Healthcare Problems in Modern Russia

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Abstract. The Constitution of the Russian Federation proclaimed: “Everyone has the right to protection of health and medical care” (Article 41). The main law of the country declared free medical care in state and municipal health care institutions. However, the right of citizens to free medical care, especially for the treatment of cardiovascular and other complex diseases, is not fully realized due to limited quotas.

Based on arguments and facts, the author shows not only the positive aspects of healthcare in modern Russia, but also reveals the shortcomings in the field of protecting the health of ordinary citizens. In the conditions of an acute deficit of budget funds allocated by the state for this most important area of social policy, ensuring guaranteed rights of the population in the field of healthcare involves the selection of priorities, determination and financing of the most effective forms of medical care. According to the author, a priority national project “Healthcare” can make a significant contribution to solving urgent problems, the implementation of which should be completed by 2024 in accordance with the May (2018) decree of the President of Russia.

1. Introduction

Under Soviet rule, feldsher-obstetric centers could be found in almost every large village, and now the state cannot afford such luxury, so one feldsher falls into several villages scattered several kilometers from each other. As a health worker, they can be served if the car is often not assigned to him, and his working day is largely spent on the road to the patient.

Despite the fact that under the Constitution of Russia “everyone has the right to protection of health and medical care”, the authorities plunged healthcare into permanent reforms, which are especially painful for the health and life of the rural population. Here is one example of an “improvement” in the provision of health care to rural residents. The letter of the Ministry of Health and Social Development of the Russian Federation dated April 23, 2007 prescribed to the local health departments: “In order to improve the quality and availability of medical care, the efficient use of health resources ... provide for the conversion of small sections, especially in rural areas, into complex therapeutic areas or sections of a general practitioner (family doctor)”.

As a result of this reform, carried out by the federal center, there was a significant reduction in the number (closure) of uneconomical small medical institutions. Deputy Minister of Agriculture of the Russian Federation Alexander Petrikov at the parliamentary hearings cited depressing figures: since 2000 (when VV Putin became president of the Russian Federation), the number of hospital facilities decreased by the end of 2006 from 4,378 to 1,966 units, that is more than twice, including district medical institutions closest to the villagers — 5.5 times. Over the past 8 years, 3.2 thousand hospitals...
and 2.5 thousand clinics have been closed [1]. The system of preferential drug provision did not justify itself. It only intensified corruption and rising medicine prices.

In villages "unprofitable" feldsher-obstetric centers (FAP) are closed. At the beginning of this century, the so-called “restructuring” made its contribution to the collapse of “rural medicine”, which, in essence, consisted in mass liquidation of hospitals, feldsher-obstetric centers in the village and staff reduction. As a result: the network of hospitals in the countryside from 2001 to 2005 decreased by 16.4 percent, or by 719 units. The number of hospital beds decreased by 10 percent. Tyva, Chuvashia, Rostov and Chita regions suffered the most from restructuring. In the Chita region, only 16 percent of hospitals and 4 percent of clinics from the 2000 level remained.

In 2000–2015, the number of hospitals in Russia was halved, from 10.7 thousand to 5.4 thousand. According to statistics, the number of hospitals in Russia was:

| Year | Number |
|------|--------|
| 1990 | 12,800 |
| 2000 | 10,700 |
| 2013 | 5,900  |
| 2015 | 5,400  |

According to the Health Foundation, in 2016, 23 thousand conventional beds were abolished. In 2017-2019 the trend continued, but there are no exact figures yet. The Ministry of Health explained the reduction in beds by their “redundancy”. Like, money is allocated from the state budget for them, and no one is being treated.

The number of clinics in Russia:

| Year | Number |
|------|--------|
| 1990 | 21,500 |
| 2000 | 21,300 |
| 2013 | 16,500 |

Experts note that if the authorities continue to close hospitals at such a pace (353 per year), by 2021–2022 the number of medical facilities in the country will reach 3 thousand, that is, the level of the Russian Empire in 1913 [1]. The reduction in feldsher-midwife centers was observed against the background of rising birth rates in our country. The peak of the birth rate occurred just in 2000-2014, when in the Russian Federation “in order to optimize” there was a sharp reduction in medical institutions of this type. Over this period, the number of births increased almost 1.6 times (by 57.5%) - from 1215 thousand people in 1999 [2] to 1913 thousand people in 2014 (excluding Crimea). Despite this growth, the number of FAPs was almost halved in the country.

First-aid posts are located in most of the old rooms, with a toilet on the street, cold water from the washbasin. In winter, the Russian stove serves as heating in this medical facility. There is often no telephone number for an emergency call from the district center. So, out of 543 FAPs in the Arkhangelsk region, half were built more than half a century ago. And only 100 of them (less than 20%) have a license to carry out medical activities.

