РОЗДІЛ 5. ДЕМОГРАФІЯ, ЕКОНОМІКА ПРАЦІ, СОЦІАЛЬНА ЕКОНОМІКА І ПОЛІТИКА

CONCEPTUAL MAP OF MEDICAL AND SOCIAL SECURITY SYSTEM REFORM: ISSUES OF HEALTH, NUTRITION, AND EQUALITY

КОНЦЕПТУАЛЬНА КАРТА РЕФОРМИ СИСТЕМИ МЕДИКО-СОЦІАЛЬНОГО ЗАБЕЗПЕЧЕННЯ: ПИТАННЯ ЗДОРОВ'Я, ХАРЧУВАННЯ ТА РІВНОСТІ

The article is devoted to the research question of increasing the efficiency of the medical and social provision system in Ukraine based on empirical calculations. The purpose of the study is to clarify those components of the medical and social provision reform and their sequence, which require priority attention to eliminating the gaps from the targeted constitutive indicators determined as a result of the benchmarking analysis of the foreign experience of the development of the medical and social provision system and based on the goals of the National Economic Strategy 2030. A conceptual map of substantiating the optimal parameters of the medical and social system is built. A GAP analysis was carried out on the development of the medical system of Ukraine in comparison with the European one. The areas of improvement of this system have been formed.

Key words: public health challenges; nutrition of population; food safety; inclusiveness; gap analysis; target indicators of health care system development.

Стаття присвячена розгляду питання підвищення ефективності функціонування системи медико-соціального забезпечення населення в Україні на основі проведених авторами емпіричних розрахунків у ході трирічної роботи. Робота супроводжується ілюстративним аналітичним матеріалом, який стосується питань забезпечення продуктами харчування населення України, основних світових проблем у сфері соціального розвитку та містить актуалын дані щодо рівня надання послуг медико-соціального призначення в Україні на сьогодні. Метою дослідження є з'ясування тих складових реформи медико-соціального забезпечення та їх послідовності, які потребують першочергової уваги для ліквідації розривів від таргетованих конститувних індикаторів, визначених у результаті бенчмаркінш-аналізу зарубіжного досвіду розвитку системи медико-соціального забезпечення та виходячи із цілей Національної економічної стратегії 2030. У статті побудовано концептуальну карту обґрунтування оптимальних параметрів системи медико-соціального забезпечення. Здійснено GAP-аналіз щодо розвитку медичної системи України порівняно з європейською, виділено певні орієнтири для плану дій щодо реалізації реформи медико-соціального забезпечення, серед яких запровадження механізму оцінювання раціональності використання фінансових ресурсів, упровадження гнучкої системи управління якістю надання медичних послуг, забезпечення участі громадськості у вирішенні питань у сфері громадського здоров'я, розроблення більш досконалої системи мотивування медичного персоналу, розроблення комплексної системи аудиту в системі охорони здоров'я. Ідентифіковано, що основними компонентами концептуальної карти реформ системи медико-соціального забезпечення є три стратегічні напрямки: політика в сфері охорони здоров'я, продовольча безпека, забезпечення рівності населення. Сформовані напрямки вдосконалення цієї системи через модернізацію ланок надання медичних послуг, концентрацію уваги на холістичному підході в наданні медичних послуг, оцінювання якості надання медикосоціальної допомоги населенню, реалізацію просвітницьких та інформаційних кампаній із попередження захворювань та ін.

UDC 354.53:364.444 DOI: https://doi.org/10.32782/bses.89-23

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Statement of the problem. The positive perception of the importance of a healthy lifestyle in the countries of the world has increased significantly after the COVID-19 pandemic, which updated the public's understanding that the absence of bad habits, chronic diseases caused by a sedentary lifestyle and monitoring one's nutrition to improve immunity can increase the ability of the human body to counteract adverse effects viruses and infections.

The question of sufficient quality of medical and social welfare of the population is needed not only at the level of the individual but also at the national level, which becomes possible through the implementation of a step-by-step, appropriate reform of the system of health care and social welfare of the population, which is primarily manifested due to the high level of food security, overcoming poverty and inequality among different segments of the population.

¹ This research was funded by the Ministry of Education and Science of Ukraine (grant numbers: 0122U000781; 0122U000778)

ПРИЧОРНОМОРСЬКІ ЕКОНОМІЧНІ СТУДІЇ

Analysis of recent research and publications. Several scientific works have investigated the issue of reforming the medical and social sphere and its impact on providing the population with vital social services and food security. Bara A.C. and her colleagues focused on the medical sphere reforms in Romania [6], Agarwal D. – on health care reforms in India [7], Mahiben M., R. Ologunde, Ayinkeran G. - on health reforms in the U.S. [8], while Us Ya., Pimonenko T., Tambovceva T., Segers J-P. mainly investigated green transformations in the healthcare sector [9]. Whitehead M., Dahlgren G., and Evans T. analyzed the features of healthcare reform in combination with considering the issues of equity phenomenon [10]. Scientific works dedicated to increasing the efficiency of the national medical system in the conditions of COVID-19 have gained special relevance. In particular, Hampel K.D. analyzes the impact of effective knowledge management and organizational intelligence on the ability of hospitals to respond to outbreaks of COVID-19. The authors proposed several hypotheses, which were tested using a medical personnel questionnaire and the PLS-SEM technique. The study confirmed the hypothesis that effective management of organizational knowledge and work productivity in the medical field is essential to countering the pandemic [11]. The main goal of the article of Adinolfi P. and Borgonovi E is to determine directions for improving the activities of national healthcare institutions with a proposal for future changes after identifying the strengths and weaknesses of the work of medical clinics based on the analysis of the opinions of their patients [12].

For each country, the process of reforming critical spheres of society's life has its characteristics, depending on the adopted standards of medical care, the political and institutional structure of society, the presence of opposing and stimulating factors for reform, etc. For Ukraine, reforming the medical and related social spheres is accompanied by the influence of such factors as the COVID-19 pandemic, which had its impact on the medical sector and the level of public health in 2020–2021, and the ongoing military conflict of 2022. As a result, we have significant problems in the medical field, infrastructural support, the number of medical personnel, and the level of food security. Therefore, the case of Ukraine should be considered separately, considering its inherited medical care system according to the Beveridge approach and the significant limitations imposed on this area due to the lack of material and human resources.

Objectives of the article. The purpose of this study is to find out which components of medical and social security reforms should be implemented and in what sequence to eliminate gaps in the development of these subsystems of socio-economic life in the country, which can be implemented in the form of a road map with a list of goals, indicators of their achievement and a list of essential steps at the national and local levels to improve the system of medical and social security in Ukraine.

Summary of the main research material. The volume of emergency medical care services has increased in Ukraine. At the same time, there has been a significant decrease in the provision of laboratory testing services (down by 13 %), oncology scans (by 24 %), gynecological examinations (by 26 %), patient rehabilitation services (by 27 %), pharmaceutical services (by 25 %), telemedicine services (by 36 %). Due to the war, disruptions in supply chains are observed, affecting the supply of medical equipment and pharmaceuticals, causing shortages in laboratory test kits, problems with drug storage due to power outages, and a reduction in critical medical personnel [1]. As of 2023, almost 8 million Ukrainians faced the problem of insufficient food consumption [2]. The number of households with a Food Consumption Score below the threshold of 42 is constantly increasing [3]. The food-insecure population includes about 1 million refugee returnees and nearly 1 million internally displaced persons. These are mainly people near the front line in the east and north of Ukraine (27 and 25 %, respectively) [4]. The geographic distribution of vulnerable population groups is presented in Figure 1.





An analysis of the main problems at the global level shows that the issues of poverty, social equality, and health care are among the top 7 issues that people around the world face and that they consider to be the most important to be solved and that have the most potent impact on socio-economic life of the population (Figure 2).

Analysis of medical and social security at the national level involves consideration of several links to this process. The first (local) regulates the conditions of public service by local health care institutions, local food security, infrastructure, etc. The second level (regional) refers to the macro level. It is regulated by local self-government bodies that are interested in providing a sufficient level of medical and social services to their population. The central place in the structure of the state policy of medical and social development is occupied by the third level - the national level, which is determined by the resource provision of the country, the tasks of the national social and economic strategy, and its targets. The critical entity of management and regulation at this level in the public health system is the Ministry of Health of Ukraine. The National Health Service of Ukraine is the central body of the executive power, which implements state policy in the medical care of the population under the medical guarantees program. This body is a national insurer that concludes contracts with healthcare institutions and is engaged in the purchase of services for the medical care of the population. The main agents of state policy at the fourth level – the international level - are international organizations, notably the World Health Organization.

