

**“Russia Under a New President:
Opportunities and Challenges for NGOs in the Health Field”**

CEELBAS/BEARR Conference, 9 May 2008

This conference inaugurated the NGO Development Programme, a joint venture of The BEARR Trust and CEELBAS (the Centre for East European Language Based Area Studies – a partnership of UCL and the Universities of Oxford and Birmingham, with a network of other partners at British universities). The conference, and the programme as a whole, are designed to promote fruitful interaction between the academic world and NGOs.

The theme of this first conference was chosen to give NGOs access to the substantial evidence compiled by universities on what is happening to the health of the Russian population, on developments in healthcare in Russia and on the Russian government’s health policies; and to pass on to academics the hands-on experience of a variety of NGOs working in related fields. Possible future elements in the programme were discussed in the final session of the day.

In the first session, chaired by **Dr Christopher Davis** (Chair of Russian and East European Studies at Oxford), the **Prospects for Health and Health Reforms in Russia** were examined by **Dr Christopher Gerry** (SSEES, UCL) and **Larisa Popovich** (CEO of ROSNO-MS medical insurance company and Deputy Chairman of the Social Council for Patients’ Rights at the Russian Public Health Inspectorate). They were joined for the panel discussion by **Benoit Mathivet**, CEELBAS postdoctoral research fellow.

Gerry set the scene by analysing **The Political Economy Context of Health Reforms in Russia after the Presidential Election**. His concern was to make his audience aware that who exercises power is the most important determinant of reform.

The paths of transition and development have come to an end in Russia, and a challenging new phase of modernisation is beginning. The tough decade of “reform plus no money” in the 1990s has given way to a period of greater prosperity since 2000, as Russia’s GDP started to grow strongly and foreign reserves accumulated, increasing from \$8bn in 2000 to \$450bn by 2008. Now the world’s eighth largest economy, Russia can afford higher wages for healthcare workers, and investment in clinics and high-tech medical equipment. Medvedev begins his term with the macroeconomic indicators on his side: a current account surplus, rising investment, spare capacity and a balanced budget. All well and good argued Gerry, but – with the implication that the current decade might be characterised as “money plus questionable reform” – Medvedev has also inherited significant structural weaknesses from the Putin years, as well as a new political elite that may not support the sort of reforms that are really needed to tackle the problems of an ageing and shrinking population.

Russia’s current wealth is dependent on high natural resource prices. Its manufacturing and small enterprise sectors are still feeble; corruption is spreading; and growing restraints on freedom are affecting NGOs. The health legacy of the under-funded, unresponsive, centralised Soviet system, followed by failed market reforms in the 1990s, is a deterioration in the Russian population’s health and life expectancy to a level where Russia was ranked by the WHO in 2000 at only 131 out of 190 countries, on a par with Honduras and Peru. Life expectancy dropped back to 1950s levels, similar to that of Papua New Guinea and Eritrea, and maternal mortality was three times that in the European Union. Unusually high levels of male mortality are dominated by cardiovascular diseases and cancer. Diabetes and TB are growing, while according to the UN, HIV/AIDS had reached a “critical point” by 2008. Taken together with deaths caused by road and other accidents, and violence, a clear pattern emerges that many of Russia’s health problems are behavioural in origin.

This is where Gerry believes that Putin, with his much-publicised espousal of pro-natal policies as the solution to a declining population, missed the point, and where Medvedev, unless he tackles causes of death at their roots, risks wasting the newly available resources.

The sort of vocabulary Medvedev has used so far is encouraging, and suggests that he genuinely understands the challenges entailed in modernisation. He talks of fighting corruption and bureaucracy, and of promoting freedom, private property, and an independent judiciary. His watchwords are “Innovations, Institutions, Infrastructure and Investment”.

But Gerry asks the question: can all this sit alongside the new Russian political elite? For pro-natal policies and high-tech medical equipment are an incomplete solution to Russia’s health problems. These must be tackled by going beyond the strictly medical, and dealing with environmental degradation, alcohol abuse, accidents, violence, smoking, diet, psychological stress and attitudes to risk. What the Russian administration needs to do is to make health promotion and disease prevention as much a part of the system as medical responses. Gerry’s implication is that trying to change the Russian people’s behaviour will encounter resistance from lobbies with economic and political power and influence – Russia, after all, has only belatedly signed the WHO Tobacco Convention. It will take a very long time to create a consensus in political structures.

