

Russia and HIV/AIDS

Opportunities for Leadership and Cooperation

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CSIS Task Force on HIV/AIDS

Introduction

Russia remains a particularly challenging and complex environment in which to address the threat of a generalized HIV/AIDS epidemic. National leadership has been largely absent, but at several levels of government there are promising signs of movement. Capacities to respond, in both government and Russian society, are considerable. The flow of Global Fund resources to Russia is stirring the possibility of a new, promising phase. So too, Russia's hosting of the G-8 summit in 2006 creates an important moment of opportunity to engage with Russia on strengthening the global response to HIV/AIDS and the specific needs of Russia.

To effectively control the threat posed by HIV/AIDS, the Russian leadership needs to elevate HIV/AIDS, explicitly, as a national priority. It needs to anchor a dynamic national HIV/AIDS strategy within a broader mobilization to upgrade Russia's public health systems. And it needs to enlarge space and support for nongovernmental organizations (NGOs), which have been essential to the progress achieved thus far in Russia.

Heightened action by the U.S. government is also important. The United States should aggressively pursue the opportunities presented by the St. Petersburg Mayor to work together on a comprehensive HIV/AIDS collaboration in the lead-up to the G-8 summit in 2006. It should systematically encourage U.S. nongovernmental partners and St. Petersburg State University to join such an initiative.

More generally, the United States should enlarge its HIV/AIDS assistance package to Russia. It should make more U.S. expertise available to the Russian government to improve the quality of HIV/AIDS and HIV-TB surveillance and data management. It should concentrate expanded assistance to strengthen Russian NGOs, especially in the area of prevention; increase the training of doctors, nurses, and community workers in treatment, care, and prevention; expand collaboration in scientific research, especially in the development of vaccines and microbicides; and create new collaborations between Russian and American faith-based groups, businesses, and media.

A joint delegation of the Brookings Institution and the Center for Strategic and International Studies (CSIS) visited Moscow and St. Petersburg in February 2005, as part of the CSIS Task Force on HIV/AIDS, a project mandated to strengthen U.S. leadership in battling the HIV/AIDS pandemic. The CSIS Task Force, funded by the Bill and Melinda Gates Foundation and cochaired by Senators Bill Frist (R-Tenn.) and Russell Feingold (D-Wisc.), has in the past two years given special priority to fielding expert missions to populous, major states at risk of a generalized epidemic: China, India, Nigeria, Ethiopia, and Russia.

The principal goal of the February mission to Russia was to gain an understanding of the country's current HIV/AIDS situation, learn about official and private efforts in prevention and treatment, and provide practical recommendations for expanding U.S.-Russian cooperation to control the disease both in Russia and globally.

Brookings president Strobe Talbott and CSIS president John Hamre co-led the delegation. Other participants included Celeste Wallander and J. Stephen Morrison, CSIS; Lisa Carty, the Bill and Melinda Gates Foundation; Judyth Twigg, Virginia Commonwealth University; Allen Moore, CSIS and the Global Health Council; Brooke Shearer, International Partnership for Microbicides; Phillip Nieburg, CSIS; and Sarah Mendelson, CSIS. The group met with Russian national and local officials, Russians living with HIV/AIDS, U.S. officials, representatives of UN agencies working on health in Russia, representatives of Russian and international NGOs, Russian media, university officials, scholars, and experts. In the planning and implementation of the trip, the delegation benefited from the advice of many individuals and organizations. In particular, the U.S. embassy in Moscow, under Ambassador Alexander Vershbow's leadership, UNAIDS/Moscow, led by Bertil Lindblad, AIDS Foundation East/West, led by Rian van de Braak, and Humanitarian Action, led by Sasha Tsekanovich, each made exceptional contributions to the success of the mission's visit.

What follows is an executive summary of major findings and recommendations. CSIS will publish a full trip report in late May 2005.

Executive Summary

Although reliable numbers are impossible to come by, credible estimates are that 1 million Russians, or approximately 1 percent of the adult population, are infected with HIV. Weak and confusing data continue to confound the Russian

policy response to HIV/AIDS. Concerted action is needed to address this serious data deficiency.

There is reason for hope in Russia. Many Russian and international public health experts understand the HIV/AIDS situation and fully recognize the threat it poses to Russia's future. Russian scientists, activists, and health officials have been working to prevent the spread of HIV within high-risk groups and from such groups to the general population for years, raising the possibility that Russia will be spared the costly denial and delay experienced 20 years ago in the United States.

