The Rapid Rise of HIV/AIDs in Russia: educating the masses about safe sex

Katherine Davis

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NATION-BUILDING IN CONTEMPORARY RUSSIA: POLICY ANALYSIS

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Abstract

This policy paper addresses the problem of HIV that Russia is facing. Over the past 25 years, HIV has been on the rise at an alarming rate in Russia and shows no signs of slowing down any time soon. Although the government has tried to implement a strategy to help prevent the problem getting any worse, they fail to address the real issue that is behind HIV's rise: that the population receive no sexual health education that would inform them what HIV actually is and how it can very easily be prevented. This policy paper will suggest that the best option for Russia to follow to help curb the further increase of HIV/AIDS is to implement compulsory sexual education to raise awareness of HIV/AIDS and the simple methods to prevent its transmission.

Introduction

Although the West has been successful in their fight against HIV, with only 102,000 people in the UK living with the disease in 2017¹, the situation in Russia is vastly different. With an estimated 1,000,000 adults and children living with HIV in 2017², and the number of new cases increasing by approximately 10% a year³ these figures defy the tendencies of most European countries and present a huge problem not only to Russia, but to the world as a whole with Russia's rising emigration figures⁴. One of the problems with combatting HIV in Russia is that it is so heavily stigmatised with being a disease that is only spread through homosexual sex, given Russia's heavily anti-gay propaganda. However, research shows that only 1.5% of new cases transmit the disease through homosexual sex, and that the two main culprits for the rise of the disease are transmission through heterosexual sex and injecting drugs⁵. It is therefore evident that something has to be done to change the situation. Although Russia pledged to adhere to the UNAIDS 90-90-90 scheme, which serves to raise awareness and provide treatment to those living with AIDS, little has been implemented to achieve these results.

This paper therefore sets out to not only outline the problem of HIV/AIDS that exists in Russia at present, but also to propose a solution to this epidemic. This paper will be based upon existing research by both the Russian government and also independent bodies. Evidently, there will be some limitations to what the paper will be able to achieve in reality, but the

¹ https://www.avert.org/professionals/hiv-around-world/western-central-europe-north-america/uk

² http://www.unaids.org/en/regionscountries/countries/russianfederation

³ https://www.avert.org/professionals/hiv-around-world/eastern-europe-central-asia/russia

⁴ https://www.theglobalist.com/russia-migration-population-india-mexico/

⁵ https://www.avert.org/professionals/hiv-around-world/eastern-europe-central-asia/russia#footnote5_ajwhj0l

recommendations put forward in the paper will assess the different paths that Russia could take, and ultimately come to the conclusion that implementing nation-wide sex education would be the most efficient, and cost-effective way to helping to contain HIV's presence in Russia.

The first chapter of the paper contains a brief history and background to the problem in Russia and what steps the state is already taking to try and combat this problem. The second chapter will present three possible policy options that take into consideration international action and domestic action. The final chapter will be the author's conclusions and recommendations for the most effective policy to be implemented.

Problem description

Background of the problem

HIV is a relatively new phenomenon in Russia, with the number of reported cases rising significantly after 1997 as shown in figure 1. Over the past twenty years HIV has been becoming more and more present in the Russian Federation, yet the State has done little to help prevent and put a stop to this. Ambrosio states that Russia was a 'prime candidate' for an HIV epidemic due to its 'staggering drug use, endemic poverty, and collapsing health care system' after the fall of the USSR.

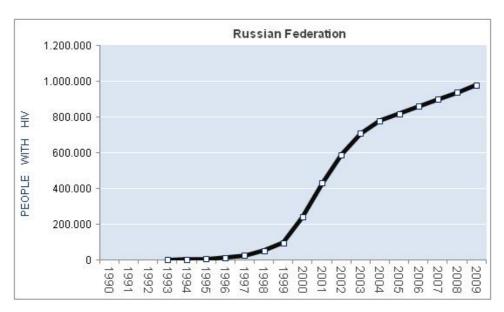


Figure 1: The number of recorded cases of HIV⁷

⁶ Ambrosio, Thomas (2006), 'The Geopolitics of Demographic Decay: HIV/AIDS and Russia's Great-Power Status, *Post-Soviet Affairs*, 22:1, p. 2

⁷ http://www.lifemanagementonline.com/health-info/statistics/hiv-aids-life-expectancy-russian-federation.php

Despite the explosion of HIV/AIDS, there has been attempts by different groups within Russia at different points in time who declared that the disease was not real and was in fact a 'pharma-conspiracy' invented by Western-pharmaceutical companies to make money. This is definitely not a widely-held opinion anymore, but still the vast majority of the population remains incredibly uneducated and misinformed about HIV and how it is transmitted. If the current tendencies continue, experts believe that there will be 2 million people in Russia diagnosed as HIV positive by 2020⁸. This is a serious threat for Russia and could lead to a 'social and demographic disaster' due to their already aging and decreasing population (see figure 3).

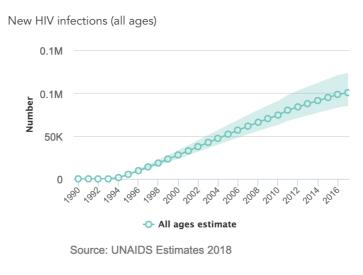


Figure 2: New HIV infection in Russia¹⁰

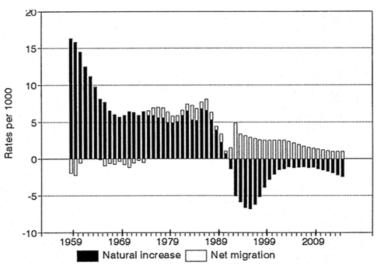


Figure 3: Components of Population Growth, Russia 1959-2015¹¹

⁸ Clark, Fiona (2016) https://www.thelancet.com/action/showPdf?pii=S0140-6736%2816%2931480-5

⁹ Ambrosio: 2

¹⁰ http://www.unaids.org/en/regionscountries/countries/russianfederation

¹¹ https://www.rand.org/pubs/conf_proceedings/CF124/CF124.chap6.html

Due to the rise of HIV only happening in the past 25 years, no previous legislation has been put in place to help combat the problem. The government committed in 2016 to UNAIDS 90-90-90 scheme (shown in figure 4) yet a lack of data, and a lack of any implementation of measures to be able to fulfil this commitment means that it is difficult to track any progress that the country might have made.



Figure 4: UNAIDS 90-90-90¹²

Current Policy Environment

The purpose of UNAIDS commitment is:

'Under the World Health Organisation's Global Health Sector Strategies for HIV 2016-2021, to stop the HIV epidemic, no less than 90 percent of all possible HIV-positive individuals should be identified and antiretroviral therapy provided to no less than 90% of HIV-positive individuals.¹³

This was reiterated by the Russian Government in 2016. The Government's decision on the 'State Strategy to Combat the Spread of HIV in Russia' outlines that currently only 19.3% of the population are screened for HIV, and their reasoning for this is due to the 'disinclination of most HIV-positive individuals...to undergo HIV tests and treatment' passing the blame from the State onto those suffering with the disease. Although in this strategy the government did outline that their goals are 'increasing Russian citizens' awareness of HIV as well as forming the social environment that excludes discrimination against people with HIV; developing and implementing inter-agency programs of HIV prevention...'15. Despite the goals that Russia has set itself, within the strategy it is very vague about how to implement any of these ideas that

¹² http://www.unaids.org/sites/default/files/media asset/90-90-90 en.pdf

¹³ http://government.ru/en/docs/24983/

¹⁵ http://en.eecaac2018.org/wp-content/uploads/2016/11/russtrategy_en.pdf (unofficial translation)

they put forwards. Instead they only shape what they wish to achieve without any concrete plans that would actually make their citizens more aware of HIV and how to prevent its transmission.

Policy Options

This trend cannot be allowed to carry on at the moment as it has been. Action needs to be taken to try and curb this rampant rise in HIV that Russia is experiencing, so as to protect not just the population of Russia but the rest of the world as well. Action needs to be taken by policy makers in order to successfully gain control of the situation. It has been shown by other countries such as the USA and the UK that it is fairly easy to prevent, and there are a number of different policy options that policy makers could follow in order to prevent the situation from worsening any further.

i. International Action

International charities could become more prominent in Russia in order to raise awareness of the situation and provide the support that those suffering with HIV in Russia need. We have already seen that UNAIDS is attempting to take action in Russia by implementing their 90-90-90 strategy, but as of yet the State has done little to help work towards the aims of the scheme. Non-profit organisations could have a greater presence in Russia by establishing community projects in cities which educate children and adults about HIV and provide the necessary support and antiretroviral treatments that are needed. A trial of this kind of option was already undertaken in Moscow in 2016 called 'dance4life' that was successful in getting young people to engage with the topic of HIV using a 'edutainment' model. However, this option has several limitations. The first is that there is no necessity for anyone to go to any communal projects that an outside organisation would organise, meaning that although some Russian's might be interested, the vast majority would remain uneducated about HIV. It would also be a difficult option to implement outside of bigger cities, given the vast scale of Russia. It would also not be the most cost-effective method, as funding would be from donations which are unreliable and inconsistent.

