

ANALYSIS OF THE AVAILABILITY OF EFFECTIVE HEALTH CARE FOR THE POPULATION IN UKRAINE



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Abstract. The article presents the results of the analysis of the availability of effective health care for the population in Ukraine. It is revealed that at present, the problem of financial accessibility is characteristic, which is especially acute to the vulnerable groups of the population and is a threat to their social security. The problems of staffing and organizational availability of effective health care are described in addition.

Keywords: *accessibility, financial accessibility, efficiency, health care, medical services, social security.*

Introduction

Health protection of the population of Ukraine is one of the most important directions of building a social market economy in the state, a pledge of sustainable social development. Crisis events in recent years, attempts to reform the medical sector have not yielded significant results. One of the priority tasks in the framework of working out of the future strategy of health care reform is to determine the state of availability of effective health care and to work out ways to improve it.

The research on the issues of the availability of effective health care in previous years was undertaken by Bondareva L., Dubinsky S., Zayats G., Koretsky V., Orlova N., Solovyova O., Stepurko T. etc. However, further work is needed to identify the main obstacles to the availability of effective health care, in particular, taking into account the latest results of an all-Ukrainian public opinion poll.

In view of this, the *purpose of the article* is to substantiate the directions of improvement of the health care system on the basis of an analysis of the availability of effective health care for the population in Ukraine.

Research results

Article 3 of the Constitution of Ukraine recognizes the life and health of a person (along with honor and dignity, inviolability and security) in Ukraine with the highest social value. Article 49 of the Constitution of Ukraine establishes the right of everyone to health care, medical care and health insurance. Health care is provided by state financing of the corresponding socio-economic, health-sanitary and health-prevention programs. The state creates conditions for effective and accessible to all citizens of medical care. In state and communal health care facilities, medical care is provided free of charge; the

existing network of such facilities can not be reduced. The state promotes the development of medical institutions of all forms of property (1). In the Law of Ukraine "Fundamentals of the Ukrainian legislation on health care", constitutional provisions expanded with the assertion that every person has a natural and inalienable right to health protection. The society and the state are responsible to present and future generations for the level of health and preservation of the gene pool of the people of Ukraine, ensure the priority of health care in the state's activities, improve working conditions, education, life and rest of the population, solve environmental problems,

improve medical care and the introduction of a healthy lifestyle (2).

We agree with S. Dubinsky, who notes that, despite the principles proclaimed by the Constitution of Ukraine, the health care system does not ensure equal free access of the population to quality medical services, there is a poor quality of medical services and unequal access to health care services (3, P. 53).

One of the main principles of health care, according to Art. 4 of the Law of Ukraine "The Fundamentals of Ukrainian Health Law", is the equality of citizens, democracy and universal access to health care and other health care services (2).

We support L. Bondareva's opinion that the realization by the state of citizens' right to access and quality of health care, which directly affects the state of public health determines also the level of civilization of the state itself, and for Ukraine the availability of medical care can become one of the important criteria on which its membership in the cohort of developed countries depends (4, P. 14).

According to N. Orlova and V. Koretsky, the reform of healthcare system in Ukraine was supportive of the transition to a competitive model. However, according to scientists, in the course of market reforms, it was not possible to avoid aggravation of social problems and to prevent a significant decline in the living standards of the majority of the population; the health problem has become a sharp deficit in funding. The state has not created conditions for the implementation of human rights to health, which is a pledge of development of society and strengthening of national security (5, p. 60).

In the theoretical and economic plane, we will pay attention to S. Dubinsky's remarks that some of the medical services have the characteristics of "public goods"; they are the object of collective consumption (for example, sanitary and hygienic measures related to the prevention of infectious diseases); insufficient consumer awareness of the price, volume and quality of acquired goods, on the one hand, on the other - the independence of the actions of producers and consumers; the principle of equality in obtaining medical care becomes a special role (3, P. 54).

We agree with the definition of L. Bondareva, who, under the availability of medical care, suggests to understand the organizationally secured opportunity to

provide timely and qualified medical care to the population of the country, regardless of geographic, economic, social, informational, cultural and linguistic barriers (4).