The system of providing medical services includes all links to the provision of medical care: emergency, primary (the main, closest to the population link of medical care), secondary (specialized medical care in the case of diseases that require special treatment, diagnosis) and tertiary (highly specialized link of treatment in case of complex courses of the disease, which is provided in specialized, appropriately equipped medical institutions, mainly of the inpatient type). As for the block of training and improvement of medical personnel, in the system of formation of the educational potential of the medical field, an important role belongs to medical, pharmaceutical, and dental colleges, institutes, academies, and universities with academic programs of the corresponding profile. These institutions provide training, retraining, and improvement of medical personnel and their postgraduate education. The study of the healthcare market of foreign countries formed insights into the security of their systems of health development. Three leading healthcare systems have been formed in world practice: state, insurance, and private. The state provides direct financing of medical institutions and guarantees free medical services to all citizens of the country without exception. The basis of the insurance system is the participation of citizens or enterprises in financing the health care system either personally or through intermediaries - specialized insurance organizations. The private healthcare system is represented by private medical institutions, where patients pay for their services at their own expense.

The need to build an effective and resilient to the challenges of the external environment public health system of Ukraine today actualizes the issue of developing a comprehensive plan of actions and measures that can be combined within the framework of a comprehensive road map for the introduction of



Fig. 2. TOP-7 world problems according to the surveyed respondents in different countries of the world as of August 2024

Source: built using data from [5]

ПРИЧОРНОМОРСЬКІ ЕКОНОМІЧНІ СТУДІЇ

healthy development of the national economy. At the legislative level, the concept of public health was introduced as a category that describes the country's position in combating diseases, strengthening health, and increasing the healthy life expectancy of the population. In matters of public health management, the powers of the Cabinet of Ministers of Ukraine, the Ministry of Health of Ukraine and other central state authorities, and local self-government bodies are demarcated. It is planned to form a public health information fund as a state marketing and information resource, which contains data on the population's state of health and indicators of the living environment. It is essential to develop a culture of avoiding diseases of various natures and to cultivate disease prevention with a reorientation to the preventive sphere of the health care system, which allows the detection of diseases in the early stages and avoids more severe consequences of diseases for the human body at later stages in case of non-detection in time.

The identified problems and their potential consequences show a significant gap in the medical system of Ukraine regarding the provision of preventive work with stakeholders of the national economy, as well as the digital features of interaction in the healthcare system.

According to the results of the GAP analysis, among the measures to overcome the gaps in the medical system and the quality of medical care, the following can be distinguished:

 introduction of a mechanism for the rational use of financial resources of the health care system;

 development of a flexible quality management system for the provision of medical services, taking into account the best international experience;

- ensuring proportional participation of public

representatives in determining measures to reform the medical system;

 introducing changes regarding the forms and methods of motivating medical personnel;

 development of a system for monitoring public opinion regarding the effectiveness of reforming the system of healthy development of the national economy.

The generalization of empirical calculations in the previous works of the authors [17–20] and the results of the benchmarking analysis of the experience of foreign countries made it possible to substantiate the conceptual map of reforming the medical and social welfare of the population in Ukraine, which has the form of a decision tree, a kind of road map for the implementation of the proposed measures, which is preceded by clarification of priority steps to minimize gaps in the desired and existing level of development of the analyzed system state indicators (table 1). It has been identified that the main components of the map are three strategic areas: healthcare policy, food security, and ensuring population equality.

It is worth noting that the process of upgrading the existing system of medical and social welfare of the population, in addition to taking into account the problematic aspects of its functioning in the outlined directions, should also incorporate an assessment of the possibilities of achieving the constitutive indicators of the tasks of the implementation of this process. Considering these indicators to achieve goals will allow noticeable results to improve the entire system's efficiency. The generalization of the previous works of the authors makes it possible to form a schematic representation of the general idea of the conceptual map of the reform of the medical and social welfare system of the population in Ukraine (Figure 2).

Table 1

Target indicators of reforming the system of medical and social welfare of the population in Ukraine according to the results of the GAP analysis

Healthcare sphere	Food safety	Ensuring population equality
 to increase the life expectancy of the population, in particular the healthy, by 2 years every 5 years of implementation of the road map; to fulfill Sustainable Development Goal No. 3 (UN SDG) (reduce the incidence of AIDS, tuberculosis, and other socially dangerous diseases; increase the percentage of people vaccinated according to age against diseases included in the Vaccination Calendar in Ukraine to 95 %); increase the birth rate by 1,000 people and reduce the death rate by 100,000 people; reduce the number of cases of general disability; to raise Ukraine's position in terms of health development in the Legatum Prosperity Index rating by 20 points 	 to achieve 30 % yield growth in the agricultural sector; double the productivity of agriculture; achieving the economic availability of food products at a level of at least 60 % as a share of total food costs in the total sum of total household costs; ensuring food independence for individual products at a level not lower than 30 % as a ratio between the volume of product imports and the capacity of its domestic market; 10 % increase in food costume of you have a section of the sec	 to increase the employment rate of the population aged 20–64; to increase the ratio of the average pension and the average salary in the economy; to reach the level of income and social benefits not less than the average European level; reduction of the value of the Gini index to a level not higher than the European average; provision of 10 % income growth of the least well-off 40 % of the population

