

**COMMISSIONER FOR HUMAN RIGHTS IN THE RUSSIAN  
FEDERATION**

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PARIS PRINCIPLES**

**I. Answers to the Guiding Questions for the focus areas of the IX Session of the Open-ended Working Group on Ageing: Autonomy and independence**

**Q. 1. In your country/region, how is the right to autonomy and independence of older persons defined in legal and policy frameworks?**

A. 1. According to the data, provided by the Russian Federal State Statistics Service (FSSS), the share of the older persons within the country's population of working age is on the rise. By the estimation of the FSSS, by the year of 2025 it will increase from 24.6 per cent (2016) to 27 per cent, that is, it will account for 39.9 million people.

The older persons are guaranteed by the Constitution of the Russian Federation of 1993 equal with all citizens of Russia social, political, civil, economic and cultural rights and freedoms; right to life (Art. 20), right to private property (Art. 35), social security at the expense of the state in old age (Art. 39), in case of illness, disability, loss of the bread-winner, for upbringing of children and other benefits established by law (Art. 39); the right to health protection and medical aid in state and municipal health establishments (Art. 41); the right to education (Art. 43).

Autonomy and independence of the older persons are legally provided by the measures of social support defined by the following Federal laws: "On the State Social Support" (of July 1999), "On Insurance Pension", "On the State Provision of Pensions in the Russian Federation", "On Veterans" (of November 1995), "On the Social Protection of Disabled People in the Russian Federation", etc.

**Q. 2 What other rights are essential for the enjoyment of the right to autonomy and independence by older persons, or affected by the non-enjoyment of this right?**

A. 2. With the aim to ensure the right of older persons to autonomy and independence there was adopted the Federal law “On the Foundations of Providing Social Services to Citizens in the Russian Federation” which entered into force from 1 January 2015. It provides older persons with rights: to be treated in respectful and humane manner, to be provided with free information on their rights and duties in accessible manner, to choose supplier of social services, to participate in drawing up of individual programmes. The law also provides the right to social support, the right to residence conditions in social service facilities that meet appropriate health and hygiene standards, the right to appropriate care and others.

**Q. 3. What are the key issues and challenges facing older persons in your country/region regarding autonomy and independence? What studies and data are available?**

A. 3. While implementing the state policy of the Russian Federation and its practical measures aimed at improving the situation of the older persons, the following existing problems related to their health should be considered:

- an increased level of general morbidity among the older persons;
- an increased level of chronic diseases among the older persons that generate the need for medical care, etc.

There are certain difficulties in ensuring accessibility and quality of medical care. So, the criteria for accessibility are defined - the waiting time for the doctor's appointment in the clinic, the waiting time for the arrival of an ambulance, for example, is set no more than 20 minutes.

In general, an increase in the number of older persons causes an increase in the number of citizens who experience difficulties with medical care.

**Q. 4. What steps have been taken to ensure older persons' enjoyment of their right to autonomy and independence?**

A. 4. Russia implements “The Strategy of Action for the Citizens of the Older Generation in the Russian Federation until 2025”, approved by Decree No. 164-r of

the Government of the Russian Federation of February 5, 2016. Its goal is to increase the longevity as well as the quality of life of older persons.

The support for older persons is provided in the following main areas: the financial provision of older persons and the stimulation of their employment; the improvement of the healthcare for older persons; the improvement of the geriatric service; ensuring access of older persons to information and educational resources; formation of conditions for the organization of leisure for older persons. In addition to the tasks of ensuring equal access to services in such areas as healthcare, social protection, food, culture, sports and others, the Strategy also provides for measures to encourage older people to continue working after retirement age.

**Q. 5. What mechanisms are necessary, or already in place, for older persons to seek redress for the denial of autonomy and independence?**

A. 5. In the Russian Federation there is a well-developed system of bodies and institutions whose activities are aimed at guaranteeing the rights of older persons.

In accordance with Art. 46 of the Constitution of the Russian Federation, everyone is guaranteed judicial protection of his civil, political, social, economic and cultural rights and freedoms, the right to life, free medical care, etc.

Decisions, actions (or inaction) of public authorities, local governments, public associations and officials can be appealed in court. The activities of the judiciary are an effective remedy for older persons, since, according to the current legislation, judicial decisions that have entered into legal force are generally binding and must be strictly enforced throughout the territory of the Russian Federation, and their non-fulfillment entails the responsibility established by law.

**Q. 6. What are the responsibilities of other, non-State, actors in respecting and protecting the right to autonomy and independence of older persons?**

A.6. “The Strategy of Action for the Citizens of the Older Generation in the Russian Federation until 2025” provides for an increase in the number of non-state organizations and individual entrepreneurs that deliver social services for older persons.

The Federal Law “On the Foundations of Providing Social Services to Citizens in the Russian Federation” introduced state financial support for socially-oriented non-profit organizations that provide social services.

**Guiding Questions for the focus areas of the IX Session of the Open-ended Working Group on Ageing: Long-term care and palliative care**

**Q. 1. In your country/region, how is long-term care for older persons defined and provided for in legal and policy frameworks? What types of support and services are covered?**

A. 1. The Constitution of the Russian Federation establishes that the Russian Federation provides state support to older persons, develops a system of social services, establishes state pensions, benefits and other guarantees for social protection, banning any discrimination of citizens, including older persons.

