary to admit, that the present poor state of the health care system, growing poverty, and deprivation are forming an essentially new stereotype of relations between patient and doctor: in many cases a patient prefers to be rather uninformed about his health problems, then to know about them and have no hope for cure. This determines low medical activity of the population and partly explains the tendency to a decline in taking medical advice in recent years.

Such a situation is caused by a sequence of the objective and subjective factors, among which are: growth of a dissatisfaction of the patients by quality of treatment, creation of

mistrust to the doctor and to all systems of available medical establishments. Besides strengthening tendencies of the citizens to mercantile account, and pragmatism, the achievement of material well being at any cost is characteristic for modern Russian society. It has resulted that among vital major values health in consciousness of the Russians over the last years has taken only 7–8 places, conceding preferences in achievement of a highly paid operation, successful career, and others.

The realization of the profound medical surveys in establishments of public health services is complicated in connection with insufficiency of their financing. At the same time medical surveys allow us to judge the true scales of a morbidity of the population, including, latent forms of diseases. These circumstance results in difficulties in early diagnostics of diseases, especially in village districts.

Partly it explains that fact, that published by the Ministry of public health services the indexes “for the first time in life of a detected disease morbidity and prevalence of diseases for the adult, adolescent and children’s population” over the last years had not expressed growth, despite the worsening living conditions of the population of a country in crisis.

The learning of rates of morbidity is extremely urgent, as they are one of the most pertinent characteristics of the tendencies of changes of public health. Also they are used for planning measures of the medical and social help, realization of coordination of operations of establishments of public health services, and on planning resource allocation of medical services.

It is well known that the rates of morbidity have expressed age features. As a rule, the level of an again detected morbidity at children is highest. The teenagers have a level little bit below, and the lowest level is marked at the adult. In 1999 in Russia for the first time in life the detected morbidity has made 53438.0 per 100 000 persons among the adult population, 88267.3 per 100 000 persons among adolescents, and 136212.0 per 100 000 persons among children.

The learning of age features in the structure of a primary morbidity (on addresses to the doctor), and has shown, that (in the first places in structure) for the first time of detected morbidity of the adult and children’s population in 1999 there were diseases of the respiratory system, which densities’ is much higher in children (31.7% and 59.3%, accordingly). Simultaneously most frequently children had chronic diseases of tonsils, adenoids and pneumonia. At the same time, if in structure of a primary morbidity of adult 15.5% of cases concerned to traumas and poisonings, and 10.6%- to illnesses of the nervous system and sense organs (second and third order places), in children is observed. The densities’ of illnesses of the nervous system and sense organs is accountable for 7.9% of cases, infectious and parasitic illnesses – 7.5%, and traumas and poisonings - 6.3%.

The index of common morbidity rate (prevalence of illnesses) in the adult population of Russia in 1999 makes 114149.7 per 100 000 persons. Its structure is determined by diseases of the respiratory system (19.0%), diseases of circulatory system (14.6%), and illnesses of the nervous system, and sense organs (13.2%).

That the diseases of the circulatory system in structure of common morbidity rate of the adults are on the second order place is not accidental. First of all it is stipulated by their prompt growth over the last decade, and also in the increase of heavy forms of diseases, frequently causing to lethal outcomes. Hypertonic, ischemic illness of heart and vessels, and the chronic rheumatic illnesses of heart are most widespread.

The common adolescent morbidity rate in 1999 has made 146 283 per 100 000 adolescent, which is 1.2 times higher than in 1997. The greatest densities in modern structures are taken with diseases of the respiratory system (33.9%), illness of the nervous system and sense organs (17.1%), and diseases of the digestive system (9.0%). The common level of children's morbidity rate for the given period has increased, and has made: 172 469.1 on 100 000 children in 1999.

As a whole the situation is intense with the morbidity rate of the population by infectious illnesses. So, despite some lowering of infectious morbidity rate by a sequence of infections in 1998 in comparison with 1990, is alarming, not stopping flares of acute intestinal infections (for example, a flare of cholera in October 1998 in the Republic of Dagestan) and unprecedented epidemic flares of diphtheria (26.8 and 24.1 cases of diseases on 100 000 population accordingly in 1994 and 1995). The morbidity rate, saved on a high level, of the population by a virus hepatitis B calls an alarm. It has increased in account on 100 000 population with 21.9 in 1990 up to 43.8 in 1999. The morbidity rate by rubella over 1998, in comparison with 1997 has increased more than 3.3 times, up to the level: 399.3 by 100 000 persons of the population.

