ABSTRACT

PUBLIC HEALTH: LOOK FROM REGIONS

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WHO regards Public Health as a science and practice of preventing diseases, increasing life span, and improving heath by organized efforts of the entire society.

In the modern world health is recognized as one of the biggest values, an important component of social and economic development and well-being of any state and a guarantee of its national security. The world community calls for directing all the efforts to solving problems in the sphere of public health protection. The proof for that is the European strategic plan “Health-2020: Foundations of the European Policies in Supporting National and Social Actions for Health and Well-Being”[4].

In a similar way, in Ukraine one of the components of the reform of the national health protection system should be the development of the system of communal health protection, its strategic aim being the health preservation of the population through introducing the principle “Health Protection in all State Policies”.

The main mission of the health protection system is disease prevention – both on the individual and the population level. Still, nowadays the main focus remains on the medical service, and prevention is only declared despite the acknowledgement that 70 per cent of human health depends on factors, which the medicine is impotent to influence[5].

In Ukraine health prevention is oriented on curing diseases, not preventing them. One of the main tasks of reforming the medical sphere is re-orientation from treatment policies to health improvement and prevention policies. The aim is to create the system where every administrator of the central and local bodies of executive power will take into consideration the consequences of their decisions for the communal health and prioritize actions aimed to prevent diseases and traumas. The development of such system of communal health in Ukraine is one of the requirements of the Association Agreement between Ukraine and the European Union. Nowadays the term “public health” is perceived as a Soviet atavism in Ukraine. While the developed countries involve almost all state organizations and numerous non-governmental ones in the problem of communal health, Ukraine is only starting to learn this approach [1].
The decree of the Cabinet of Ministers of Ukraine from November 30, 2016, the Concept of the Public Health Development has been approved. Among other things, it deals with the impossibility of preserving the Soviet system by Semashko and the necessity of implementing a system of instruments and actions for preserving population health. The interesting detail is that functions in the sphere of public health will be performed, apart from the specialized ministry, by other executive bodies, for instance, Ministry of Nature, Ministry of Regional Development, Ministry of Agrarian Policies, Ministry of Education, State National Service of Extreme Situations, State Ecological Inspection, and others. Thus, we see that this Concept enables the state to involve almost all the organizations able to influence the human life quality to the problems of public health (as it is prescribed by the European and world declarations and norms) [2]. In August, 2017 the Cabinet of Ministers approved the action plan for realizing the Concept of Public Health System development. Still, the work done for this purpose remains insignificant.

The strategic methodological error during the development of such documents is that they are not designed by prevention specialists, but by clinical medical doctors. That is why everything offered for reforming the sphere is related to the improvement of medical service (medical assistance, medical services, medication supply, etc.). It is these ideas which create the foundation of the projects of new national system of health protection, considering that they are only its separate components. Prevention in these documents is declared, but is not logical and holistic. The newly-created state organizations in the sphere of public health concentrate their attention on questions of disease control, fighting AIDS, to a certain degree, tuberculosis, virus hepatitis, etc., that is, on programs financed by international institutions. Meanwhile, WHO focuses the attention of the member states on the ever-growing burden of non-communicable diseases (NCD), with their increasing mortality. Ukraine in this context shows the worst parameters, for instance, the mortality from heart and oncological diseases is 80 per cent of other nosologic groups.

Proper complex medical reform in Ukraine is not undertaken, and the present elements of change in the medical sphere mostly refer to financial and economic elements (with the aim of decreasing the load on the state budget). Often, the approved legal acts (laws, governmental decisions and orders) break the norms of the Constitution of Ukraine. The dispersion of functions and liquidation of the State Epidemiological Service did not improve the ecological and epidemic situation in Ukraine. Instead, the state bureaucratic machine of new structures has grown many times over.

Besides, the situation is aggravated by the lack of conscious attitude of citizens to healthy lifestyle (lack of rational nutrition, consuming substandard drinking water, mass ignoring of sports, alcohol abuse, smoking, and other detrimental habits are the norm for the Ukrainians). So, the situation present in the public health sphere and in the general health protection system on the national level has become an emergency and a threat to the national security. The Law of Ukraine “On the System of Public Health” offered by the Ministry of Health should have played a pivotal role in the further development of the public health system. But its nature is superficial and devoid of meaning; it is just a weak attempt to implement a new edition of the
Law of Ukraine «On Ensuring Sanitary and Epidemiologic Well-Being of the People» to this law project. That is why it cannot provide any appropriate legal support of the process of organizing the system of health protection [3].

The effectiveness of implementation of the planned actions is connected with the realization of the administrative and territorial reforms and determination of the role and place of the sphere of public health on all levels of administration (local, regional, and national). At the same time, the necessity exists to adapt the current legal foundations to solving new tasks in the sphere of public health, systemizing and correction of it according to the WHO and the EU requirements.

Nowadays, the corona virus epidemic in Ukraine showed that the main burden of anti-epidemic measures was taken by the “remnants” of the epidemiological service – State Administration «Regional laboratory centers of the Ministry of Health Protection of Ukraine» with their autonomous structural branches. The same thing highlighted the drawbacks of the preventive medicine. If the hierarchy of subordination and state financing did not exist, the modern system of preventive medicine would not have worked so effectively. No epidemiological research has been executed by the primary section medical workers, and even more so by family doctors. The second considerable issue is lack of epidemiological specialists (epidemiologists, assistant epidemiologists, disinfectors) in the regions. Some regions are completely devoid of epidemiologists. This does not even take into consideration the possibility for some regions to have more than one united territorial community (UTC). Consequently, the prospects could become even worse as not a single higher state medical establishment is training epidemiological and hygiene specialists.

Considering the background, one cannot fully fathom the requirement of the Cabinet of Ministers of Ukraine from February 17, 2021, №106 about transferring the public health center employees (regional, Kyiv) to the laboratory centres of the Ministry of Health and reorganization through integrating the public health centres (regional, Kyiv) to the health protection establishments of the respective administrative units. What’s the reason for doing that?

In the middle-range outlook we can expect the creation of a new public health model and its functioning aimed at health preservation and improvement, increasing the life span and quality, disease prevention, prolongation of active and able-bodied age, and, as a result, reducing the economic burden to the health protection budget.

References: