



INEQUITIES IN HEALTH CARE SYSTEM

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WHO Objectives For Health Care Systems

- Improving population state of health and improving equities improving acces to health care services;
- Protecting population from the financial risk due to the high cost of health care services;
- Improving the capacity of answers of health care system to populations needs;



World Health
Organization

EU Strategy Objectives

- Universal and equitable coverage of quality medical assistance
- Health care systems represents a central component of the high levels of social protection of EU and contribute to social cohesion and social justice
- Health care systems are integrated in the frame of general interest services



Inequities Regarding Acces

The System
Management
Is Not
Optimised

- Patients dont have equal acces rural vs. Urban;
- Chronic patients can go 200 km for specific treatment that are organised in a limited number of centres (national curative programmes like cancer, multiple sclerosis, haemophilia, etc.)
- The patients circuit is complicated
- The lack of integrated system
- Quality of care;
- Timely access;
- Affordability, out of pocket payments and unmet needs -> financial hardship
- Patients with multiple chronic conditions and patients with lower income are more vulnerable to the risk of meeting barriers in accessing quality healthcare



Inequities Regarding Health Care Professionals

Romania doesn't have a strategy for health care professional / What is EU strategy for professional health care?

- The number of physicians (almost 14.000 left Romania in the last 11 years)
 - Shortage of physicians and nurses for some specialities like ATI
 - Geographic distribution (600 small cities and villages don't have a family doctor).
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- At EU there is a lack of appropriate resources being **efficiently invested** in healthcare.
 - The safety and **quality of healthcare** in the EU is unequal, and key aspects of patient centered healthcare are not implemented.
- UE

The Health Policy – Patients Perspective

Main problems

- We have health strategy only on paper
- The main role of authorities is crisis management, they don't have a prevention and integrated policy;
- They react only to public pressure and solve urgent matters, but the main issues remain the same
- The level of bureaucracy is very high
- The health law suffers from hundreds of changes.
- The level of quality of medical services is not being monitored.

Patients Perspective

Patients in
the center
of system

- Collecting data in order to settle the real health care system priorities (like national patients registries);
- Transparent criteria for funding allocation;
- The need of a real reform of public health sector;
- An integrated health care system, that put in the middle patients and his needs;
- A new modern health legislation, realised after the consultation with all entities from health, patients associations included;

CONCLUSIONS

- Only an integrated and participatory approach can reduce health inequalities.
- A national plan for reducing inequities should be realised and implemented.
- Implementing a monitoring system of health care, that include not only health care indicators, but, also, indicators of socio-economics determinants for health.
- Planning the health care services only related to health needs and clear public health objectives and, especially with respecting the principle: health services centred on the patient.
- EU and member state decision and policy makers: to consider this roadmap and its recommendations when developing related policies and UN SDG implementation strategies;
- Patient organisations and civil society: to use this roadmap to engage with their governments, holding them to account for the implementation of the uhc;
- The larger health community, such as industry and the private sector: to consider their role in implementing relevant recommendations, take responsibility for actions and make progress

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THANK YOU!