Turning to the analysis of the issue of the availability of effective health care, we will pay attention to the scientific evaluation of reforms in this area. Thus, N. Orlova and V. Koretsky argue: "The state-guaranteed" free medical aid also did not become a reality. There was a situation in which the state provided guarantees, but did not secure their financing. The choices made by the consumer of medical services also did not change, although the reforms had tents to expand them. Only those who can pay for it receive quality medical care. Others feel the negative attitude of the medical staff and therefore postpone the visit to the doctor. From here - launched and chronic forms of diseases" (5, P. 60).

In this context, we will emphasize the availability of health care as a patient satisfaction with medical care. T. Stipurko claims that the satisfaction of the patient - whether the health care system, or medical care - in post-Soviet societies is often considered subjective assessment and ignored in the development of measures to improve health care. However, it has been proven that the positive previous experience of applying for a doctor makes it easier to overcome the doubts about applying for health care. In addition, satisfied patients are ready to comply with the doctor's prescriptions and in the event of unusual reactions when taking medications do not interrupt their consumption, and seek advice from a specialist. An additional effect is shown in providing patients with recommendations to others to seek medical assistance (6, P. 82).

O. Solovyov notes that in Ukraine there are considerable problems precisely with the provision of affordable medical care, in particular, such problems as inequality in access to medical care of different population segments are singled out; poor quality of medical care; the need to pay for medical services from personal funds, etc. (7, P. 109).

The State Statistics Service of Ukraine in October 2017 conducted a selective survey of household members involved in the survey of living conditions regarding their state of health. The information in the collection

describes a subjective assessment of the health status of household members.

In 2017, the number of households in which one of the members needed medical care during the last 12 months was 98.0%, while in rural areas - 96.9%. At the same time, the number of households in which any of the members during the last 12 months had not been able to receive medical assistance if necessary, the purchase of medicines and medical supplies in urban settlements amounted to 28.9%, in rural areas - 29.3%. In the vast majority of cases, the receipt of medical care was hindered by high cost. 97.8% could not afford to buy drugs because of high cost (2.0% could not find, 0.2% - other reasons); to buy medical supplies - 96.6% (1.5% - could not find, 1.9% - other reasons); visit the doctor - 74.0% (absence of a specialist of the required profile - 17.1%, the queue was too long - 8.9%); to visit a dentist - 98.0% (absence of the medical specialist of the necessary profile - 1.5%, the queue was too long - 0.5%); to make prosthetics - 99.2% (absence of the medical specialist of the necessary profile - 0.6%, the queue was too long - 0.2%); to conduct medical examinations - 93.0%; receive medical treatment - 93.1%; receive treatment in a hospital - 98.0% (8, P. 58).

The share of households in which any of the members during the last 12 months has not been able to obtain medical assistance if necessary, purchase of medicines and medical supplies does not differ significantly depending on their place of residence. Some differences are observed only for the reasons for the inability to visit a doctor. Thus, the presence of a long queue is the most impediment to visiting a doctor in small cities (14.4%), in rural areas this indicator is much lower (3.7%), and the problem of high cost of services is also relatively low for rural areas (63.5% vs. 70.6% in small cities and 88.2% in large ones). However, in rural areas there is a problem with the doctors of the required profile, because 32.8% of those polled (8, P. 59) could not help.

Hence, the problems of health care availability can be divided into two parts: financial problems – the high cost of health services, which creates "price competition" from consumers and is in fact a shadow sphere that negatively affects the effectiveness of the health system. I am in general, as well as organizational and staffing issues, which, in our opinion, are not less sharp, however, until the financing problems are resolved.

The number of people in households has the following tendency regarding availability of medical services.

