



## Original Article

# Covid-19 Vs Challenge to a New Health Care Reform

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### ARTICLE INFO

#### Article history

Received: 2021-06-26

Received in revised: 2021-07-27

Accepted: 2021-08-27

Manuscript ID: [JMCS-2106-1208](#)

Checked for Plagiarism: **Yes**

Language Editor:

[Dr. Behrouz Jamalvandi](#)

Editor who approved publication: [Dr.](#)

[Zeinab Arzhegar](#)

DOI: [10.26655/JMCHMSCI.2021.5.12](#)

### KEYWORDS

Health policy

Transition

Health system

Protest

Public policy

Pandemic

### ABSTRACT

The absence of signs of legitimacy of power structures, and disagreement with the health policy lead to dissatisfaction, condemnation and protest moods among the population. This disagreement is manifested both at the level of consumers of services - ordinary citizens, and at the level of producers of services - the medical (professional) community. If until recently episodes with a low degree of public satisfaction with the quality of medical services were widely discussed in the media, recent years would have indicated protest moods in the professional group, portending the failure of health care reform. Today, one can hear the conventional wisdom everywhere that it is the medical community that must take full responsibility for solving the pandemic problem fully. However, the analysis of the transitional state of the modern public health system presented in the article, including in the context of the COVID-19 pandemic, shows the ability of this "state" to such challenges as political destabilization, public outcry, professional protests and much more. In fact, today we are witnessing a process of expanding the functions of the health care system from traditional, in particular, the provision of medical care to citizens, pharmaceutical activities, the development of state policy in the field of health care and social development, etc., to the area of non-specific and until recently marginal - we mean the ideological component, accumulating in wide layers of society, turns out to be capable of direct political action.

### GRAPHICAL ABSTRACT



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## **Introduction**

The coronavirus pandemic (COVID-19), which most countries are currently facing, has attracted worldwide attention to medicine [1-4]. The pandemic challenge is not only to ordinary people, but to existing national health systems in general. Epidemics have always occupied a significant place in the history of mankind, since they have affected entire societies [5, 6]. The reasons for their appearance are usually associated with the active interaction between civilizations and the emergence of crisis phenomena in society [7].

The media are increasingly exaggerating experts' assumptions that the pandemic situation is likely to mean the beginning of a new transition period for existing health systems in the modern world [8].

What choice of model or its construction can be successful for Russia at present? What, to a greater extent, corresponds to the level of socio-economic development of the country, the achievement of social equality and justice in the health sector, and is it perceived by the population as a legitimate practice? actual issues that require detailed study and analysis.

## **Material and methods**

The empirical basis of this study was mainly made up of materials from the media posted both in the Russian and international segments of the Internet. The specificity of the empirical base also determined the methodological base. The authors of this study analyzed data on global pandemic preparedness by country official statements and comments from experts in the field of sociology, medicine and bioethics. The analysis of these data was supported by the conclusions of fundamental scientific research of Western European philosophers, sociologists and political scientists of the second half of the twentieth century.

## **Result and Dissection**

In the history of the development of healthcare in developed countries, qualitative changes (transitions) in the system from one state to another are not so long and have a formalized qualitative certainty. In the history of the post-Soviet period of Russia, these qualitatively

defined states are difficult to differentiate. The post-Soviet Russia healthcare reform appears to be a continuous transition period. Here, the new is constantly adjacent to the old, superimposed on it and, not having time to establish itself, is supplanted by something else. Unlike Western countries, the transitional state of healthcare for Russia is the norm, and hence the history of its development appears as a series of transitional states. Certainty, on the contrary, exists only as a rare, short-term exception.

The absence of signs of legitimacy of power structures, and disagreement with the health policy lead to dissatisfaction, condemnation and protest moods among the population. This disagreement is manifested both at the level of consumers of services - ordinary citizens, and at the level of producers of services - the medical (professional) community. If until recently, the media widely discussed episodes with a low degree of public satisfaction with the quality of medical services, recent years would indicate protests in the professional group, portending the failure of the health care reform that began in 2010, when the law on compulsory health insurance was adopted. Initially, its goal was to optimize costs by closing down inefficient hospitals and expanding the use of high-tech medical organizations. Other key reform programs include: Presidential Decree on Improving Health Care Policies (since 2012); "Road map" of the Russian government to achieve certain indicators in this area by 2018; and the "Healthcare Development Strategy of the Russian Federation until 2025" [9]. However, reformist ideas did not find proper support from the professional community, but on the contrary, exacerbated the already difficult situation in the industry. Protecting and defending their rights, the medical community went to rallies. So, according to the Center for Social and Labor Rights, from January to September 2019, 1,443 protests took place in Russia. Among which, - the All-Russian campaign organized by the Alliance of Doctors trade union; a mass protest of 113 employees of the regional children's clinical hospital (Yekaterinburg), where doctors, nurses, and laboratory assistants signed an open

statement protesting their low salaries and their unfair distribution by the institution's management and others [10].

Currently, the situation is exacerbated by a pandemic of coronavirus infection. As French President E. Macron rightly remarked, the situation with the coronavirus is "the worst health crisis of the last century," which, in turn, further aggravates discussions on public health development [11].

According to the official information on the analysis of the Global Health Security Index, most countries of the world for a number of key factors were not ready for global epidemiological shocks. Thus, according to 195 countries of the world, the average score in terms of pandemic preparedness is 40.2 points out of 100 possible. Russia occupies 46th place in this rating with an index of points equal to 44.3 (i.e. slightly higher than the global one). Among the key factors affecting the state's preparedness for the challenges of the pandemic is the stability and efficiency of the health care system, not only in terms of early detection of morbidity, but also in terms of the level of protection of medical workers [12].

As Dmitry Mikhel notes [1], public discussions about medicine, healthcare and health will continue for a long time, and humanities scientists will play a huge role in them. It is worth noting that the interest of humanities in health problems is not new, despite the fact that competent judgments about medicine are the prerogative of doctors. However, since long time ago, there has been a fairly large number of works by philosophers and historians. Since the beginning of the 1970s, sociologists, political scientists, and others interested in public health issues have actively joined them. Such medical and humanitarian, or rather, humanitarian and medical research can be found in Foucault [13], Zol [14], Kondrad [15]. Researchers from the fields of the history of medicine, the sociology of medicine, the anthropology of medicine, the philosophy of medicine, medical bioethics, medical law, etc. are actively proving themselves. In recent decades, public health policies around the world have entered public arenas. Today we can safely speak about the emerging public health

policy area. Namely, the process of how interested participants are involved, how the actors unite (diverge), how decisions are made and their implementation is organized. Public policy focuses on the study of the problems of the emergence of new ideas and proposals in specific areas of policy (policy), some of which become further real reforms, and some remain their projects [16].

Today, one can hear the conventional wisdom that the medical community should take full responsibility for solving the pandemic problem fully.

The pandemic has provoked a business crisis, as a large number of social spaces where people are in contact are closed. Airports, shopping centers, sports facilities, cafes, restaurants and more - all these places are significant in the spread of viral infection. Therefore, the expectation of urgent measures to stabilize economic life is also turned towards the medical community.

Not to mention such phenomena as pain, illness, and even death, everyone has long been accustomed to the fact that they belong to the field of medical care. In a sense, medicine and its medicalization have deprived a person of a connection with his own nature. The population does not want to feel pain anymore, does not want to know anything about death, or to bear the burden of the disease. All this seems unacceptable for a comfortable modern life. In a developed consumer society, such manifestations as strength of mind, character, persistence in the fight against the disease, the ability to independently cope with the disease, to seek the causes of ill health, seem to be uncivilized rudiments. Everyone wants to quickly and easily eliminate the discomfort that interferes with a well-fed life.

### **Conclusion**

No doubt, it becomes clear that the existing public health system is in a state of search for new principles of organization. However, in practice this is an extremely difficult task, both from the point of view of achieving the optimal balance of efficiency and justice, and from the standpoint of maintaining political stability. Changes in health care need to be developed in

the context of public policy, because it is here that, ultimately, political decisions will be evaluated. It is also important to understand that the forces and means of only one medicine are not enough. There is a need for the complete mobilization of society and the use of new political tools for making proactive government decisions.

Of course, the problem of the sustainable functioning of the health care system in the world in general, and in the Russian Federation in particular, is currently in a special focus of attention not only from the official political structures, but also from the public. The flow of information, based on both factual and analytical sources of information, allows real-time tracking of the dynamics of the transformation of the healthcare system. Moreover, it becomes obvious that in the very near future, politics will have to establish closer ties with both fundamental science and social movements, since only by building a system of social communication that it is possible to overcome crisis situations that have manifested themselves in a complex epidemiological situation.

### Acknowledgements

The work is performed according to the Russian Government Program of Competitive Growth of Kazan Federal University.

### Funding

This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

### Authors' contributions

All authors contributed toward data analysis, drafting and revising the paper and agreed to be responsible for all the aspects of this work.

### Conflict of Interest

We have no conflicts of interest to disclose.

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### HOW TO CITE THIS ARTICLE

Ekaterina Valerievna Snarskaya, Ekaterina Yurievna Shammazova, Laysan Muzipovna Mukharyamova, Arthur Rustemovich Zalyaev. Covid-19 Vs Challenge to a New Health Care Reform, *J. Med. Chem. Sci.*, 2021, 4(5) 508-512

DOI: 10.26655/JMCHMSCI.2021.5.12

URL: [http://www.jmchemsci.com/article\\_136130.html](http://www.jmchemsci.com/article_136130.html)