A Brief Introduction to the Health and Social System in Northwest Russia

1. Introduction

The aim of this paper is to provide a brief introduction to the Russian administrative environment with focus on the federal and regional government structures in North-West Russia for English-speaking project leaders and participants involved in projects funded by the Cooperation Programme on Health and Related Social issues in the Barents Region and under the Northern Dimension Partnership in Health and Social Well-being (hereafter the Cooperation Programme).

The area covered by the Cooperation Programme includes the Russian part of the Barents Region (Murmansk, Arkhangelsk, Nenets and Komi), Kaliningrad, Leningrad and Saint Petersburg.

2. Russian regional organisation

2.1. Federal subjects (regions)

The Russian Federation is divided into 83 federal subjects. These are republics, oblasts (counties), autonomous okrugs (territories), krais (districts) and federal cities. Each of these regional entities sends two delegates to the Federal Council (upper house) of the State Duma (parliament), and each has a different degree of autonomy in relation to the central government.

The area covered by the Cooperation Programme includes two republics (Karelia and Komi), one federal city (Saint Petersburg), four oblasts (Arkhangelsk, Murmansk, Kaliningrad and Leningrad), and one autonomous okrug (Nenets).

Some federal subjects, are located inside other federal subjects, and may be subordinate to these in financial or administrative issues. This is the case for Nenets autonomous okrug, which is situated inside Arkhangelsk oblast.

The federal subjects are responsible for health and social services on the regional level. This includes regional hospitals with inpatient and outpatient facilities, diagnostic centres, specialised institutions for treatment of infectious diseases like tuberculosis and mental hospitals.

2.2. Rayons, cities and towns (municipalities)

1 The Russian constitution specifies 89 federal subjects, but some of them have later been merged.
The federal subjects are divided into municipalities. The municipalities are of different types; rayons, cities, towns, villages and rural settlements.

The municipalities are responsible for health care services on the municipal level. These may include local hospitals and policlinics or health stations in rural areas.

2.3. Federal districts (macro-regions)

An intermediate level between the centre and the regions was introduced in 2000, when the federal subjects were grouped into 7 macro regions or federal districts. The macro regions are headed by a president representative supervising the regional authorities in his/her region. All the Russian regions included in the Cooperation Programme are located in the same macro-region, the North-West Federal District.

The federal districts do not play a role in the federal structure of the Russian federation, but serve to reduce the administrative burden on the centre and strengthen its control over the regions. The federal districts are relevant when it comes to many health and social issues, notably the national priority projects (see 3.2). There are several knowledge centres for the whole North-West Russia in Saint Petersburg which is also the administrative centre of the North-West Federal District. Among them are The North-West Regional AIDS Centre and the North-West Regional Centre for Surveillance of Viral Hepatitides located at the Saint Petersburg Pasteur Institute.

3. The federal level of the health and social system

3.1. The Russian Ministry of Health and Social Development

The Russian Ministry of Health and Social Development is located in Moscow. It is responsible for the development of the overall health and social policy and legislation in the Russian Federation. Its tasks include coordination of activities of the Pensions Fund, the Social Security Fund and the Mandatory Health Insurance Fund and supervision of state agencies and state services in the field of health and social issues. It is headed by a Minister of Health and Social Development with five Deputy Ministers. The Ministry has 13 departments. The Department for International Collaboration is handling bilateral and multilateral collaboration with a large number of international organisations and countries.

One of the services coordinated by the Ministry of Health and Social Development, with a visible presence in the regions is The Federal Service for Surveillance in the Field of Consumer Rights' Protection and Human Well-being (Rospotrebnadzor). It is responsible for public health issues like infectious disease control and registration of diseases, food safety, control of drinking water and several other issues. Its regional presence is maintained through Territorial Directorates located in all regions, funded over the federal budget. The Territorial Directorates have local offices at the municipal level, and

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representatives in hospitals reporting through their structures. At present (2009) there are more than 110,000 specialists employed in the Rospotrebnadzor system.

The other services/agencies supervised by the Ministry of Health and Social Development are:

- *The Federal Service on Surveillance in Health Care and Social Development of the Russian Federation*
- *The Federal Service for Labour and Business*
- *The Federal Bio-Medical Agency*

### 3.2. National health and social initiatives

Four national priority projects (health, education, housing and agricultural development) were launched by the president in 2005. The aim of the programmes is to improve the situation in the country in the targeted sectors of society through additional funding over the federal budget. The activities of the National Priority Project “Health” includes: vaccination and screening programmes for newborns and adults, upgrading of skills and salaries for medical personnel, purchase of technological equipment and renewal of the ambulance fleet. Funding provided for implementing the priority projects are channelled to the regions via the federal districts which also play an important role in monitoring the progress.

Another national initiative, adopted by the Russian Government in 2008, is the *Concept for Long-term Socio-Economic Development of the Russian Federation for the Period until 2020*, or the “Programme 2020”. The strategic goal of the programme is that the country should be “reaching a level of social and economic development, corresponding to Russia’s status as a leading world power in the XXI century” by 2020. The programme mentions health and social issues among the most important topics when it comes to reaching this goal. A sub-programme called *Concept for Development of Healthcare in the RF by 2020* with plans for how to develop the health care sector has been prepared by the Ministry of Health and Social Development. Emphasis is placed on improvement of health care delivery.

### 4. The regional level of the health and social administration

#### 4.1. Regional administration of health and social issues

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2 *Kontseptsia Dolgosrochnoi sotsialno-ekonomicheskogo razvitiia Rossiskoi Federatsii na period do 2020 goda*, p. 7 – translation by the author of this paper.

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The administrative organisation in the federal subjects varies. During the 90s, the federal subjects enjoyed considerable autonomy over their own affairs, and many adopted their own regional constitutions. It is therefore not always possible to make generalisations from one federal subject to another. Table 1 gives an overview of the current regional health and social administrative structures in the regions covered by the Cooperation Programme as of March 2009.

Table 1: Health and social administration in the area covered by the Cooperation Programme *

<table>
<thead>
<tr>
<th>Name of region</th>
<th>Title of head of administration</th>
<th>Title of deputy head of adm.</th>
<th>Title of head/heads of health- and social administration</th>
<th>Name of ministry/ministries/committees/department</th>
</tr>
</thead>
<tbody>
<tr>
<td>Republic of Karelia</td>
<td>President</td>
<td></td>
<td>Deputy Prime Minister/Minister of Health and Social Development**</td>
<td>Ministry of Health and Social Development</td>
</tr>
<tr>
<td>Republic of Komi</td>
<td>Head of Republic of Komi</td>
<td>Deputy Head of Republic</td>
<td>Minister of Health Head of Agency</td>
<td>Ministry of Health Agency for Social Development</td>
</tr>
<tr>
<td>City of Saint Petersburg</td>
<td>Governor</td>
<td>Vice Governor on Social Issues and Health</td>
<td>Chairman of Committee of Health Chairman of Committee of Social Policy</td>
<td>Committee of Health Care Committee of Social Policy</td>
</tr>
<tr>
<td>Leningrad oblast</td>
<td>Governor</td>
<td>Deputy Governor on Social Development</td>
<td>Chairman of Committee of Health Chairman of Committee of Social Protection</td>
<td>Committee of Health in Leningrad oblast Committee of Social Protection of the population in Leningrad oblast</td>
</tr>
<tr>
<td>Kaliningrad oblast</td>
<td>Governor</td>
<td>Deputy Governor</td>
<td>Minister of Health Minister of Social Politics and Labour</td>
<td>Ministry of Health Ministry of Social Politics and Labour</td>
</tr>
<tr>
<td>Murmansk oblast***</td>
<td>Governor</td>
<td>Deputy Governor</td>
<td>Minister of Health Minister of Social Development</td>
<td>Ministry of Health Ministry of Social Development</td>
</tr>
<tr>
<td>Arkhangelsk oblast</td>
<td>Governor</td>
<td>Deputy Governor on Social Issues</td>
<td>Chairman of Department for Social Protection Chairman of Department of Health</td>
<td>Department of Social Protection Department of Health</td>
</tr>
<tr>
<td>Nenets autonomous okrug</td>
<td>Head of Administration</td>
<td>Deputy Head of Administration on Social Issues</td>
<td></td>
<td>Directorate of Health and Social Protection</td>
</tr>
</tbody>
</table>

*The table was updated in March 2009.
** One person has both titles
*** One recent reform took place in Murmansk oblast in 2008, when the Committee of Health was reformed into the Ministry of Health and the Committee of Social Issues to the Ministry of Social Development. At the same time, the positions of Minister of Health and Minister of Social Development were created.
5. Sources

5.1. English and Norwegian Language Sources

European Observatory on Health Systems and Policies Vol. 5 No. 3 2003 Health Care Systems in Transition – Russian Federation


Andreeva, Borchardt, Räbiger, Volodin: Glossary Health Care System (Russian German English), Berlin 2001

Kolstø, P: Russland, Folket, historien, politikken, kulturen, 2008 (in Norwegian)

5.2. Primary Sources

Official Russian web-sites in Russian language

Ministry of Health and Social Development and Federal Services and Agencies

Ministry of Health and Social Development of the Russian Federation
http://www.minzdravsoc.ru

Federal Service for Surveillance in the Field of Consumer Rights’ Protection and Human Well-being
http://www.rospotrebnadzor.ru

Federal Service on Surveillance in Health Care and Social Development of the Russian Federation
http://roszdravnadzor.ru

Health and social initiatives

National Priority Projects
http://www.rost.ru/

Concept for Long-term Socio-Economic Development of the Russian Federation for the Period until 2020

North-West Federal District

North-West Federal District
http://www.szfo.ru

Ministry of Health and Care Services, March 2009
North-West Regional Centres
http://pasteur-nii.spb.ru/center/

Regional administrations (federal subjects)

Republic of Karelia

Republic of Komi
http://rkomi.ru/top/pravit/

City of Saint Petersburg
http://www.gov.spb.ru/gov/admin

Leningrad oblast
http://www.lenobl.ru/gov/government

Kaliningrad oblast
http://www.gov39.ru/index.php?d2m=page&contid=bd307a3ec329e10a2c8f8f823d914f4

Murmansk oblast
http://www.gov-murman.ru/power/dep/

Arkhangelsk oblast
http://www.dvinaland.ru/depsoc/

Nenets autonomous okrug
http://www.adm-nao.ru/?show=statics&id=26

Ministry of Health and Care Services, March 2009