Long-term care services provided for the older persons are regulated, in particular, by Federal Laws “On the Foundations of Providing Social Services to Citizens in the Russian Federation”, "On Social Protection of Disabled Persons in the Russian Federation", by Decree of the Government of the Russian Federation No. 1236 of November 24, 2014 "On Approving an Approximate List of Social Services by Types of Social Services", by Order No. 861 of the Ministry of Labor of Russia and No. 1036 of the Ministry of Health of the Russian Federation "On the approval of methodological recommendations on the organization of social services and social and medical support for citizens who have completely or partially lost the ability to self-service" and others.

**Q.2. What are the specific challenges faced by older persons in accessing long-term care?**

A.2. Currently, older persons, including people with disabilities, receive medical and social services, which are provided on request and which are quite scattered. A significant number of people who need them cannot access these services. In the case of a person's illness or disability, long-term care is provided by relatives, friends, neighbors and acquaintances.

There are no correct data on how many people need long-term care, how many elderly people need home nursing, how many families need to be supported. There

is no relevant statistics, how many older persons could attend daytime leisure centers, how many patients need rehabilitation after treatment.

**Q.3. What measures have been taken/are necessary to ensure high-quality and sustainable long-term care systems for older persons, including for example:**

- **Sufficient availability, accessibility and affordability of services on a non-discriminatory basis?**
- **High quality of services provided?**
- **Autonomy and free, prior and informed consent of older persons in relations to their long-term care and support?**
- **Progressive elimination of all restrictive practices (such as detention, seclusion, chemical and physical restraint) in long-term care?**
- **Sustainable financing of long-term care and support services?**
- **Redress and remedy in case of abuse and violations?**

A.3. Older persons should be provided with care by family and community in accordance with the system of cultural values of a society. Older persons should have access to medical care that allows them to maintain or reestablish the optimal level of physical, mental and emotional well-being.

Older persons should have access to social and legal services to enhance their independence as well as improve legal protection and medical care.

Older persons should be able to use institutional care providing quality services for protection, rehabilitation, and social and psychological stimulation in a humane and safe environment.

Older persons should be able to enjoy human rights and fundamental freedoms, respect for their dignity, convictions, needs and privacy while residing in an institution that provides shelter, care or treatment.

**Q.4. What other rights are essential for the enjoyment of the right to long-term care by older persons, or affected by the non-enjoyment of this right?**

A.4. The right to health is of principal importance during realization of the right of older persons to long-term care.

The increase in the number of people of older age groups leads to an increase in the number of citizens who experience difficulties of medical, social and psychological character. About 80 percent of the older generation suffer from multiple chronic pathologies. Accordingly, the need for primary health care and specialized medical care for citizens of the older generation is higher than for people of working age.

Russian legislation envisages the provision of certain categories of citizens with the necessary medicines and medical products. The measures have been taken to optimize the location of pharmacies while new forms of targeted delivery of medicines and medical products have been introduced.

**Q.5. In your country/region, how is palliative care defined in legal and policy frameworks?**

A.5. In the Russian legislation, the concept of palliative care is defined in the Federal Law of November 21, 2011 No. 323-FZ "On the Fundamentals of Protecting the Health of Citizens in the Russian Federation". In accordance with it, palliative care is a complex of medical interventions aimed at relieving pain and alleviating other serious manifestations of the disease to improve the quality of life of terminally ill citizens. In pursuance of the law there have been adopted a few normative legal acts.

**Q.6. What are the specific needs and challenges facing older persons regarding end-of-life care? Are there studies, data and evidence available?**

A.6. Unfortunately, there is an insufficient number of institutions providing palliative care to the older persons in the Russian Federation. As a result, the majority of ill older persons are forced to stay at home.

The level of service in a number of state clinics is quite low. The drawbacks of such a service are caused by low financing, low salaries of medical personnel, lack of medicines and motivation on the part of the personnel.

**Q.7. To what extent is palliative care available to all older persons on a non-discriminatory basis?**

A.7. Palliative care provided by the state is free of charge, which is reflected, in particular, in the Program of State Guarantees of Free Medical Assistance to Citizens, approved by the Government of the Russian Federation.

**Q.8. How is palliative care provided, in relation to long-term care as described above and other support services for older persons?**

A.8. The legislation envisages three forms of palliative care: the stationary form when palliative medical aid is provided in an oncologic medical facility, or in the medical organizations which have palliative care units; the outpatient form when palliative care is provided in the day hospitals; palliative care at home. If a day hospital palliative care unit has its own transportation, then doctors can provide the necessary assistance to those who need it at home. The provision of palliative care at home is one of the main fields of work of the day hospital palliative care units and visiting care teams.

**Q.9. Are there good practices available in terms of long-term care and palliative care? What are lessons learned from human rights perspectives?**

A. 9. The Ministry of Labor of the Russian Federation develops the concept of long-term care for the older and disabled persons in the framework of the presidential assignment given after the meeting with representatives of charitable organizations.

Six regions of the Russian Federation (the Novgorod, Kostroma, Tver, Pskov, Volgograd and Ryazan regions) have been chosen for the pilot projects to develop new approaches to the long-term care and palliative care. Each of these regions will test that long-term care system, which seems to be the most convenient for this particular region.