The state of rural medicine in Russia in the XXI century is largely reminiscent of Zemstvo medicine of the XIX century, described in the stories of A.P. Chekhov. As you know, Chekhov himself worked for a long time as a doctor in a zemstvo hospital.

Against the background of a decline in living standards, mortality in the country is increasing for the sixth consecutive year, because it is a consequence of social ill-being in society. Even according to official figures, the number of dead Russians is from 1.8 to 2.0 million people [3]. Tatyana Golikova, being in the rank of the Minister of Health and Social Development, admitted that so far she has not been able to overcome the high mortality rate of Russians. In the first place in the incidence rate are heart and vascular diseases. They are the cause of almost every second death. Oncology, internal diseases, and some infections that are not typical for developed countries, to put it mildly, follow. For example, from tuberculosis, especially prison, almost as many people die every year as in road accidents.

Therefore, the development of medicine, especially in terms of diagnosis and early detection of cardiovascular, cancer, infectious diseases, can seriously improve the situation. No less important is the development of high-tech medicine.
But the task is posed much wider: it is not only about seriously strengthening some areas of healthcare, but also about a systemic change in the organization of all levels of medical care. Such work, for example, began in the Tula region, where five inter-district clinical centers were built and equipped in a short time.

2. Scientific significance of the issue
Numerous scientific literature is devoted to health problems in Russia: monographs, articles, etc. [4].

Scientists have found that in people whose work is associated with stress, the need to make important decisions, as well as in individuals who are emotional and impulsive, high blood pressure occurs more often. 70% of employees of ministries and departments, who were measured the pressure on the same day, it was increased. Therefore, it is no coincidence that hypertension is sometimes called the "disease of the bosses." Arterial hypertension killed 13 US presidents [5].

Currently, scientists in the West are working (and not unsuccessfully) on the use of nanotechnology in the treatment of people. Imagine the situation: a person comes to the diagnostic center, they scan him, they say which link is affected, and they suggest taking medicine from the shelf. I drank a pill and the broken chain was restored, and with it health. No doctors, just medicines. It sounds fantastic, but that is what nanotechnology will soon allow. The successes of European colleagues were recently reported to the Russian press by Elena Malysheva, professor of medicine. “Modern science has gone very far,” stated the well-known TV presenter of the Health program, “and those diseases that were previously considered incurable are receding under the onslaught of ultramodern drugs … Every year several drugs appear for its treatment. Invented, for example, targeted drugs (that is, "striking precisely the target"). They are available in tablet form and treat cancer metastases. But such drugs are expensive, because they are followed by large-scale molecular genetic studies, human studies. A monthly course can cost up to 5 thousand euros. Therefore, such treatment should be paid by the state. Or it must pay a decent salary so that citizens themselves can buy this medicine.”

At the beginning of the reforms (1991), the population of Russia was 149 million. And as of 2008, the population of our country decreased by 11 million and totaled only 138 million people. After a slight increase in the birth rate, in 2017-2019. the trend has resumed. If these trends continue, over the next 50 years we can expect a further decrease in the country's population by more than 30%. The most common causes of mortality, morbidity and disability in Russia are no communicable diseases and injuries, which account for 68% of total mortality [6].

3. Problems statement
The purpose of this study is to focus on the problems, causes, and development trends of Russian healthcare. The author analyzed:
1. The main disadvantages and causes of backward healthcare in modern Russia.
2. Statistical data on the reduction of medical institutions (polyclinics, hospitals, obstetric stations) in 2000-2018.
3. Financing the country's health system and its trends in recent years.

In the article, the author used analytical, comparative, statistical and institutional methods of a systematic approach to the study of this problem.

4. Theoretical part, practical significance and research results
The key figure in the healing process, as you know, is the doctor. But judging by the payment, they forgot about him in the national project, numerous orders of the ministry and regional programs, just as they forgot about the teacher in the priority project "Education". “The Russian doctor is humiliated, impoverished and powerless today,” says Pavel Vorobyov, professor, doctor of medical sciences, head of the department of the Sechenov Medical Academy. “What can be required of him? .. Instead of conviction, society should think about ensuring a decent existence for a doctor.” The article by Professor P. Vorobyov was written two years after the start of the national project “Health”, but the position of doctors, in his opinion, has not changed [7]. His opinion is shared by the president of the
Russian Academy of Medical Sciences, the head of the Blokhin Cancer Research Center, academician of the Russian Academy of Sciences and RAMS Mikhail Davydov: “Despite all the official absurdities and the indifference of the authorities, doctors not only survive themselves and help their patients survive, but even manage to move science ... ” To make sure that the judgments of famous medical scientists are correct, it is enough to ask the doctors of district hospitals and clinics about their material support. Unfortunately, the answers will be mostly pessimistic. The author was convinced of this repeatedly, visiting polyclinics and district hospitals [8].