Larisa Popovich, who followed with a **Russian Perspective on the Evolution of Russia’s Health Reforms**, stressed that the Russian government is well aware of the behavioural causes of Russian health problems and of the implications of an ageing population. She described the development of reform of the health system since the 1980s, when the first attempts to introduce market mechanisms were made. By the mid 1990s it was clear that these were not effective, and in a second phase of reform, the government struggled to guarantee free medical assistance but was challenged by lack of funds and huge regional disparities in income. A third phase of reform began in 2000, and addressed the issues of access to health care and equality of treatment.

By 2005, rising government revenues allowed for a fourth phase of reform, now focussing on the quality of health care. The National Priority Project for Health was drawn up to improve the efficiency of Russia’s socio-economic policies in line with the UN’s Millennium Development Goals.

There are already some encouraging indicators of improvement. Infant mortality is falling, as is the death rate, and the birth rate is rising. Real health spending through the Federal and regional budgets has increased sharply, although Popovich qualified this with the observation that it is still less as a percentage of GDP than in similarly wealthy countries.

Looking to the future, health policies for 2008 to 2012 will focus on quality, efficiency, and raising the status of health as a national issue. The government is examining UK and German models of public/private partnership, and is also looking at what role NGOs can play in health reform. The scope envisaged for NGOs seems wide: implementation, outreach, advocacy, fundraising and exchange of information with international medical institutions.

Popovich concluded that, for the first time, the Russian government sees health reform as a task to be shared with business and with NGOs.

Opening the panel discussion on the prospects for health and health reform, Davis asked what could explain the pattern of illness in Russia and the reasons for the destructive behaviours that underlie the morbidity and mortality rates. **Dr Alexei Bobrik** (Open Health Institute, Moscow), Larisa Popovich and Benoit Mathivet all gave examples of how the government is responding.

Bobrik said that the government’s introduction of fines for not wearing seat belts has had an immediate effect. Although the government was late to sign the WHO Tobacco Convention, it has at least now done so, and is starting to work on health warnings on cigarette packets. The government has also demonstrated that it is serious about tackling AIDS. However, he admitted that it is “still early days” in dealing with alcoholism.

Richard Ehlers recalled the problems of child malnutrition he encountered while working as an EEP/VSO volunteer in the mid 1990s. Popovich described the regional programmes of child nutrition that have been put in place, and even extended from infants to school-age children, but she warned that these would take

years to have an effect as poverty is still deep-seated in many regions, and army conscripts are still often severely under-weight. Davis pointed to recent studies showing improvements in the incidence of rickets, and Mathivet reminded us that government policies on screening also include diet.

Harald Lipman (ICHARM) agreed with Gerry that some of the essential foundations for long-term behavioural change (i.e. legislation, taxation and regulation) will have to do battle with interested lobbies and with the government's desire to raise revenues. But at the same time, much progress can be made by training doctors in cardio-respiratory prevention, by educating the public, and by screening and providing simple preventative drugs such as aspirin and statins. He estimates that reducing mortality to EU levels would boost Russian GDP by 5%.

Michael McCulloch (Chair of The BEARR Trust) asked whether it is possible for health reform to be a truly public dialogue in Russia, noting that Popovich's list of ways in which NGOs could help included only one item of service provision. He also questioned how responsive the Russian public would be to pressures for behavioural change. Popovich responded that the government knows that reform must have a proper legislative basis, and must also involve open dialogue with the public, and she cited the Ministry of Health website as evidence. She regretted that there is no magic wand to transform the public's under-estimation of the importance of health, and a tendency to undervalue medical care because it has traditionally been provided free. However, the reality is that informal payments made to secure medical care have increased to such an extent that the government now judges it politically acceptable – and preferable – to introduce a formal system of agreed payments, with better social insurance for the poorest. She also pointed out that the government's investigation of West European PPP health models is being carried out in the face of strong opposition from medical lobbies.

Professor George Kolankiewicz (Director, CEELBAS) offered a sociologist's viewpoint to explain the culture of health abuse in Russia. He referred to studies on well-being, which link health and longevity to people's sense of how much control they have over their lives, their ability to achieve their goals, and the extent to which they receive recognition for success. Kolankiewicz suggested that replacing the culture of health abuse with a "culture of success" would have as much influence on health in Russia as would tinkering with the medical system.