Source: formed by the author



Fig. 3. Schematic conceptual map of the substantiation of the optimal parameters of the system of medical and social welfare of the population in Ukraine

Source: detailed calculations are presented in [13-15]), formed by the author

Based on empirical calculations of the current state of providing for the medical and social needs of the population of Ukraine and the connection between the level of development of this sphere and other critical areas of social life (economic, financialbudgetary, and political-institutional), it is possible to develop a list of goals, indicators and steps to achieve the required level development of the health care system, which should be based on three key directions – the public health system, ensuring a sufficient level of food security and equality among the population (inclusive approach) (Figure 3).

Conclusions and perspectives of the future research. Preliminary empirical calculations allow us to form possible directions for improving the system of providing medical and social services to the population of Ukraine. In particular, a necessary process is the modernization of the preventive and prophylactic medicine system, all linked to the provision of medical services. It is advisable to implement the application of the holistic principle in treating patients further, which involves concentrating efforts not only on preserving physical health but also on the mental component of human health. One of the measures to improve the quality of medical services in the domestic health care system is the implementation of the experience of foreign countries in assessing the guality of medical services with its integration into the

electronic health care system of Ukraine. Additional measures that can stimulate positive changes in the public health system in Ukraine are implementing educational and information campaigns on healthy lifestyles among the population and creating and promoting the Ukrainian brand as an exporter of goods and services in the health care field. Prospects for further research are the further deepening of the list of measures and their filling within the framework of the road map of the medical and social provision system reform, which may reveal new policy directions for improving the medical system in Ukraine on its way to EU integration.

REFERENCES:

1. Researchers identify impacts of Russia-Ukraine war on health care systems impacted by combat (2024). Available at: https://medicalxpress.com/news/2024-05-impacts-russia-ukraine-war-health.html.

2. Number of people facing insufficient food consumption in Ukraine from May to July 2023 (2023). Available at: https://www.statista.com/statistics/1312674/ ukraine-people-with-insufficient-food-consumption/.

3. Measuring the Food Consumption Score (2024). Available at: https://www.scribd.com/doc/316443270/ Measuring-the-Food-Consumption-Score.

4. Vod R. The war in Ukraine continues to undermine the food security of millions. Available at: https://www.ifpri.org/blog/war-ukraine-continues-undermine-food-security-millions/.

5. Most important problems facing the world as of August 2024 (2024). Available at: https://www.statista.com/ statistics/946266/most-worrying-topics-worldwide/.

6. Bara A.C., van den Heuvel W.J.A., Maarse J.A.M., Bara A.C., Maarse J.A.M. (2002) Reforms of health care system in Romania. *Croatian Medical Journal*, vol. 43(4), pp. 446–452.

7. Agarwal D. (2006). Health sector reforms relevance in India. *Indian Journal of Community Medicine*, vol. 31(4), p. 220.

8. Mahiben M., Rele O., Ayinkeran G. (2013). Is health care a right? Health reforms in the USA and their impact upon the concept of care. *Annals of Medicine & Surgery*, vol. 2(1), pp. 15–17.

9. Us Ya., Pimonenko T., Tambovceva T., Segers J-P. (2020). Green transformations in the healthcare system: the COVID-19 impact. *Health Economics and Management Review*, vol. 1(1), pp. 48–59. DOI: https://doi.org/10.21272/hem.2020.1-04.

10. Whitehead M., Dahlgren G., Evans T. (2001). Equity and health sector reforms: can low-income countries escape the medical poverty trap? *The Lancet*, vol. 358, issue 9284, pp. 833–836. DOI: https://doi.org/10.1016/S0140-6736(01)05975-X.

11. Hampel K.D. (2021). Patients' assessment of medical services quality – a determinant of changes in medical entity management on the example of Poland. *Journal of Organizational Change Management*, vol. 34 (7), pp. 1270–1284.