In order to improve the quality of domestic health care, the Government of the Russian Federation by order of December 24, 2012 N 2511-r approved the state program "Healthcare Development". This voluminous document contained many subprograms, such as: 1) "Prevention of diseases and the formation of a healthy lifestyle. Development of primary health care"; 2) "Improving the provision of specialized, including high-tech, medical care, ambulance, including specialized specialized medical care, medical evacuation"; 3) "Development and implementation of innovative methods of diagnosis, prevention and treatment, as well as the basics of personalized medicine"; 4) "Protection of the health of mother and child"; 5) “Development of medical rehabilitation and spa treatment, including for children”; 6) "The provision of palliative care, including for children"; 7) "Human resources for the healthcare system", etc. [9]. The purpose of this necessary state program was to ensure the availability of medical care and increase the efficiency of medical services, the volumes, types and quality of which should correspond to the level of morbidity and the needs of the population, the advanced achievements of medical science, providing medical care to incurable patients including children. The targets and indicators of the Program were also encouraging. They tracked nationwide:

- mortality from all causes;
- maternal mortality;
- infant mortality;
- mortality from diseases of the circulatory system;
- road traffic deaths;
- mortality from neoplasms (including from malignant);
- mortality from tuberculosis;
- consumption of alcoholic products (in terms of absolute alcohol);
- prevalence of tobacco use among adults;
- prevalence of tobacco use among children and adolescents;
- incidence of tuberculosis;
- availability of doctors;
- ratio of doctors and nurses; the average salary of doctors and employees of medical organizations with higher medical (pharmaceutical) or other higher education, providing medical services (providing medical services) of the average salary in the corresponding region;
- the average salary of the average medical (pharmaceutical) personnel (personnel providing conditions for the provision of medical services) of the average salary in the corresponding region;
- average salary of junior medical personnel (personnel providing conditions for the provision of medical services) of the average salary in the corresponding region;
- life expectancy at birth.

The state program of the Russian Federation "Healthcare Development" was implemented in two stages: the first stage: 2013 - 2015; second stage: 2016 - 2020.

Financing of all activities of the state program to improve the medical care of Russians, prevent their health, increase the payment of medical personnel should have been funded by the federal budget. The volume of budget allocations of the Program exceeded 6 trillion rubles, more precisely: 6 067 519 580 100 rubles. From 2013 to 2020 The following financial resources were planned:

- 2013 - 413,096,449.8 thousand rubles;
- 2014 - 373,316,585.8 thousand rubles;
- 2015 - 277 813 834.4 thousand rubles;
- 2016 - 291,817,500.1 thousand rubles;
2017 - 309,924,599.8 thousand rubles; 
2018 - 335,678,300.5 thousand rubles; 
2019 - 349,537,200.6 thousand rubles; 
2020 - 359,447,299.2 thousand rubles; 
additional need for federal budget funds: 3,356,887,766.0 thousand rubles, of which:
2013 - 64,650,000.0 thousand rubles; 
2014 - 255,383,369.8 thousand rubles; 
2015 - 355,719,670.0 thousand rubles; 
2016 - 496,886,495.2 thousand rubles; 
2017 - 528,588,980.1 thousand rubles; 
2018 - 535,221,251.6 thousand rubles; 
2019 - 540,510,982.9 thousand rubles; 
2020 - 579,927,016.4 thousand rubles [10].

Thus, of the 6 trillion, initially only half of the planned amount was allocated, the rest of the money should have been allocated as a kind of “additional need”.

The author expresses surprise at the fact that with the allocation of trillions of rubles for healthcare, and thereby to increase the life expectancy stipulated by the May decrees of President V. Putin, the number of clinics, hospitals, FAPs in villages, beds in the city and the village is reduced significantly, almost doubled compared to the Soviet period. Was it precisely such an “optimization” that was secretly planned along with the officially approved state program? Is it possible to realize the noble goals formulated in the state program “Health Care Development” by a multiple reduction of medical institutions and doctors in state and municipal medical institutions? The answer is obvious. And it is confirmed by the high mortality rate of Russians, their relatively low life expectancy in comparison with developed countries in 2014-2019. Compared with the USA, EU countries, Japan, where citizens live 10 or more years longer than in Russia (difference: for 16-19 years for men and 9-13 years for women), our country spends significantly less on protecting the health of Russians. This is clearly seen in the following table [11].

