# Development of the health service infrastructure in rural areas

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## **ABSTRACT**

Sustainable development of Romanian communities, especially of those in rural areas is a basic requirement for development of the state and therefore, should be a priority for a good governance. Given the current situation, in which primary healthcare is provided only by the private practice of the family doctor, the state medical dispensary reestablishment becomes a vital condition both for the health of the community, especially in rural areas and for the support of other activities related to the social and medical field.

Keywords: community, rural areas, state medical dispensary, sustainable development.

## INTRODUCTION

Sustainable development of Romanian communities, especially those in rural areas is a basic requirement for the development of the state and therefore it should be a priority for good governance.

In this process, an important element of community members along with the educational, social and economic field is the health of the population, both in terms of demographics and of possibility to support and to develop the community by a healthy population. In this regard, the provision of primary care medical services and emergency healthcare is urgently necessary.

Romanian rural areas face major problems related to the delay of educational, economic, cultural, social infrastructure development, which determines a growth of population's migration to cities and to other countries during the last years. The phenomenon being caused mainly by young and relatively young persons, predominantly affects employment and the average age of those left.

Given the current situation, in which primary healthcare is provided only by the private practice of the family doctor, the state medical dispensary reestablishment becomes a vital condition both for the health of the community, especially in rural areas, and to support the medical and social activities that are extremely necessary.

# THE STATE MEDICAL DISPENSARY - IMPORTANCE AND ROLE

Supporting and developing the state dispensaries as free healthcare institution for the poor and the suffering, was a political priority since of Cuza Voda and Carol I, in the context of their efforts to modernize the young state and the Romanian nation, at that time a purely agrarian country.

Especially today, the effort of our predecessors should be continued in order to succeed the modernization of the rural areas, unfortunately remained in a hazy past.

What would mean the reappearance of the state dispensaries after more than 15 years?

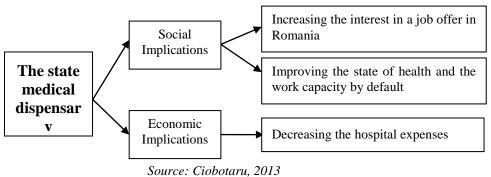
It primarily involves medical effects, to improve access to primary and emergency medical services, but would also generate benefits in terms of social and financial fields.

Thus, it could achieve a weight of population movement from rural areas to the city, otherwise quite expensive, to solve medical problems and thus a reduction in the present level of overcrowding of hospitals and also a possible stop and perhaps, who knows, even a reverse of the population's migration flow by turning the rural areas into an attractive environment for urban residents eager to settle (restore) in rural areas.

Although this trend is desired declaratory, the lack of basic services and infrastructure are major impediments for the voluntary migration of urban population in the opposite direction compared to the flow forced by authorities for the industrialization in the 50s -60s.

When we talk about rural areas, shown against a geographical backdrop and of stereotypes already known, we must keep in foreground the residents, mostly elderly, with very low income, but who represents 47% of the population, a population that generates an important part of the national morbidity and of public health problems from multiple causes, from the living conditions to those of education and nutrition.

Figure 1: Social and economic implications of the state dispensaries' re-establishment



The improved version that I propose is an upgrade version of the one stipulated in the Law 3 of 1978 on health insurance, at a multifunctional medical center, freestanding, appropriate with the changes in conception and in specific legislation of the new millennium, without occupational duties, but with keeping the 5 main attributions and adding possible medical and social meanings:

- 1. public health assistance;
- 2. basic primary health care;
- 3. delivery houses;
- 4. stationary;
- 5. qualified first aid;
- 6. support / core for medical and social activities and community activities.

Through this latter attribution it could act as a platform for medical, social and community activities and could even be a bridge of contact, liaison and communication between various non-governmental organizations and community. For the subscribed population, the existence of a state medical dispensary and of public health nursing and general medicine, in areas without family doctors, would be extremely important, even vital. For healthcare professionals would mean mainly the existence of a job offered by the state, while by funding from the Romanian Health Fund would mean an assurance of stability.

Thus the dispensary doctor would work on the old principle of territoriality, with limited and well defined competence and area of interest and action, especially in public health, unlike the family doctor who is working in a private practice regime, on the principle of free choice of treating doctor by the patient, without territorial limitation.

The dispensary doctor should perform public health actions disposed by the Ministry of Health under the governmental strategies, under required immunizations for the population, would oversee and monitor the health status of the population ascribed to the state dispensary and would be the basic unit for health monitoring in the territory through regular reporting of

indices and indicators set by the Ministry of Health and by the County Directorates of Public Health.

The state medical dispensary, according to rural or urban location, could have several roles and therefore different responsibilities.

If we consider the organization and powers of state dispensary stipulated in the Law 3 of 1978 on health insurance basically all we have to do is to update and add more just something specific from the new millennium, although essentially the organization and the way of living, particularly in rural areas, remained somewhat frozen in time and not much different.

Especially in the current problems faced by Romanian citizens in rural areas, two of these attributions would stand out, namely:

# 1. Qualified first aid and stabilization for medical disposal

The medical dispensary, especially in rural areas, can and should be the *first step for giving the qualified first aid and stabilization until the arrival of an ambulance*. To achieve this objective healthcare professionals must be well trained and accredited and the dispensary must have the minimum required endowment.

# 2. Delivery houses

Also within the dispensary structure, particularly in rural areas, should exist a delivery room and health professionals with higher or medium education capable of ensuring monitoring both the pregnant woman and a normal birth.

If the presence of a doctor or a midwife in a village was a possible fact since the second half of the nineteenth century, I do not think that today, in another century and another millennium, at a distance of more than 100 years, we could not provide a state of normality for its own citizens, especially in the context of declining birth rates, of the need to strengthen the role of the family and encourage population growth.

On the other hand, it should be noted that, if in those areas would have been dispensaries and even part of the needed healthcare professionals, it would not be justified the air evacuations of pregnant women on the verge of birth at term or some semi-medical emergencies in the isolated villages by heavy snow or other calamities, emotional gestures for viewers, especially if it is used a sound background to match the situation, but extremely expensive.

## THE MEDICAL DISPENSARY - PILLAR OF THE COMMUNITY

The concept of medical dispensary, especially in rural areas, exceeds the mere existence of a structure or activity.

The dispensary, along with the school and the church, is one of the main pillars of the existence of a community, essential for the development and ensuring of the continuity of the Romanian people. (Ciobotaru, 2013)

The existence of such an institution, in addition to the growing importance of the village and of its socio-cultural life, contribute directly to rural development, besides health ensuring of the base population, leading also to an increase in the attractiveness for urban residents who wish to settle (to return) in rural areas, but hesitate because of the lack of social services and utilities with which are used.

#### **CONCLUSION**

I believe that the reestablishment of medical dispensary in an updated version can bring a state of equilibrium and efficiency both in ensuring a coherent and effective public health policy and in ensuring an effective primary healthcare for the population, especially in rural areas and the isolated areas.

If until 1997 the opposition to the total privatization of primary health care was equivalent to a communist nostalgia and the incapacity to understand the light from the end of the tunnel vision, today, I think it has become quite obvious to more than one person, that the state

medical dispensary institution, an institution that is not of Soviet or communist origin, it is more necessary than ever.

I am convinced that only by bringing this concept in the Romanian society and thus restoring a network of public primary health care, unified coordinated at national level, acting as a platform/ support also for others medical and social activities, it might succeed the return to an acceptable level of epidemiological surveillance, of qualified first aid, to the financial balance of the public hospital system and to ensure a climate of medical safety of the population anywhere within the national territory.

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