Moving on to **Recent and Prospective Developments in Civil Society in Russia**, a session chaired by BEARR Trustee **Daryl Ann Hardman**, the conference participants soon learned to question assumptions about shared definitions of civil society, and about the role of the internet in Russia in bringing together people with a common interest.

Dr Alena Ledeneva (SSEES, UCL) examined the development of **Civil Society in Russia under Putin and Medvedev**. She highlighted the low awareness of civil society in the Russian population, and the fact that many people have a different understanding of the term from that in the West. Mostly, people cite characteristics of a civilised society, where people behave in a humane manner towards one another, rather than understanding civil society to mean one where social institutions and individuals function independently of the political power. Indicators of the development of civil society, such as those produced by Freedom House, show a deterioration in Russia since 1997, and most markedly between 2000 and 2006, the latest year for which statistics are available. The number of officially registered NGOs fell from 600,000 in 2005 to 250,000 in 2006, partly in response to the government's requirements for re-registration, and tighter restrictions on foreign NGOs.

The statistics do not tell the whole story; there is in fact a great deal going on in the third sector in terms of activity by individuals and informal, unregulated groups that is not reflected in official figures. Ledeneva argues that it was never going to be easy for civil society to take root in Russia, as the communist era left a hatred of 'membership'. As well as regulating genuine NGOs more closely, Putin's efforts to create an 'organised' civil society through the establishment of the (closed membership) Civic Forum (*obshaya palata* or Public Chamber) in 2001 have contributed to a decline in NGO numbers.

However, Ledeneva estimates that neither informal third sector activity nor the officially sanctioned variety is having much impact yet on Russian society, at least not as measured by public awareness of any of the

government's National Projects in healthcare, education, agriculture and affordable housing. A year after their launch in 2006, 70% of the Russian population knew nothing of any programmes to be implemented in their region or city.

In Putin's second term of office it became clear that his public praise for NGOs masked a distrust for certain sectors of civil society. Looking to the future under Medvedev, it appears that Putin is expected to oversee domestic matters, leaving foreign policy to the President. Ledeneva's final question is whether this division will last, or whether both men will ultimately neglect domestic health policy, leaving it to be sorted out by means of some sort of social insurance system.

Floriana Fossato (SSEES, UCL), through her study of **Civil Society Online**, gave more detailed insights into the informal third sector activity identified by Ledeneva. Use of the internet in Russia increased rapidly in the five years to 2007, but the way in which the 'blogosphere' has developed underlines Ledeneva's observation about the preference for individual activity over organised membership.

Almost 30% of Russians used the internet at least once in 2007, compared with only 8% in 2002. Usage varies significantly between regions, with almost 60% of Moscow residents and 40% in other major cities using it, compared with average regional penetration of just over 20%.

Concentration in larger cities is also a feature of blog activity. There are now 3.8 million blogs in Russia, but their rate of growth and the degree of writing activity within them seems to be diminishing. The 230,000 blog communities tend to be more active than individual blogs, but a marked feature of the blogosphere is that it is dominated by a small number of trusted leaders.

It has been assumed in the past that the internet would be an instrument of democratisation in Russia, since this has happened in Western countries, and the internet appears to have universal potential. In reality, internet development in Russia has adapted to the national environment, and research by the Reuters Institute suggests that, in general, the impact of the internet is shaped by the national social and political context in which it is deployed. The internet does not transform society; rather, society transforms the internet.

What this means in Russia, according to Fossato, is that, in the absence of trusted institutions, the internet remains "a device to test one's own circle" and effectively reproduces well-tested mechanisms of propaganda and manipulation. Networks generally consist of closed and intolerant clusters of like-minded people who are rarely willing to cooperate with other groups, and political norms are more likely to be replicated than challenged online. The authorities can manipulate or intimidate leaders, and exploit widespread distrust to ensure that internet linkages do not develop into alliances for action.

More optimistically, the internet does afford opportunities in the health sphere, where the State is more open, and constructive cooperation is possible with NGOs and State agencies, as well as with popular bloggers who have professional and charitable activities, and with regional media outlets that regularly organise charity events. RuNet is a powerful disseminator of information.