**Table 1. Health expenditures per capita.**

| Country      | Health Expenditures (in US dollars) | Place in the world ranking |
|--------------|-------------------------------------|-----------------------------|
| USA          | 9,451                               | 1                           |
| Switzerland  | 6,935                               | 2                           |
| Germany      | 5,267                               | 3                           |
| Sweden       | 5,228                               | 4                           |
| France       | 4,407                               | 5                           |
| Japan        | 4,150                               | 6                           |
| Great Britain| 4,003                               | 7                           |
| Spain        | 3,153                               | 8                           |
| Russia       | 1,369                               | 9                           |
| Mexico       | 1,052                               | 10                          |

From the table it follows that Russia was in the TOP 10 countries of the world in terms of per capita health expenditures, occupying 9th place in the world. Compared to the United States, its costs are 6.9 times less. The federal budget expenditures for healthcare will amount to: in 2019 - 428 billion rubles. in 2020 - 499 billion rubles [12].

In relation to the volume of GDP, the share of expenditures in the Healthcare section in 2019 will amount to only 0.4%. For comparison: Germany spends 11.2% of its GDP on healthcare [13]. It should be noted that the state budget surplus will amount to over 2.1 trillion rubles. in year. In addition, Russia’s gold and foreign exchange reserves exceed $ 500 billion. The state does not want to spend this money either on health care, or on education, on other areas of the social sphere.
In the foreseeable future, we would like investments in Russian healthcare to reach not only the European, but even the American level. Then the problem with the health and treatment of patients in capitalist Russia will not be so acute. Perhaps, then, through federal channels and other mass media, ads will not be placed asking them to "chip in" for the treatment of a sick child. In our opinion, such advertisements for the provision of medical care not only contradict the constitutional requirements for the state, which is obliged to protect the health of citizens, allocating sufficient funds for these purposes, and since this does not happen properly, the same “cries for help” sick children reduced the image of the social state, which evades their constitutional responsibilities.

When developing the national project in the field of healthcare, the Government of the Russian Federation should assume that in 2024 it is necessary to ensure:

a) the achievement of the following goals and targets:
- decrease in mortality rates for the working-age population (up to 350 cases per 100 thousand people), mortality from diseases of the circulatory system (up to 450 cases per 100 thousand people), mortality from neoplasms, including malignant ones (up to 185 cases per 100 thousand people), infant mortality (up to 4.5 cases per 1 thousand children born);
- elimination of personnel shortages in medical organizations providing primary health care;
- ensuring coverage of all citizens with preventive medical examinations at least once a year;
- ensuring optimal accessibility for the population (including for residents of settlements located in remote areas) of medical organizations that provide primary health care;
- optimization of the work of medical organizations providing primary health care, reduction of waiting time in line when citizens contact the specified medical organizations, simplification of the appointment procedure for a doctor’s appointment;
- an increase in the volume of exports of medical services by at least four times compared with 2017 (up to 1 billion US dollars per year);

b) solving the following problems:
- completion of the formation of a network of medical organizations of primary health care using the geographic information system in the healthcare sector, taking into account the need to build medical outpatient clinics, feldsher and feldsher-obstetric centers in settlements with populations from 100 to 2 thousand people, as well as taking into account the use of mobile medical complexes in settlements with a population of less than 100 people;
- completion of the formation of a network of national medical research centers;
- Creation of mechanisms for the interaction of medical organizations based on a unified state information system in the field of healthcare;
- Introduction of innovative medical technologies, including an early diagnosis system and remote monitoring of patients' health status;
- providing medical organizations of the health care system with qualified personnel, including the introduction of a system of continuing education of medical workers, including using remote educational technologies; and etc.

December 26, 2017 of the Government of Russia adopts a new resolution N 1640 “On approval of the state program of the Russian Federation”, which was amended and supplemented on March 29, 2019 [14]. Their essence is reduced to the following. The terms for the implementation of the Program were extended until 2024, that is, until the implementation of the famous decree of President V. Putin[15].

5. Findings (conclusion)
1. The historical experience of Russia convincingly shows that if reforms in the social sphere, including health care, are not carried in a timely manner, then this may cause the country to lag behind the developed countries of the world. Due to inadequate funding and for other reasons, the level of Russian health care today lags far behind the level and quality of medicine in the United States, Israel, and EU countries. This fact is confirmed by the following argument: the political elite prefers to be treated not in their own country, but abroad.
2. A key figure in healthcare in any country is a doctor, a medical professional. However, judging by the miserable salaries of doctors, paramedics and nurses, capitalist Russia does not fully understand this fundamental position. Statistics confirm that the May decrees (2012) of the head of state on a significant increase in the remuneration of medical personnel almost everywhere (except for Moscow and St. Petersburg) were not implemented.

3. Despite the fact that the equipping of medical facilities with special machinery, instruments and equipment has noticeably improved in recent years, in the whole country this important problem has not been completely resolved, especially in medical institutions on the periphery and in rural areas.

4. The welfare state needs to increase several times the budget financing of healthcare institutions. Perhaps then the Russian media, including federal television channels, will not advertise with a request to help with money in treating a sick child. In our opinion, such declarations calling for help contradict the constitutional provisions on the social state, which is obliged to protect the health of citizens by allocating sufficient funds for these purposes.

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