An especially unfavorable epidemical picture has developed with the morbidity rate of the population by a tuberculosis relating number of socially stipulated infections. The number of patients with (for the first time in life) the placed diagnosis of an active tuberculosis has increased over 1999 in comparison with 1990 more than 2.5 times and 85.2 cases per 100 000 population was reached in 1999. Alarmingly, each fifth patient with (for the first time in life) the diagnosis of tuberculosis now is a child up to the age of 14 years.

The active tuberculosis is diagnosed at the men in 2.6 times more often, than at the women. In comparison with 1989 the mortality of the population from tuberculosis has increased in 1999 by 2.7 times and has made 20.0 cases of 100 000 population in 1999. 29 078 persons die from tuberculosis in 1999.

Insufficient financing of a federal purpose-oriented program causes the incessant distribution of tuberculosis in Russia: "Urgent measures on struggle with a tuberculosis." Besides in a sequence of the subjects of Russian Federation down to the present time the territorial programs on the struggle with tuberculosis are not accepted (or are defaulted in due size). It results in delayed diagnostics and off-standard treatment of this disease, development of the heavy started forms of illness.

In Russia over recent years the extreme growth in the number of venereal diseases registered, and the level of morbidity rate of the population by lues (for the first time in life) carries, as a matter of fact, a menacing epidemical character. The number of the patients with the placed diagnosis of lues, of all forms, since 1990 to 1998 has increased

by the amount of 100 000 persons—more than 34 times. And, the steady growth of morbidity rate was observed down in 1997. In 1997 the maximum number of the patients with (for the first time in life) the placed diagnosis of lues of all forms is revealed. This number is equal to: 405 746 persons, including 3387 children. In 1998, in comparison with 1997, in Russia for the first time over the last ten years some lowering of the number of patients with (for the first time in life) the placed diagnosis of lues of all forms is 1.2 times up to a level: 235.1 on 100 000 persons.

In Russia an epidemical decor has worsened sharply in connection with growth of morbidity rate by HIV. The first HIV positive patient was detected in Russia in March 1987. From this time, and till the present time about 58 063 persons infected by HIV are registered. Since March 1987 and as of January 1, 1997 in Russia 175 persons of the HIV patients, including 71 children have died. It is necessary to mark that more than 90% of cases of HIV infection is registered as the people using intravenous drugs. The greatest number of the HIV patients is marked in the Kaliningrad, Nizhniy Novgorod and Rostov areas, and Krasnodar territory.

Significant negative effects on metrics of morbidity rate and the mortality of the population over recent years renders such factors as mass accumulation of unfavorable consequences of aggravation of a socioeconomic and political decor in country, difficulty of adaptation of the population to realities of market economy. Lower access to prevention and treatment services is a new reality for the majority of the population. It occurs on a background of a general decline of the interest in risk groups to healthy life style, health promotion, and health education on risk factors.

Simultaneously for modern Russia the problem of distribution of alcoholism of the population is extremely urgent. The mortality of the Russians from casual poisonings with alcohol, despite measures undertaken by the government on the regulation of the market of spirits, is still extremely high and, among the men (for the first time in life), reached: 31.1 of 100 000 in 1999.

It is necessary to mark the expressed growth in the number of cases of drug addiction with the placed diagnosis of drug addiction taken under medical observation by establishments of the Ministry of public health among the population over recent years. The distribution of drug addiction among the population represents a serious social threat for Russia, though the scales for today are much lower in comparison with the problem of alcoholism. In 1999 in Russia 2 209 238 patients has an alcoholism and alcoholic psychosis (or 1517.9 persons out of 100 000 population) and 209 079 patients has a drug addiction (or 143.7 persons out of 100 000 population) were treated in medical establishments. Over 1990–1999 the sharp growth in the number of especially heavy cases of alcoholism among the population, namely, alcoholic psychoses (from 17.5 cases up to 56.2 cases out of 100 000 population) is observed. The proliferation of alcoholism among the population explains a high level of mortality from unnatural reasons (murders, suicides, of poisonings and traumas) and predetermines a stable high difference between levels of mortality of the men and women in modern Russia.

In modern Russia the growth of the number of invalids is marked. The number of invalids has exceeded 6 200 000 persons. Annually 1 000 000 persons are recognized as

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Biographical Sketches

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