Select regional and local governments, UN agencies, and international foundations and NGOs have launched pilot programs for the study and prevention of HIV's spread. These may be small efforts operating on a local level, but they provide the foundation for a fully developed national response. The epidemic is still at a manageable scale, and Russia has ample material resources to finance expanded efforts. However, in the context of Russia's post-Soviet transition, HIV/AIDS is just one of many pressing political, economic, social, and health problems.

It is not easy to convince national leaders that HIV/AIDS requires more attention and resources when other health crises such as a shrinking population burdened by high rates of cardiovascular disease and alcoholism appear to be a more immediate and tangible threat to the country's future. It requires exceptional leadership to devote scarce political and financial resources to a disease that is perceived to be a problem of socially "maladapted" and marginal people at a time when popular pressures mount to repair schools, provide teachers with better pay, and improve other social services and benefits.

Since the advent of HIV/AIDS in Russia in the 1980s, the country's leadership has been conspicuously slow to confront the problem and take decisive action to prevent the spread of HIV/AIDS to the general population.

Although President Vladimir Putin has made reference in several speeches to the problem of Russia's demographic and public health decline, he has publicly mentioned HIV/AIDS only twice, in annual addresses in May 2003 and April 2005. On April 25, he stated: "We are ready to enter into fruitful partnerships with all countries to resolve global problems...from preventing global man-made disasters to fighting the spread of AIDS...."

Russia faces many challenges in mounting an effective response to the problem of HIV/AIDS, but none is more important than the need for the country's national leadership to fully grasp the imperative to launch an aggressive national policy to prevent Russia from becoming a high-prevalence country. The key to any effective national response lies in the Kremlin, which has been largely silent on its domestic approach.

There are promising signs at various levels of the Russian government, however, that its approach may be changing. Recent developments suggest that in

2005 and beyond there will be openings for engaging productively with Russia's national leadership.

In March 2005, Deputy Minister Zhukov gave a speech in Moscow identifying HIV/AIDS as a threat to Russian security. And in the weeks after that speech, the Russian government reported that President Putin had put the issue of HIV/AIDS on the agenda of the May 2005 Russian Security Council meeting. As the Putin government prepares to host the 2006 G-8 summit, it will come under increased pressure to demonstrate its leadership on HIV/AIDS, both globally and at home.

The Brookings/CSIS delegation was impressed with how activist and engaged senior officials in the Ministry of Health and Social Development are on HIV/AIDS programs. There are indications that HIV/AIDS spending within the ministry may be increasing.

The senior level of the Russian government has signed off on the latest grant from the Global Fund to Fight AIDS, TB, and Malaria and is engaged in negotiating the terms of its award in 2005. That \$120.5-million five-year grant, awarded to the government under Round 4, is intended primarily to begin treatment.

An earlier \$88.7-million five-year grant awarded under the Global Fund's Round 3 validates and empowers the nongovernmental sector and its predominantly prevention-related agenda. Space for the NGO sector has been enlarged, though relations between NGOs and the Russian state remain fragile.

These commitments will test the Russian leadership's ability to move its national policies forward. Specifically, the government will be called upon to begin to resolve complex, sensitive issues surrounding drug pricing, access by injecting drug users (IDUs) and commercial sex workers (CSWs) to treatment, and policy on replacement therapy for drug users.

In 2004, the Russian government created a National Coordinating Committee, comprising several ministries, state agencies, NGOs, and nonstate expert groups. Its mandate is to manage and coordinate policies for prevention in the health, justice, educational, and other government policy areas.

The Coordinating Committee is widely viewed as a positive step toward a more comprehensive public policy approach to HIV/AIDS. The delegation heard many examples of how the committee's existence has allowed better discussion and assessment of prevention initiatives and has legitimated the discussion of nonmedical aspects of HIV/AIDS—such as human and political rights and the challenges of developing programs for prevention among marginal groups that engage in illegal activities. One of the committee's strengths is the role it has played in bringing nongovernmental groups into discussions of policy and implementing programs.

The potential impact of the committee is constrained, however, because it is not chaired by a high-level representative of the presidential administration. Were a change made in this regard, its functioning could potentially improve dramatically.

The Coordinating Committee also has a potentially important role to play in resolving tensions between the Ministries of Justice and Health and Social Development, on the one hand, and the Ministry of the Interior, on the other, in bringing effective prevention, care, and treatment programs to injecting drug users and commercial sex workers. It could similarly help strengthen Ministry of Defense programs targeting new conscripts and the integration of HIV/AIDS into national economic policy and budgetary planning.