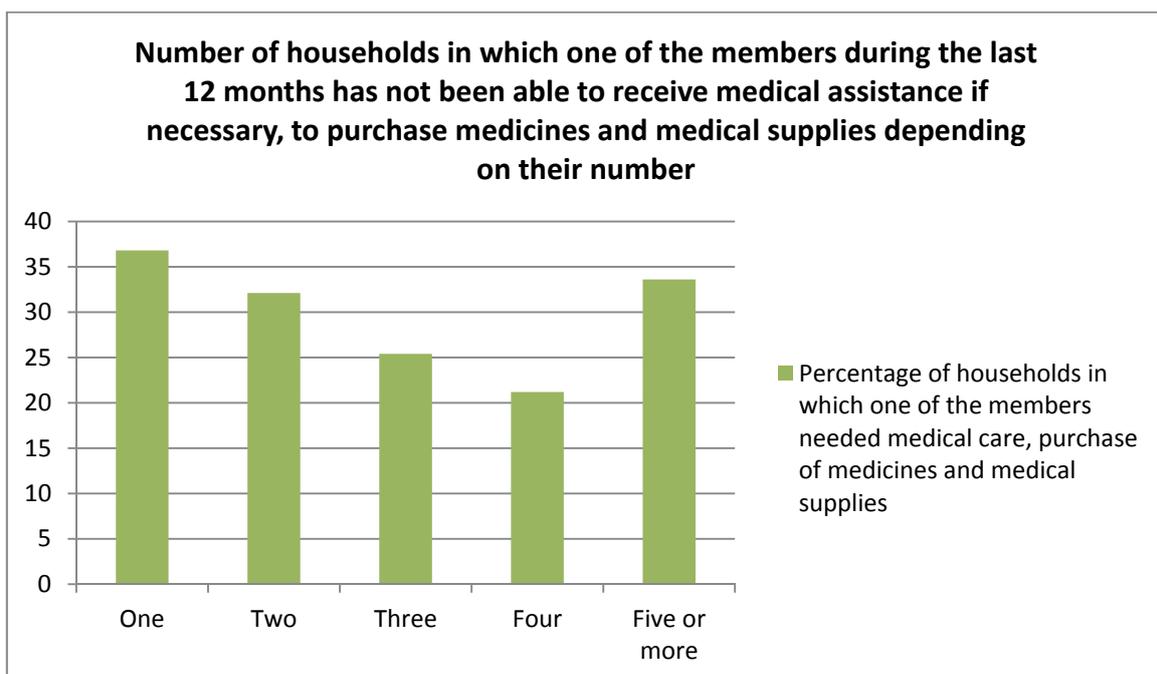


Fig. 1. Trend about the availability of medical services by the number of people in households. Formed by the author on the basis of (8, P. 61).

Within the framework of the concept of sustainable social development, health care for families with children, and especially large families, is particularly important. According to the survey, 98.9% of households with children were found, in which any of the

members during the last 12 months needed medical assistance, the purchase of medicines and medical supplies. At the same time, the following tendency was revealed regarding the availability of medical services (Figure 2).

