

## Chapter 6

# Conclusions

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Policy-makers in the health arena and beyond must certainly garner their resources to meet the growing need for and cost of health care. This report cites previous research showing that NCDs and injuries pose a great threat to Russians. Worse yet, that research shows that NCDs and injuries are killing Russians during their productive years, ages 15–64, and that the prevalence rate is rising markedly. Furthermore, the morbidity and mortality from these causes is significantly greater in the Russian Federation than in other countries.

The high mortality rate, striking people during their working years, is a blow to production, which in turn strikes doubly on economic resources. First, those people who die are not buying and producing goods and services; activities that would contribute to both the economy and Government revenues. Second, surviving family members of people killed by NCDs and injuries draw on Government resources with their needs – as do those household survivors who react to a death in the household by experiencing depression and increased alcohol consumption; risk factors believed to bring on yet more illness and death. Recent medical advancements have supported the health care model where health care systems focus on curing those who fall ill; however, it may be that this model is pursued at the Russian Federation's peril. NCDs and injuries are preventable, and prevention would avoid both the costs of care and the previously noted blows to the economy.

The follow-up question is obvious: how much of these costs could be avoided, either by better prevention or treatment? This report contributes to the previous research in order to provide, with as much accuracy and certainty as possible, likely estimates of the savings that would accrue from improving

health. We assessed three plausible scenarios that assume varying levels of success from intervention efforts, to present the range of savings that could be recouped. In this report, we describe as carefully as possible our statistical methods, conservative assumptions and the results from our methods and find little doubt that successful intervention would not only improve the lives of Russians but would also be good for the Russian economy – significantly so.

Our research shows that reducing the Russian Federation's mortality rates from NCDs and injuries to match the EU average rate (for the 15 EU Member States before 1 May 2004) by 2025 (or, more modestly, to half that rate) could contribute markedly to prevent a substantial levelling off of the pace of economic growth in the Russian Federation. Those estimates – which set aside the fact that if mortality rates improve, morbidity rates would likely follow suit and similarly accrue economic benefits – recommend serious consideration by policy-makers to increase health investments in the Russian Federation.

While little is certain in these times of rapidly changing health threats and medical advancements, the policy implication is that investing in adult health is a sound strategy that is likely to yield tangible economic returns (in addition to the welfare benefits) and, given the magnitude of economic benefits that can be expected from improving adult health in the Russian Federation, would produce a significant economic return. The intent of this research is to provide a foundation upon which policy-makers can allocate resources towards the greatest return on investment. We conclude that our research shows that reducing NCDs and injuries may be a very sensible course of action.