



The Russian Child Health Care System

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We present a historical and analytical overview of the Russian child health care system describing strengths and challenges of the system. Main indicators of social environment and children's health, general demographics, and socioeconomic factors of Russia are described. The Russian health care system has preserved positive elements of the former Soviet model of pediatric care. However, beginning in 1991, it has been altered greatly in its funding and management. The child health care system is composed of a special network of outpatient and inpatient facilities. The key element of pediatric community care is the pediatric polyclinic, staffed by district pediatricians and nurses. Undergraduate pediatric training is separate from adult medical training. From day one onward, future pediatricians are trained at separate pediatric faculties of universities. Thus, they qualify as general pediatricians after only 2 years of postgraduate training. It should be emphasized that the gap between the health status of children in developed countries and the Russian Federation is largely due to the influence of socioeconomic determinants, such as traffic accidents, poverty, pollution, and hazardous life styles, including binge drinking. Further improvements of children's health require protective measures by the state to address the underlying socioeconomic determinants. (*J Pediatr* 2016;177S:S148-55).

With an area spanning more than 17 million km², Russia is the largest country in the world. It covers 9 time zones and a wide range of climates and natural environments. Russia extends across northern Asia and much of Eastern Europe. It borders on Norway, Finland, Estonia, Latvia, Lithuania, Poland, Belarus, Ukraine, Georgia, Azerbaijan, Kazakhstan, China, Mongolia, and North Korea. By the Sea of Okhotsk, Russia shares maritime borders with Japan and across the Bering Strait lies Alaska.

Sociodemographic Structure

Russian population, according to the official statistics (as of January 1, 2014), has 143 million people, which is the ninth largest in the world.¹ Its population is spread very unevenly over a large territory; 72.2% of the Russian population lives in the European part of the country, which constitutes only 25% of the entire territory. The region of Moscow has the highest population density of all regions with more than 4626 persons per km². The Chukotka autonomous region has the lowest population density with 0.07 persons per km². A general overview on the social environment of children in Russia and general demographic information is shown in [Table I](#).

Total life expectancy at birth increased significantly from 65.2 years in 1995 to 70.8 years in 2013. In 2012, birth rate per 1000 inhabitants was 13.3. Twenty-seven million children less than 18 years of age represent 19% of Russia's total population.

Socioeconomic Structure

Russia has a high-income mixed economy with state ownership in strategic areas. The gross domestic product has increased over recent years ([Table II](#)). In 2012, the poverty risk was 10.7%.

Political Context

According to Article 1 of Constitution of Russia, the country is a federation and semipresidential republic. The President is the head of state and the Prime Minister is the head of the government. Power is exercised by the President of the Russian Federation, the Federal Assembly, the Government of the Russian Federation, and the courts of the Russian Federation (Article 11). The Federal Assembly is the Parliament of the Russian Federation and the representative and legislative body of the Russian Federation. It consists of 2 chambers:

MDG	Millennium development goal
USSR	Union of Soviet Socialist Republics
WHO	World Health Organization

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Table I. Main indicators of the social environment of children in Russia and general demographic information

	Start point earlier if relevant (1980)	1990	1995	2000	2005	Latest available year
Total population, thousands	138 127	148 515	148 292	146 304	143 237	143 667 (2014)
Population 0-14 y, thousands	29 741.7	33 984.0	31 346.3	25 917.0	21 517.7	23 383.8 (2014)
Population 15-24 y, thousands	25 380.4	20 526.9	21 382.3	23 427.9	23 950.4	16 926.3 (2014)
Population over 65 y, thousands	18 758.0	22 494.3	24 655.9	27 065.8	24 514.2	27 804.3 (2014)
Annual growth rate of population	4.9	2.2	-5.7	-6.6	-5.9	0.2 (2013)
Population density	-	-	-	8.5	8.3	8.53 (2014)
Life expectancy at birth, y	69.1	69.2	64.6	65.4	65.3	70.8 (2013)
Fertility (absolute value)	2 202 779	1 988 858	1 363 806	1 266 800	1 457 376	1 895 822 (2013)
Fertility rate (children per woman)	1.895	1.892	1.337	1.195	1.294	1.75 (2014)
Birth rate (per 1000 people)	15.9	13.4	9.3	8.7	10.2	13.2 (2013)
Death rate (per 1000 people)	11.0	11.2	15.0	15.4	16.1	13.0 (2013)
Distribution of population (rural/urban), thousands	42 467/949 422	39 157/109 357	39 981/108 310	39 232/107 072	38 418/104 819	37 118/106 549 (2014)
Single parent households, thousands	-	-	-	-	-	5650.7 (2010)

the Council of the Federation and the State Duma. The Council of the Federation includes 2 representatives from each of the 85 federated states. One representative is from the legislative and one from the executive state government. The State Duma consists of 450 deputies; a deputy is elected and serves for a term of 5 years (Articles 94-96). The term Duma comes from the Russian verb “dumat” (“to think”).

Organization and Governance of Child Health Care Services in Russia

History of Child Care in Russia

The Health System in Imperial Russia (1763-1917). The Russian child care system has been supported by state and private contributions since the times of the monarchy. The first effort of the state to build a child care system dates back to the 18th century when, by orders of Empress Catherine II, the first orphanages were founded (1763 in Moscow and 1770 in St Petersburg). These orphanages had their own integrated hospitals where children received medical treatment.² Over the last 2 centuries, child health care has been offered continuously by the successor of the above-mentioned first hospital in Moscow, now called the Scientific Center of Children’s Health, which celebrated its 250th birthday in 2013.³ The next landmark in the development of the child health protection system was the building of special pediatric hospitals in St Petersburg in the 1830s through the 1840s.

The main driving factor, the formation of a system for the protection of childhood and motherhood, was a struggle to reduce child mortality rates. From 1867 to 1913, the child mortality varied from 240 to 270 per 1000. Stillborn births per 1000 living births were more than twice the rate of economically developed countries.³

The Development of the Child Health Protection System in Soviet Russia (1917-1990). The child health care system included a maternity provision and was established according to the Semashko Health Care Model (N.A. Semashko, People’s Commissary [Minister] of Health from 1918 to 1930).^{4,5} The main idea of this model was to centralize all of the country’s health care and place it under central government control. The Soviet health care system was based on the following principles: (1) the state’s responsibility for health care; (2) free health care for every citizen; (3) special focus on maternity and childhood; (4) promotion of a healthy lifestyle, preventive medical measures, and treatments; (5) preventive treatment of socially significant diseases; and (6) commitment of society as a whole to health care activities.

One of the unique features of the Soviet model was an independent department for childhood and maternity protection (created in 1918) of the People’s Commissariat (Ministry) of health. This department was separate from the department that provided care for the adult population. This meant that childhood and maternity protection received special attention in the Soviet health care system.

Table II. Main socioeconomic indicators

	Start point earlier if relevant	1990	1995	2000	2005	Latest available data and year
GDP per capita (constant 2005 US \$)	-	-	3535.1	3878.1	5337.1	6884 (2012)
GDP growth (annual), %	-2.9 (1990)	-2.9	-4.1	10	6.4	3.4 (2012)
Unemployment (% of total labor force)	-	4.6 (1992)	8.0	8.0	5.8	4.9 (2013)
Youth (15-24 y) unemployment rate, %	-	-	20.7	15.5	16.9	14.8 (2012)
Inequality measure (Gini coefficient)	-	0.260	0.387	0.395	0.409	0.400 (2013)
Poverty rate (total), %	-	33.5 (1992)	36.3	29.0	17.8	10.7 (2012)

GDP, gross domestic product.

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