

## **I. RESEARCH ASSESMENT**

### **Specific Research Goals**

During my stay in Moscow, my goal was to examine the ways in which alcohol abuse and treatment in contemporary Russia were approached by public health professionals. Primary research took place in Moscow city and Moscow oblast. In order to understand public health approaches, I interviewed public health professionals, health workers, and community advocates in Moscow who were working with the problem of alcohol abuse, alcoholism, and treatment solutions. Additional interviews were conducted with individuals involved with NGOs focused on treatment intervention and harm-reduction strategies.

My research strategy therefore focused on the collection of in-depth qualitative data to document the practices and perceptions among public health actors involved with the treatment of alcohol related illnesses and treatment programs. The primary qualitative data was collected using a combination of guided and semi-structured interviews with individuals who were working in the public health sector. While initial plans for research called for access to archives with primary data on public health matters, the unfolding of the interview process took up the majority of my time in Moscow.

### **Overall Research Project**

The research performed on this trip is an integral part of my doctoral dissertation. The overall goal of my research was to explain how the larger political impetus directed at stemming the nation's demographic crisis has or has not influenced Russia's struggle with alcohol abuse, particularly in terms of policy formulation and independent local responses. I employed qualitative methodology in order to document the experiences, strategies, and practices of those individuals in the Russian public health community who work with alcohol abuse and treatment. Given the aim of this project, emphasis was placed upon ethnographic research via interviews rather than archival research. Employing such an approach enabled me to fill in gaps among studies on contemporary Russian public health actors, specifically in terms of Russia's struggles with alcoholism and alcohol abuse.

### **Progress toward Project Completion**

Ultimately, I was able to complete a great deal of research. I conducted approximately 30 interviews over 4 months with various public health actors. Sites for interviews included university research institutes, "narcology" clinics in Moscow city, and non-profit organizations focused on substance abuse intervention and recovery. Furthermore, I collected a significant amount of primary material in the form of policy based texts and sources. Finally, I was able to expand the scope of my research to include not only health care workers but also several individuals who were accessing substance abuse treatment options. This added an important facet to my research by allowing for an additional set of perspectives from individuals who straddled the line of care provision and consumption in their rehabilitative spaces.

### **Aid and Obstacles**

The most important factor in achieving my research goals was the support given to me by ACIE staff in the US and in Russia. Advice and patience from the staff, and also from my instructors in the language program, provided invaluable aid during the research process, and proved to be the most important factors in pushing my research agenda

forward. Of equal importance were the individuals whom I interviewed, as they proved indispensable in providing help, advice, and references for pursuing additional contacts.

The greatest hindrance to completing my research was paradoxically, the object of my research itself. The health care system in Russia is sprawling and its organization is difficult to comprehend. To fully appreciate the number of research sites that would have been possible to visit would have required more than several months of research. The occasionally opaque relationships between various bureaucratic actors stalled the research process on several occasions. However, in these frustrating circumstances, previous interviewees or ACIE staff proved instrumental in breaking through such obstacles, because of their advice or other help.

An additional obstacle that cannot be overlooked was my unexpected appendicitis. After two weeks in Moscow I went to the European Medical Center (on the advice of an ACIE staff member), where I had emergency surgery to remove my appendix. The operation and my recovery went smoothly, the medical staff was kind, ACIE was very helpful, and after only two days in the hospital I returned to my dorm. The insurance process also went smoothly, and I was reimbursed relatively quickly. After returning to my dorm, I spent another two weeks recovering. Of course, this delayed my research, but on the positive side, it did not interfere with any ongoing interviews or appointments.

### **Policy Applications**

It is my opinion that this research is important for policy makers on several levels. First, it provides an important picture as to the disposition of the health care system in Russia, and Moscow in particular. While there has been research done by various scholars on the Russian health care system and its transformations since the collapse of the Soviet Union, I believe that this research project helps fill in several important lacunae. Particularly, such research shows the degree to which health and public health related services are being restructured in relation to initiatives by domestic NGOs, public health actors, and the state. Second, it fills in gaps regarding the disposition of addiction and substance abuse problems in the health care community. In highlighting the first factor regarding health care restructuring, additionally important are the mapping out of substance abuse responses emergent among public health actors. Third, it describes the growth of public health responses to treatment in the form of AA or NA. The emergence of decentralized programs that are affordable and easily replicable beyond the state public health sphere represents an important transition in how ideas of wellness are understood. Fourth, it highlights the role and outlook of health care workers toward Russia's problems with substance abuse and alcohol abuse. An important aspect of this research was the manner in which it helped describe the diversity of opinions among health care professionals regarding treatment and recovery for individuals dealing with substance abuse, and their outlook regarding the role of the medical and health care community in dealing with this issue. Finally, it characterizes the role and outlook of health care workers toward technology and information transfer regarding treatment. This final point highlights the common view shared among all interviewees for information regarding treatment practices and strategies. Cost and availability of information were cited as frequent obstacles, but all subjects expressed knowledge of wider academic discourses regarding medical practices. Furthermore, they also expressed a desire to build stronger international connections with communities engaged in similar research or practices.

**Research Communication**

I conducted several meetings with public health groups and actors. By far the most significant were the meetings I held with several local NGOs that worked cooperatively in Moscow oblast and Moscow city. This group led efforts to promote rehabilitative and treatment programs directed at individuals dealing with substance abuse related problems as well as their families. Further meetings were held with individuals who worked at narcology clinics in Moscow city. All parties expressed interest in my research project and were extraordinarily helpful in providing assistance throughout my time in the field.

**II. ACIE ASSESMENT**

ACIE was extremely helpful in helping me prepare for my trip and in assisting me during my stay. My travel and stipend worked out well and I was satisfied with the university I was affiliated with. My visa and check-in materials were handled without confusion and in a timely manner. I was very pleased with my lodgings in Moscow. Above all, ACIE was helpful in clearing up confusion as to my destination before my trip began. Unfortunate last minute changes that emerged from changes in Russian visa regulations drastically altered my research agenda, but ACIE handled everything in an efficient and competent manner.

In-country support was also excellent. In particular, I would point to the previous section of this report that describes my appendicitis to highlight the positive role that ACIE and its staff played for me in Russia. Finally, my Combined Research and Language Training program provided me with some of the best instruction and tutoring I have ever received. The staff of Moscow International University was easy to work with and their approach to teaching the Russian language was a perfect fit.

**III. FUTURE PLANS**

I am currently in the process of finishing my dissertation, with an estimated defense date of June 2009. The writing process will absorb much of my time for the immediate future. Upon completion of my dissertation, I am looking forward to authoring several articles based upon my research.