12. Adinolfi P., Borgonovi E. (2018). The Myths of Health Care. Springer International Publishing, 272 p. DOI: https://doi.org/10.1007/978-3-319-53600-2.

13. Letunovska N., Demchyshak N., Minchenko M., Kriskova P., Kashcha M., Volk A. (2023). Management of country's social brand under conditions of uncertainty in the health domain. *Marketing and Management of Innovations*, vol. 14 (2), pp. 10–18. DOI: https://doi.org/ 10.21272/mmi.2023.2-02.

14. Letunovska N., Kashcha M., Smiianov V., Yefimenko A. (2023). Evaluation of countries' health systems effectiveness in the context of the COVID-19 pandemic linfluence on macroeconomic stability. *Pryazovskyi ekonomichnyi visnyk*, vol. 4(36), pp. 16–26. DOI: https://doi.org/10.32782/2522-4263/2023-4-3.

15. Kashcha M.O., Kolotilina O.V. (2023). Efektyvnist systemy medyko-sotsialnoho zabezpechennia naselennia Ukrainy pid vplyvom pandemii [The effectiveness of medical and social security of the population of Ukraine under the influence of the pandemic]. *Mekhanizm rehuliuvannia ekonomiky*, vol. 4(102), pp. 5–10.

БІБЛІОГРАФІЧНИЙ СПИСОК:

1. Researchers identify impacts of Russia-Ukraine war on health care systems impacted by combat. URL: https://medicalxpress.com/news/2024-05-impacts-russia-ukraine-war-health.html.

2. Number of people facing insufficient food consumption in Ukraine from May to July 2023. URL: https://www.statista.com/statistics/1312674/ukraine-people-with-insufficient-food-consumption/.

3. Measuring the Food Consumption Score. URL: https://www.scribd.com/doc/316443270/Measuring-the-Food-Consumption-Score.

4. Vod R. The war in Ukraine continues to undermine the food security of millions. URL: https://www.ifpri.org/ blog/war-ukraine-continues-undermine-food-securitymillions/.

5. Most important problems facing the world as of August 2024. URL: https://www.statista.com/ statistics/946266/most-worrying-topics-worldwide/.

6. Bara A.C., van den Heuvel W.J.A., Maarse J.A.M., Bara A.C., Maarse J.A.M. Reforms of health care system in Romania. *Croatian Medical Journal*. 2002. № 43 (4). P. 446–452.

7. Agarwal D. Health sector reforms relevance in India. *Indian Journal of Community Medicine*. 2006. № 31(4). P. 220.

8. Mahiben M., Rele O., Ayinkeran G. Is health care a right? Health reforms in the USA and their impact upon the concept of care. *Annals of Medicine & Surgery*. 2013. № 2(1). P. 15–17.

9. Us Ya., Pimonenko T., Tambovceva T., Segers J-P. Green transformations in the healthcare system: the COVID-19 impact. *Health Economics and Management Review*. 2020. № 1(1). P. 48–59. DOI: https://doi.org/10.21272/hem.2020.1-04.

10. Whitehead M., Dahlgren G., Evans T. Equity and health sector reforms: can low-income countries escape the medical poverty trap? *The Lancet*. 2001. Vol. 358. Issue 9284. P. 833–836. DOI: https://doi.org/10.1016/S0140-6736(01)05975-X.

11. Hampel K.D. Patients' assessment of medical services quality – a determinant of changes in medical entity management on the example of Poland. *Journal of Organizational Change Management*. 2021. № 34 (7). P. 1270–1284.

12. Adinolfi P., Borgonovi E. The Myths of Health Care. Springer International Publishing. 2018, 272 p. DOI: https://doi.org/10.1007/978-3-319-53600-2.

13. Letunovska N., Demchyshak N., Minchenko M., Kriskova P., Kashcha M., Volk A. Management of country's social brand under conditions of uncertainty in the health domain. *Marketing and Management of Innovations*. 2023. № 14 (2). P. 10–18. DOI: https://doi.org/10.21272/mmi.2023.2-02.

14. Letunovska N., Kashcha M., Smiianov V., Yefimenko A. Evaluation of countries' health systems effectiveness in the context of the COVID-19 pandemic linfluence on macroeconomic stability. Приазовський економічний вісник. 2023. №4(36). С. 16–26. DOI: https://doi.org/10.32782/2522-4263/2023-4-3.

15. Каща М.О., Колотіліна О.В. Ефективність системи медико-соціального забезпечення населення України під впливом пандемії. *Механізм регулювання економіки*. 2023. № 4(102). С. 5–10.