The Russian Duma has formed a parliamentary working group on HIV/AIDS, comprising 16 members, with a focus on spotlighting HIV/AIDS as a national priority and concentrating budgetary resources on the epidemic.

The upcoming G-8 summit, scheduled for July 2006 may provide a pivotal opportunity for enhanced dialogue and collaboration. Valentina I. Matvienko, the mayor of St. Petersburg, as well as Ludmila A. Veritskaya, the rector of St. Petersburg State University, have each made clear their strong interest in helping forge an expanded Russian-U.S. exchange on HIV/AIDS, in preparation for the summit. The city is pursuing innovative, multisectoral programs, while the university has ongoing international research partnerships on HIV/AIDS with U.S. and other counterparts and is in the process of launching the first public health graduate program in Russia. The overture from St. Petersburg is a timely opportunity that the U.S. government, other G-8 members, and nongovernmental groups should take up.

The Brookings/CSIS delegation was struck by the technical expertise and depth of experience, commitment, and political savvy of the Russian NGO sector. Over 200 NGOs are active today in HIV/AIDS programs. And the scope of their prevention and service work is impressive: it spans public awareness campaigns, media projects, and prevention outreach to high-risk groups (IDUs, CSWs, men who have sex with men (MSM), and street children). As the work of NGOs comes to include more advocacy, and as HIV/AIDS becomes a more mainstream issue for Russian government and society, tensions with the government may intensify. In recent months, groups representing persons living with HIV/AIDS (PLWHA) have staged increasing public demonstrations and acquired an ever-stronger public voice.

In connection with the United Nations' Global Media AIDS Initiative, a Russian effort has been successfully launched with Gazprom-Media, Prof-Media, and Russia Online as founding members. With financial and organizational support from the Bill and Melinda Gates Foundation, the Kaiser Family Foundation, and the Transatlantic Partnership against AIDS, the Russian Media Partnership to Combat HIV/AIDS has enlisted 30 Russian media partners and staged multiple conferences and training workshops. The partnership has solicited from its members contributions of media space worth over \$50 million across news, advertising, and entertainment fora.

With the exception of select media and other special cases—such as the automobile industry in Togliatti—Russia's business leaders have been relatively inactive on HIV/AIDS. They appear to await a signal from Russia's political leadership.

The challenge now before the United States, international organizations such as the Global Fund, UNAIDS, and other members of the G-8, is to identify how they can best support the continued building of capacity in Russia, how to help sustain it, how to support the Russian government as it expands its leadership and financial commitments in the coming years, and how to strengthen independent organizations.

The United States is well positioned to build upon its existing strengths. The U.S. embassy has already incorporated HIV/AIDS messages into its routine diplomacy, and on several occasions HIV/AIDS has been a subject of conversation between Presidents Putin and Bush. The U.S. Agency for International Development, the National Institutes of Health, and to a lesser degree the Centers for Disease Control, have each established programmatic platforms. Annual U.S. funding for HIV/AIDS exceeds \$11 million, and Moscow has recently been visited by senior officials of the Office of the Global AIDS Coordinator to examine options for enlarged commitments in the areas of treatment, care, and prevention.

The Brookings/CSIS delegation commends the U.S. embassy efforts and recommends that the U.S. strategy of engagement in Russia be enlarged significantly, both programmatically and diplomatically.

The United States should aggressively pursue the opportunities presented by the St. Petersburg mayor to work together on a comprehensive HIV/AIDS collaboration in the lead-up to the G-8 summit in 2006. It should systematically encourage U.S. nongovernmental partners and St. Petersburg State University to join such an initiative.

The United States should enlarge its HIV/AIDS assistance package to Russia in several specific, priority sectors. It should make more U.S. expertise available to the Russian government to improve the quality HIV/AIDS and HIV-TB surveillance and data management. It should concentrate expanded assistance to strengthen Russian NGOs, especially in the area of prevention; increase the training of doctors, nurses, and community workers in treatment, care, and prevention; expand collaboration in scientific research, especially in the development of vaccines and microbicides; and create new collaborations between Russian and American faith-based groups, businesses, and media.

The delegation also recommends that U.S.-supported prevention programs place a greater focus on high-risk groups: IDUs, CSWs, and prisoners.

Appendix A: Delegation Members

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