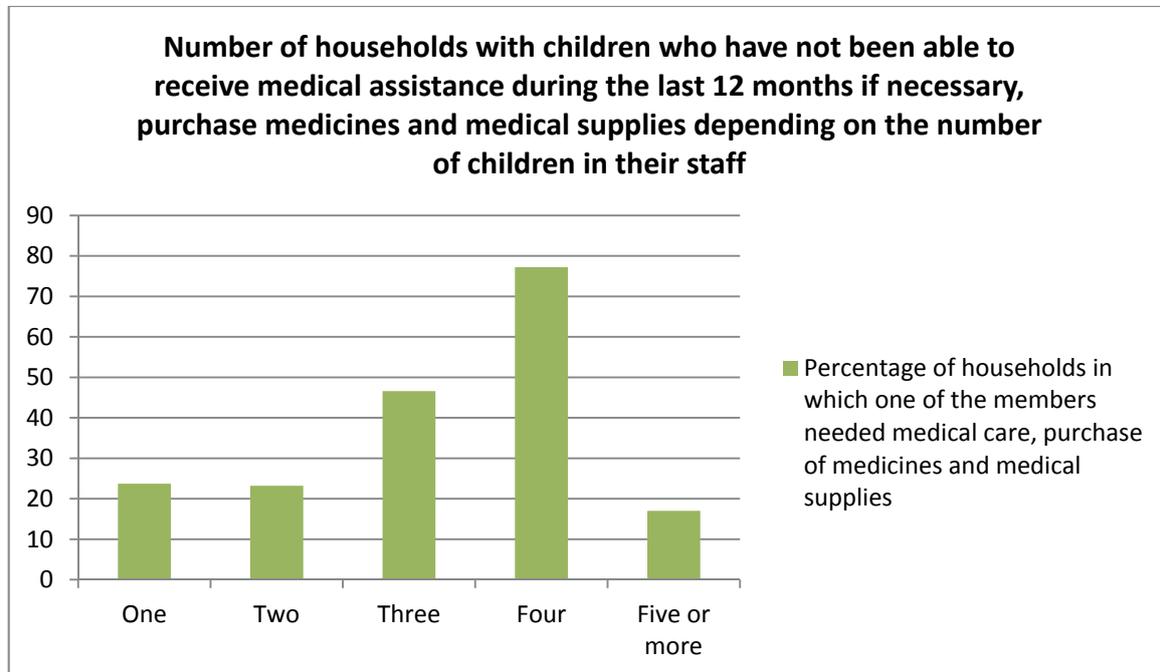


Fig. 2. Trend about the availability of medical services by the number of children in households. Formed by the author on the basis of (8, P. 63).

The illustrated situation generates the following considerations. Families with three or more children fall under the category "many children" and enjoy certain benefits in accordance with the Law of Ukraine "On State Assistance to Families with Children", "On the Protection of Childhood", and other laws of Ukraine, in particular, families receive discount on utility bills; children from large families receive the following benefits, such as the free reception of medicines by prescriptions of doctors; annual medical examination and medical examination in public and communal health care institutions with the involvement of the necessary

specialists, as well as compensation for dentoprotection costs; primary care in health care facilities, pharmacies and primary hospitalization; free travel with all types of city passenger transport, etc. (9)

Instead, we observe a situation that does not correspond to the appropriate level of social security of many families.

Equally important from the point of view of the functioning of a socially-oriented state of ensuring the availability of health care for households without children, in particular those with more than two persons at a disable age.

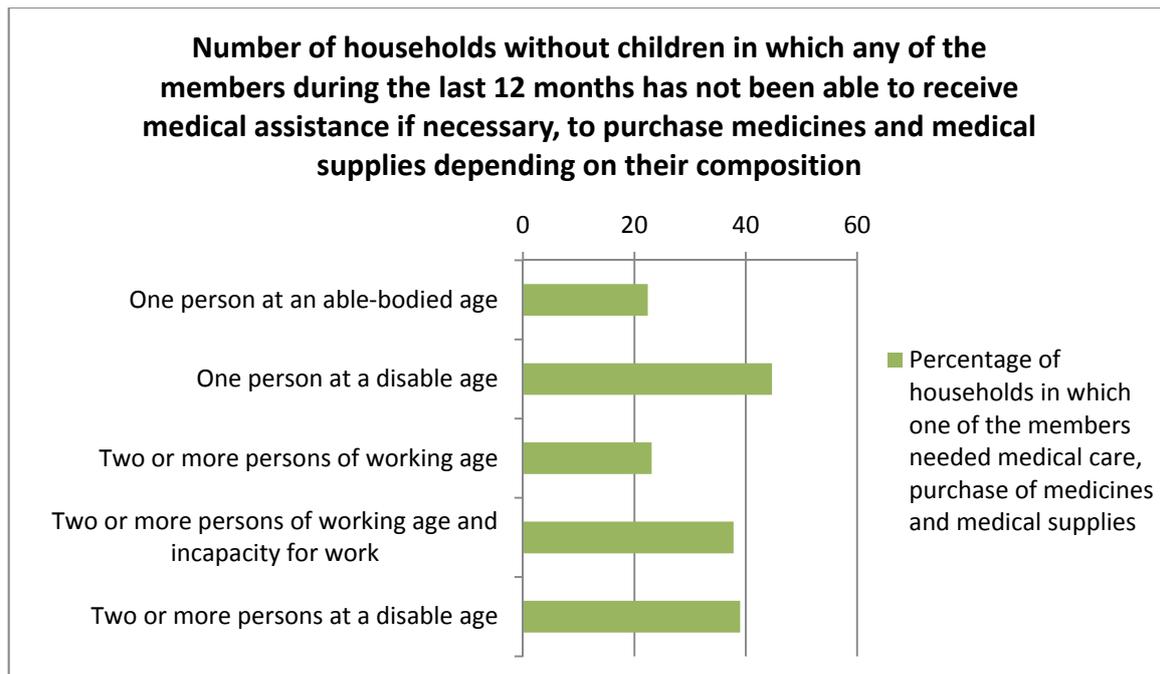


Fig. 3. Trend about availability of medical services in households without children, depending on their composition.

Formed by the author on the basis of (8, P. 71).

Given that the main reason for the impossibility of access to health care services is the cost of respondents, we see that the most vulnerable groups of the population are children from large families, orphans, persons of a disadvantaged age, are in a state of social danger. Such a situation, in our opinion, is unacceptable and requires an immediate solution in view of the prospect of sustainable social development within the framework of the processes of European integration of Ukraine.

G. Zayats noted that the complexity of obtaining medical services free of charge or their high cost is the main reason for problems with the services of a doctor, especially the poorer segments of the population. Hence, the availability of medical services is a complex problem, which reflects other problems - economic, social, political (10, p. 82). S. Dubinsky rightly observes that poor people are suffering from the lack of access to necessary medical care, in particular, there are disproportions in access to medical services for urban and rural residents, and the burden of personal expenses for public health services is high (3, S. 53).

L. Bondareva, who claims that the availability of medical care is due to the

balance of the possibilities of the state and medical resources of the country, also reveals the financial and resource component in issues of accessibility of health care; availability and level of skilled personnel, adequate financing of the industry, affordable transport, the possibility of free choice of specialists in the industry; level of public education on health care; rational and even distribution of medical technologies in a specific territory, quality of medical care (4). In a similar direction O. Solovyova distinguishes the organizational element of the availability of medical care, which consists in carrying out measures for the creation and guaranteeing of activities of diverse health facilities, as well as the provision of training of highly professional workers; an economic component - sufficient funding for health facilities; information component - awareness, education and awareness of the population on all aspects related to access to medical care, opportunities and methods of treatment, diagnosis, etc. (7, p. 11).

It should be noted that according to Article 16 of the Law of Ukraine "Fundamentals of the legislation of Ukraine on health care", the network of state and municipal health care institutions is formed taking into account the needs of the population in medical care, the

need to ensure the proper quality of such care, timeliness, accessibility for citizens, the efficient use of material, labor and financial resources, the existing network of such facilities can not be reduced (2). O. Solovyova in this context emphasizes that medical care should ensure the possibility of a person's free access to health care facilities for the prevention, diagnosis, treatment and rehabilitation in connection with illnesses, injuries, poisonings and pathological conditions, pregnancy and childbirth. Concerning private institutions, notes the scientist, the state should create conditions for their effective, qualitative functioning and

ensure effective control over compliance with their legislation, and this control should not be a barrier to their activities (7, 110).

In this regard, we will further emphasize that the development of private institutions in the health care system is necessary and stimulates the expansion of healthcare facilities in order to provide the population with medical services. However, the cost of treatment in the private sector of health care is quite high, which makes it necessary to find new models for financing the needs of households in medical services. This problem is especially relevant for low-income households.

Conclusions

On the basis of the research, it was revealed that the main obstacle to access to health care for the population remains the high cost of medical services. Unprotected sections of the population are particularly vulnerable in this situation. Ensuring their social security is an indispensable condition for achieving sustainable social development on the path of European integration of Ukraine. In addition, it has been found that access to effective health care is complicated due to the lack of required medical specialists in the required profile, as well as organizational issues, in particular the organization of queues, which is partly evidence of congestion in health facilities.

A *promising direction for further research* is the search for new models of financing affordable health care for farms within the framework of the strategy of sustainable social development.

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