

ENSURE UNIVERSAL AND AFFORDABLE ACCESS TO QUALITY HEALTH CARE

THE ISSUE:

Significant discrepancies across health indicators between Moldova and the EU remain. Non-communicable diseases (NCD) account for 88% of all deaths, with cardiovascular diseases as the leading cause (55%), followed by cancers, digestive system disorders, etc. There is uneven distribution of mortality (being higher in rural areas and among men). High rates of NCDs are driven by prevalent key risk factors (e.g., tobacco smoking, alcohol abuse, physical inactivity, poor diet). Prevalence of mental disorders also remains high in Moldova. Tuberculosis and multidrug-resistant TB has become a major public health problem along with a high incidence of HIV. More than a quarter of prison population suffers from drug dependency, and almost half of prisoners are registered as re-offenders. The access of vulnerable groups to primary care services and pre-hospital emergency care has improved, yet one-fifth of population has no insurance coverage. The level of out-of-pocket payments (formal and informal) is relatively high, paid mostly for medicines. The low availability of qualified medical staff in remote areas and elderly personnel are bottlenecks to providing services in rural areas. Health system remains over-centralized with unclear roles of central and local levels. Better access to high quality health services and healthier lifestyle remain high priority for everyone, as confirmed by the “The Future Moldova Wants” consultation campaign.

PROGRESS MADE:

The Government of the Republic of Moldova has approved numerous health policies and strategies and implemented reforms to improve efficiency, equity and health services delivery:

- Improved institutional capacities of the National Health Insurance Company (NHIC) and NHIC strategy endorsed;

KEY FIGURES:

- Life expectancy at birth – **71.8 years (men – 68 years, women – 75,6 years)**.
- **NCDs** account for **88%** of total deaths.
- **43.6%** of men and **5.6%** of women are **current smokers**.
- Republic of Moldova is **the second in the world** in terms of **alcohol consumption** - **16.8 liters** of pure alcohol and continues to grow.
- **56%** of population is **overweight** and **obese**.
- Roughly **one in four** on new patients and **two-thirds** of returning patients have **multi-drug resistant tuberculosis**.
- **HIV** mostly affects **young population** and **half of all new cases** are among the **working age population**.
- **More than half** of total health expenditure is **private**.
- Almost **three-quarters** of **out-of-pocket payments** made by patients for **healthcare** are for medicines.

- National policies and strategies on key NCDs and risk factors developed and approved (prevention and control of NCDs; national programs on diabetes, CVDs, mental health; tobacco and alcohol control; elimination of iodine deficiency disorders and reduction of iron and folic acid deficiency);
- Better NCD surveillance system in place using national surveys (COSI, MICS, STEPS, KAP surveys on alcohol and tobacco); capacity building of public health specialists and health managers in NCD prevention and control; tobacco / alcohol control legislation enforced with two national communication campaigns implemented;
- A National Public Health Strategy was endorsed in line with the EU requirements and European policy “Health 2020”;
- Health system assessments with health policy reports and recommendations (e.g., better NCDs out-

comes: challenges and opportunities; prices of medicines, availability, affordability and price components; framework to address out-of-pocket and informal payments for health services; costs of training health professionals, etc.);

- Youth Friendly Health Centers network has been scaled up in all districts and municipalities, strengthened through improved legal framework and capacity building for managers / specialists, including in-service YFHS curricula review;
- Evidence-based HIV treatment is secured by updating the national protocols for adults, conducting integrated bio-behavioral study, modes of transmission and estimations of sizes of vulnerable groups, evaluation of harm reduction programs and cost-effectiveness of opioid substitution therapy / needles syringe exchange programs. A Strategy on Safe Sexual Behavior was developed and training modules for 5-12 graders and guide for teachers for life skills based education (LSBE) curriculum;
- National TB Program review in Moldova, with key recommendations underpinning a strategic action plan for TB outpatient care, and first-line drugs secured for Transnistria region and pediatric formulations for the whole country through GDF.

WHAT REMAINS TO BE DONE:

- Extend universal health coverage and lower the financial risk for population, especially for the socially vulnerable groups, and provide better access to quality health services. Secure better access to quality and affordable drugs;
- Continue reducing the incidence and prevalence of key NCDs (CVD, cancers, diabetes) and associated risk factors (tobacco use, alcohol abuse, salt use, overweight and obesity, etc.) including mental health, violence, injuries and disabilities;
- Strengthen the governance of the health system and address the social, economic and environmental determinants of health and reduce the health inequities;
- Continue to improve the maternal, child, adolescent and youth health;
- Continuously address health-related millennium development goals including burden of drug-resistant tuberculosis, HIV/AIDS and vaccines preventable diseases, ensure the access of prisoners to medical treatment of dependency;
- Integrate mobility/migration aspects into strategies to reduce impact of migration on health.

HOW TO ACHIEVE IT:

- Through sustainable financing of the health system (e.g. health insurance, public health programs). Improve access to primary care coordinated health care services especially of vulnerable groups and the price control mechanisms and rational prescribing practices of medicines. Increase the quality and efficiency of health care services;
- Strengthen national policy on key non-communicable diseases and risk factor prevention and control and implement the provisions of relevant national programs, including monitoring and evaluation tools for NCDs policies, including mental health, violence, injuries and disabilities. Provide tighter legal provisions on tobacco and facilitate an enabling environment to quit smoking; enforce and strengthen legal provisions on alcohol control, as well as food and nutrition policies. Strengthen NCDs control activities at primary care level and improve coordination at all levels;
- Improve the accountability, oversight and responsiveness of the health governance and ensure supportive environments to make the healthy choices for children and adults;
- Enforce the health policies and interventions related to the maternal, child, adolescent and youth health;
- Ensure access to HIV prevention, diagnosis, treatment and care services for all, improve the TB prevention and control activities tackling the social determinants of health and enforce control of vaccine preventable diseases; improve the infection control in healthcare facilities, appropriate treatment regimens; revise the appropriate legal framework regarding treatment of dependency.

References

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