Anna Sevortian (Deputy Director, Centre for the Development of Democracy and Human Rights in Moscow, and Visiting Fellow, Cambridge University and UCL) examined the experiences of **Domestic and Foreign NGOs in Russia During the Putin Era**, and introduced participants to the wonderful concept of 'GONGOs' – government operated NGOs.

There is undoubtedly a tougher framework now for NGOs to operate in, but Sevortian contrasted the stringent treatment of NGOs receiving foreign funding (who are liable to be scrutinised to the point of paralysis by both the Registration Department and the tax authorities) with a more tolerant approach towards NGOs that help children or the elderly. Sevortian also finds it encouraging that many companies are starting their own charitable foundations, and that the new generation of young business people often aspire to become philanthropists. In-kind donations by companies (with the risk of some corruption) are already a useful source of healthcare support.

The key to survival for an NGO is to avoid political affiliation or any activity that suggests an alternative agenda to those in power. Most difficulty is encountered by human rights, ecological and environmental activists. As well as facing strong political opposition, such groups are unlikely to be nominated to the Civic Forum, which handles considerable state resources in cooperation with approved NGOs. Sevortian pointed out that, despite the presence of well-known sports stars and other celebrities, the Public Chamber is not a transparent organisation, and cannot be expected to provide the civilian oversight needed for the healthcare system.

Two main questions emerged in the ensuing discussion: how do users know when to trust information on the internet (Kolankiewicz) and how far is the decline in NGO numbers due to self-filtering as well as regulation (**Elena Schmidt, Healthprom**)?

On the question of trust, Fossato pointed to Yandex analysis identifying a small number of leading bloggers who have built up a strong personal reputation over time, and who are regular contributors to the most active debates. Contributions by government-sponsored NGOs, such as those associated with the Nashi movement, generate much lower responses.

Sevortian thought that it was not possible to isolate self-filtering from the effects of regulation, since the legislation gives such wide grounds for repression that the arbitrary closure of a few NGOs sends a signal to all the others. Although Bobrik argued that GONGOs are not entirely bad, since it is a good thing for NGOs to be well-resourced and to have capacity, Sevortian insisted that there should not be mechanisms that permit the selective targeting of NGOs and arbitrary decisions to categorise an organisation as 'extremist'. Ledeneva made an ironic proposal that Putin should be awarded a medal for strengthening civil society as a result of his attempts to repress it, since "what doesn't kill us makes us stronger". Fossato revealed that Greenpeace Russia is awaiting the next steps following the authorities' recent demands for over 3,000 documents to demonstrate compliance with legislation – demands that would have destroyed a smaller and less well-staffed NGO.

The final group of speakers, chaired by Chris Gerry, talked about their achievements and problems dealing with **Health NGOs in Russia During the Putin Era**.

Maria von Moltke founded Rehabilitation of the Child, a medical day-centre for handicapped children, with Gennady Romanov in St Petersburg in 1990. The history of Rehabilitation of the Child is one of constant scaling-down of its foreign status in response to government pressure and the loss of Western funding. Foreign nationals have been gradually weeded out from the board, and von Moltke considers that the decision to re-register in 1998 as a Russian Regional Charitable Foundation has helped the centre's survival.

Despite having a transparent structure with a board of directors, a supervisory board and an independent annual audit, the centre faced an attempt to evict it from its premises (a former municipal kindergarten) and was the target of anonymous accusations of terrorism and malpractice. But it has passed all official scrutiny and has "stayed in the race", a major achievement. In addition, fundraising in Russia has proved remarkably successful, with the patronage of the Governor of St Petersburg and Mrs Medvedeva. Looking to the future however, von Moltke fears for the centre's autonomy, and expects attempts to curb medical NGOs that work independently of the state.

Nicholas Colloff (Oxfam, Country Programme Manager for Russia) and **Oscar Franklin** (Age Concern England, International Programme Manager) had similar experiences of working with a network of NGOs in Russia. But while Colloff's subject of access to health services got attention because the government is aware of popular discontent, Franklin found that the problems of the elderly are still widely disregarded. This contrast suggests that NGOs that push at partly open doors have the greatest impact.

Colloff described the difficult process of getting 29 sceptical and mistrustful NGOs to form a coalition as part of Oxfam's Global Campaign Against Poverty to put pressure on the Russian government to improve basic healthcare. The coalition successfully proposed amendments to legislation on disability, an outcome that demonstrated to the NGOs involved that change can be effected by campaigning and public advocacy.