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¹⁶ Alekseeva et al. (2016), 'Introducing sexual education to Russian schools', *Health Education*, Vol. 115(1), 7

ii. Domestic Action

The government could continue to work within the framework of the 'State Strategy to Combat the Spread of HIV'. This includes increasing HIV-testing coverage and providing antiretroviral treatments (ARTs) to those that need it. A problem that Russia faces at the moment
is that around half of new cases of HIV are from transmission of the disease through needle
sharing in drug use, and many who are addicted to these drugs will not have the means to afford
the current ARTs without the price being greatly reduced. A part of this plan would be to lower
the price of these treatments so that the vast majority of people that are diagnosed would be
able to afford them. However, this option has its limitations as well. The State has failed to
outline in this strategy how they will actually educate the population that they need to be
regularly testing themselves, not just for HIV, but for other sexually transmitted diseases.
Without this element of mass-education, a lot of the population will still remain oblivious to
what the actual disease is and how it is spread.

iii. Educational Action

A final option would be the introduction of compulsory sex education in schools. Although Putin's policies include 'defending traditional Christian values' and increasing its 'alliance with the Orthodox Church' who disagree with sex education, for the safety of the country children need to be informed at school about how HIV and other STIs are transmitted. The UK's 'Sex and Relationship Education Guidance' states that 'effective sex and relationship education does not encourage early sexual experimentation' Instead it contributes to pupils being given 'accurate information' so that they can make their own educated and informed decisions about their sexual activity. This policy option proposes at least two compulsory hours of teaching of sexual education per term for all students above the age of 13, and would include on its syllabus 'understanding human sexuality, reproduction, sexual health...learning about contraception, and the range of local and national sexual heath' as included on the UK's curriculum. A limitation of this policy could be that older generations are still unaware of the disease and its transmission, but with educating children, there is a greater emphasis on the prevention of the virus being spread further, rather than just treating the problem as it is at the

¹⁷ Sharafutinova (2014), 'The Pussy Riot affair and Putin's démarche from sovereign democracy to sovereign morality', p. 616

¹⁸ Ibid

¹⁹https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/283599/sex_and_relationship_education_guidance.pdf p. 4

²⁰ Ibid

²¹ *Ibid*, p. 5

moment. The dance4life study showed that the sexual health education that this project provided had an overwhelmingly positive effect on both the children who participated in the study, but also the teachers and parents, and encouraged them to not only just engage in a discussion about sexual health, but also to not stigmatize those suffering from the disease (see figure 5).

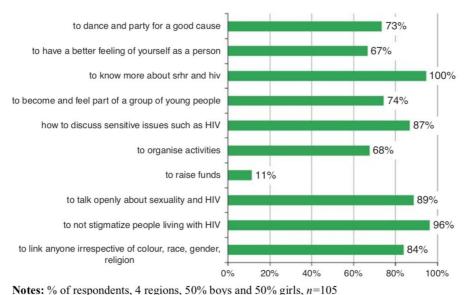


Figure 5: What did you learn while participating in the dance4life project?

To conclude this section, it has been shown that there are various different policy options to help tackle the problem of HIV/AIDS in Russia. The next section will be dedicated to demonstrating why sex education would be the most viable option out of the three.

Conclusion and Recommendations

This paper suggests that the best policy option for Russia would be to implement compulsory sexual health education for all pupils over the age of 13 in all school in Russia. This is the best way to raise awareness of HIV and other sexually transmitted disease and the effects that they can have on a person, but also to prevent the newer generations in participating in practises that would put them at risk of being transmitted the disease. It is a cost-effective policy as only a few hours each school term needs to be dedicated to its teaching, and information on the topic is readily available online, so schools would not have to invest in purchasing textbooks or extra material. The following steps should be taken by the Ministry of Education in order to implement this policy option:

1. Develop a new school curriculum that includes sex education. Sex-ed should be taught both in biology classes (addressing questions of what HIV is and how to treat/prevent

- it), but also in an equivalent of PSHE (personal, social, health and economic education) classes, taking place twice a term. This would ensure that students have a scientific/medical understanding of the virus, but also be provided with a forum to discuss any questions they might have on the topic, such as where to get tested and what treatments are available.
- 2. Introduce textbooks on the issue. Instead of reprinting textbooks to include this curriculum, a new textbook should be introduced (also available online for schools in poorer areas) to complement the teaching of sexual health.
- 3. Prepare teachers. This would involve some further training of teachers so that they are prepared on how to answer sensitive questions that students might have.

If schools followed this policy option, it would follow that more people would be aware of how to prevent spreading this disease, but also what options are available to them if they do suffer from it. Obviously, it is not a failproof method and will not stop everyone from partaking in unsafe practices, but currently Russia's population are not receiving any State sponsored information. Given the increasing numbers each year of people that are being infected with the disease, it is imperative that sexual education be made compulsory to bring the problem to the attention of the citizens and show how important it is to be aware when participating in any of the activities that could lead to the transmission of HIV/AIDs.

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