

EDITORIAL

IS IT NECESSARY AN ETHICAL ANALYSIS OF THE ROMANIAN HEALTHCARE SYSTEM?

The healthcare systems have been created to protect the universal human rights: the right to live and health. After the fall of communism, Romania has implemented major reforms of its public healthcare system, from a Semashko type centralized public healthcare system to Bismark social security system grounded on the social solidarity principle. Although these reforms were expected to raise some ethical problems due to the increased responsibility of individuals to their own health condition, no ethical analysis of these reforms has been performed so far [1]. The common European values, such as the respect for the population right to health protection and the provision of access to services; the respect for free choice and equal opportunity rights are mentioned as the grounds of the public healthcare systems and policies, but in real life, we notice some serious discrepancies. These reforms mainly focused on medical cost control, as a core measure for the improvement of medical services quality, thus encouraging a permanent chronic underfinanced healthcare system. This approach had negative effects on the population health, in general, and on the socially disadvantaged groups, in particular, by generating a gap between the health conditions of various social groups. These negative effects have also been emphasized by the general economic reform measures applied in Romania throughout this period, being now more intense, during this economic crisis [1]. These effects are the consequences of certain health policies that shifted from a social responsibility to the population health to the individual responsibility for the personal health condition, especially in citizens belonging to socially disadvantaged groups. The ratio between social responsibility to health (the social duty to promote collective efforts for the improvement of the population health, measured by a reduced morbidity and mortality rates) and the individual responsibility (the individuals' duty and capacity to take care of his or her health condition) was unbalanced, because the state gave up its role of health rights guarantor. Although these policies promoting social discrepancies in the healthcare system represent an alienation from the health policies specific to the European countries, the impact of these social inequities on the population health condition in general and on the economic development of Romania has never been subject to public debates or systematic research. An ethical analysis requires a separation between the social discrepancies and social inequities in healthcare, or, in other words, unfair discrepancies in the healthcare system. The social inequities in the healthcare system are the result of certain social arrangements and not of personal choices. Therefore, social responsibility should be extended in order to eliminate these unfair social arrangements with negative impact on the population health condition.

The lack of funds for medical services [5], partially generated by the system's

incapacity to collect funds, raised not only medical staff's discontent and resistance to reform [3], but it also produced significant discrepancies between social groups in respect of healthcare. For example, in the absence of funds, the social security system decided that those persons with no contributions to the social security system or the persons who are not exempted from this contribution by law, should no longer be insured, if they decide not to pay their individual medical insurance. Although we do not know the exact number of persons with no insurance, we do know that this measure represented a mechanism that denied the access to medical services to certain disadvantaged social groups, such as unemployed people or those who no longer benefit from unemployment state support, most of the persons living in rural areas, Roma people, and vulnerable population [2, 6].

Many articles of the Romanian Journal of Bioethics have approached the issues on the access to healthcare system by vulnerable populations from an ethical point of view [2, 4, 6, 7]. Now, the entire healthcare system should undergo an ethical analysis, in order to restore the balance between the social and individual responsibility, by cross-sector policies.

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