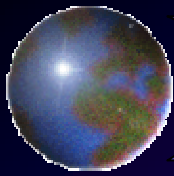


*Technical Assistance in Legal and  
Regulatory Health Care Reform  
in the Russian Federation*

Sponsored by the United States  
Agency for International  
Development, 1995-2001

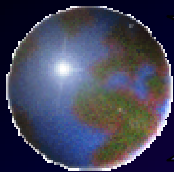


# *Conceptual Framework*

## *Scholarly Analysis*

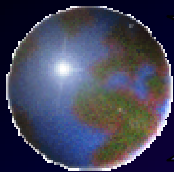
## *+ Responsive Technical Assistance*

- ⊕ Reform must come from those who will live with it
- ⊕ To be successful, reform must be knowledgeable:
  - ⊕ Based on accurate, unbiased information
    - based on responsible scholarship and empirical data



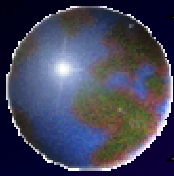
# *Project Components*

- ⊕ Respond to Russian Reform Goals
- ⊕ Support Russian Law Development
- ⊕ Support Russian Demonstration Projects
- ⊕ Provide Education, Study Tours
- ⊕ Conduct Empirical Research



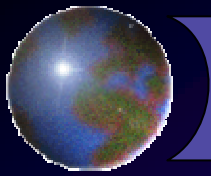
# *Respond to Russian Reform Goals*

- ✚ Russians Define Goals
- ✚ BU Provides Perspectives on Strategies
  - ✚ Background papers
  - ✚ Examples of other countries' laws
  - ✚ Study tours for policy makers
  - ✚ Selective policy analysis
- ✚ BU Supports Russian Law Development
  - ✚ Expert groups develop conceptsia and draft laws/regulations
  - ✚ Technical analysis of conceptsia, bills, regulations



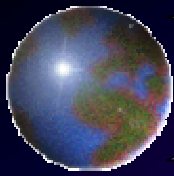
# *An Example: AIDS and the Legal Environment*

- ⊕ Comparative Analysis of the RF HIV/AIDS Law
- ⊕ Other Laws and HIV Control
  - ⊠ Prostitution
  - ⊠ STI's
  - ⊠ Narcotics Control
- ⊕ Law and Reality; Focus Groups with Doctors



# *The New (1995) HIV Law in the Russian Federation*

- ❖ Principles of individual autonomy and social protection are sound
  - ❖ Comparable to (or better than) Western statutes
- ❖ Excessive emphasis on testing
  - ❖ Leads to expensive testing of low risk groups
  - ❖ Diverts funds that could be used for prevention or treatment
- ❖ Like the RF Constitution---a guarantee of medical care, but what medical care?



# *Commercial Sex, STI's and the Law*

## ❖ Good principles

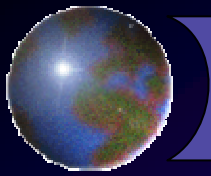
- ❖ Trading sex for money not per se illegal
- ❖ But living off the earnings of a prostitute is

## ❖ Knowingly transmitting HIV is a crime

- ❖ An incentive not to be tested or treated?

## ❖ Other barriers to testing and care

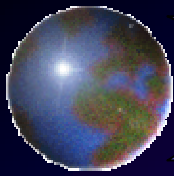
- ❖ Fear of deportation
- ❖ Legal residency a key to free care (Moscow)
- ❖ Legacy of Soviet STI Treatment
  - Required inpatient care
  - Contract tracing and notifications



# *What do Doctors Know about AIDS and the Law: Focus Groups*

- ❖ Those who treat HIV patients regularly know more
  - ❖ Not inhibited from advising on harm reduction
  - ❖ More sympathetic towards patients
- ❖ All physicians reflect legal emphasis on testing
- ❖ Awareness of new law is good, but misunderstandings persist
  - ❖ What testing is mandatory
  - ❖ Requirements of related laws
- ❖ Need for MinZdrav guidance on:
  - ❖ Prevention and testing
  - ❖ Implementation of the law





# *Lessons about Law and Reform*

- ⊕ The tradition: Only what is specifically authorized is permitted
- ⊕ Drafting
  - ⊠ Striking a balance between specificity and discretion
  - ⊠ Structuring a decentralized system
  - ⊠ Accommodating individual and institutional autonomy
- ⊕ Learning that a single law is not the answer
- ⊕ Reforms require commitment to the rule of law