Colloff attributed this success to three aspects of their approach: collecting compelling (often narrative) evidence, demonstrating expertise (using experts from Russian institutes), and communicating with the Health Ministry at lower levels to ensure that the highest levels were accessed in the right way and were presented with already approved material.

Franklin found that NGOs working with the elderly do not have the same leverage to influence the government and legislation, since problems of ageing seem to be “a blind spot with the Russian government”. Nevertheless, Age Concern and their principal Russian partner, Dobroe Delo, work with a network of other NGOs of various size and expertise, and have made successful use of ‘peer-to-peer’ training. A two-year EC-funded project on fundraising has been delivered by Russian trainers, and six NGOs have gone on to develop their own funding sources through the Civic Forum (Franklin thinks that it is important to engage with the *obshaya palata* to discourage GONGOs from straying from their original mission). Echoing Fossato’s findings, Franklin confirmed that the internet does not work as a means of building up an expertise-based forum, even when the participants have already met.

Both Colloff and Franklin think that it is now time for Russian NGOs to move from service provision to campaigning. Franklin thinks that the regions, where territory and power battles seem to be diminishing, may be more fertile ground for this.

Dr Alexei Bobrik (Deputy Director, Open Health Institute, Moscow) suggested that AIDS/HIV NGOs represent the most vivid example of the development of civil society in Russia. Their increasing professionalism in terms of specialist knowledge, finance and management over the past eight years has led to more recognition and authority. The OHI sits on national coordination bodies and is now able to influence practice through giving expert opinion and direct funding.

Another significant aspect of the OHI’s development is that it now attracts domestic government funding. Its original source of funds was the Soros Foundation in 1993, which made it unpopular, but proved an advantage because it allowed the OHI to disseminate internationally validated practices in Russia, which the government was unable to prevent and eventually came to accept. Bobrik believes that once an NGO has the support of key decision makers, it can withstand opposition from potentially powerful critics (for example, the Orthodox Church, in the case of the OHI).

Bobrik is confident that the OHI will successfully complete the transition from foreign to domestic funding, but warned that many other NGOs are not strong enough to do so.

To conclude the conference, each of the day’s Chairs drew together some key points to emerge from their sessions.

Davis expects a strong commitment to health on the part of the Russian government, and, if modernisation succeeds, the resources to back it up. NGOs must look for the open doors, and the areas where their efforts will have the greatest multiplier effect.

Hardman was struck by the need to define terms with partners, recognising that the same words have subtly different meanings across cultures. She also noted the importance of finding the right individual to work with, given a mistrust of organisations. NGOs should not forget that local media channels are always looking for appealing non-political stories.

Gerry concluded that there is no point whatsoever in operating without a supporting constituency that has power.

McCulloch, drawing the day to a close, appreciated the comprehensive and up-to-date assessments given by the speakers, which showed how changes have been brought about, and how far the Russian health sector has moved in the past decade. The structures are starting to fall into place as permanent features, and as financing becomes more plentiful we must consider what the priorities should be for its application.

Kolankiewicz ended by calling for a radical change in how projects operate, so that they go beyond dialogue and information exchange. He warned against the risks of civil society settling into a means of middle-class self-help – a tool for those who least need it. We should constantly aim to “shake the tree” and ensure that nothing innovative has been missed. Being in touch with the new generation of Russian NGOs is essential. CEELBAS provides the opportunity for young scholars to emerge from NGO fieldwork, and would like the legacy of its involvement to be sustainable links between NGOs.

In the discussion of future work under the CEELBAS/BEARR Programme, participants spoke in favour of a comparative approach to issues across the post-Soviet world. It was felt useful to concentrate on health and welfare because this covers most sections of the populations, and touches on aspects of health and care on which UK NGOs have expertise. Most important, access to healthcare was cited throughout the day’s proceedings as the cause of simmering anger in Russia and its neighbouring countries, and an issue to which government antennae are therefore well tuned.

The BEARR Trust would like to thank CEELBAS for the valuable contributions of its speakers and for its organisational and financial support. We would also like to thank, in particular, the speakers who travelled from the region to speak at the conference, and Cathy Judelson for her excellent interpreting.

NFE Ramsden
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