First Line **Social** Health Care:

A Mutualistic Health Care Organization in Romania.

Asociatia De Ajutor Mutual













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Health Care:

• Health Care system after 1989:

- > Very slow changes
- > Arrears situation health care system
- Shrinking economy
- 1995-1998 Privatization: (British Dutch Bismarck model)
 - ➤ Decentralization: CJAS'ses (42) (buying care from public and private institutions and responsible for making contracts with hospitals)
 - > Structure for medical profession (admissions)
 - > Found social security system (CNAS)
 - > Organization and description tasks public health
 - > Organization, functioning and financing hospitals

<u> Health Care:</u>

Social security system for health care:

- > Strengthen position 'family doctor'
- > Decreased influence hospitals
- ➤ Negative effects:
 - decreased access due to smaller insured packet
 - this leads to increasing inequality in medical consumption
- ➤ Compulsory insurance:
 - employers and employees (5% + 5.5% on salaries)
 - self-employer (5.5% on brute income)
 - unemployed, prisoners and conscripts: state pays
 - children, veterans and handicapped: for free

Health Care:

• Facts about healthcare in Romania:

- **Expenses:**
 - 687 €/inhabitant vs. 2192 €/inhabitant in EU
 - 3.6 % of GIP vs. 8.% of GIP in EU
- ➤ GPs:
 - -2.2 doctors/ 1000 patients
 - -5.5medical assistants / 1000 patients
- > Hospital beds: 6.02/1000 inhabitants vs. 5.61/1000 inhabitants in EU
- ➤ Life expectancy: 76.2 years for women, 69.2 years for men
- ➤ **General mortality:** 964/100 000 inhabitants
- > The lowest rate of obesity in EU: 7.9%

Health Care:

...A health system should be seen as a unity, where the particular aspects become meaningful as they impact on the whole system: also, such a unity should be placed in a context.

...We have to start from the premise that health costs. We have to teach the Romanian society that health is not for free.

A mutualistic Organisation in Romania.



Asociatia De Ajutor Mutual Slatina-Timis

Why this project?

1. Generally:

- Changes in Romania and privatization, also in services.
- Certain categories of people are in danger to fell out the boat.
- Lack of financial means from the state to guarantee local health care will be first visible in the villages.
- "Gratitude money". Extra "black" money for treatments. Official and unofficial tariff lists.
- Changes in payment (honorary) of the providers will effect in no interest in a carrier in a village (difficult to find someone).
- ADR = Action **Villages** Romania.
- Insufficient control on quality and functioning of health care.
- Only few or no prevention activity and actions.

Why this project? (cont.)

2. Local:

- First line health care already longer a big problem in Slatina-Timis: practically no doctor, no dentist, dispensary in bad condition, most of the time no accessibility (permanence, phone, ...) etc.
- Healthcare was also a goal in the first project. This project was a continuation.
- Look for systems for an active participation of the people in health care. Own responsibility and participation.
- Learn to take future in own hands.
- Develop a new model that can show an alternative to organize the health care in Romania.
- A patient directed development of health care.

Integrated development project Slatina-Timis (VZW Geels Roemeniëkomitee with support from Flemish Government) 1999-2001.







Fundatia pentru Dezvoltarea Asociatiilor de Ajutor Mutual

A foundation created by : VZW Geels Roemeniëkomitee and LCM

- A Romanian foundation that can act in whole Romania
- •The aim of this foundation is to start local mutualistic organizations (ADAM'ses)
- •The pilot project of such organisation is Slatina-Timis
- •This foundation is the key point for future initiatives in the field of medical (health) and social activities
- The founders are 2 Romanians and 3 Belgians



ADAMSlatina-Timis

Asociatia De Ajutor Mutual Slatina-Timis

- Local organisation of mutual help in Slatina-Timis
- Created by the FDAAM
- •The aim is to offer the inhabitants of Slatina-Timis a good an accessible first line health care system based on the goals described by the foundation
- The general assembly exist of all members of ADAMS
- •This association is responsible for all local activities
- •The founders represents different institutions and organisations, specialists and users. Personnel of the medical centre are co-opted.
- •The board (6 Romanians and 1 Belgian) meeting is every month.



What exactly is an ADAM?

- Social Movement
- Solidarity
- Access to good qualitative health care
- Social services
- Democratic member organisation
- Financial means
- European standards
- Prevention
- Elimination of a polarized society

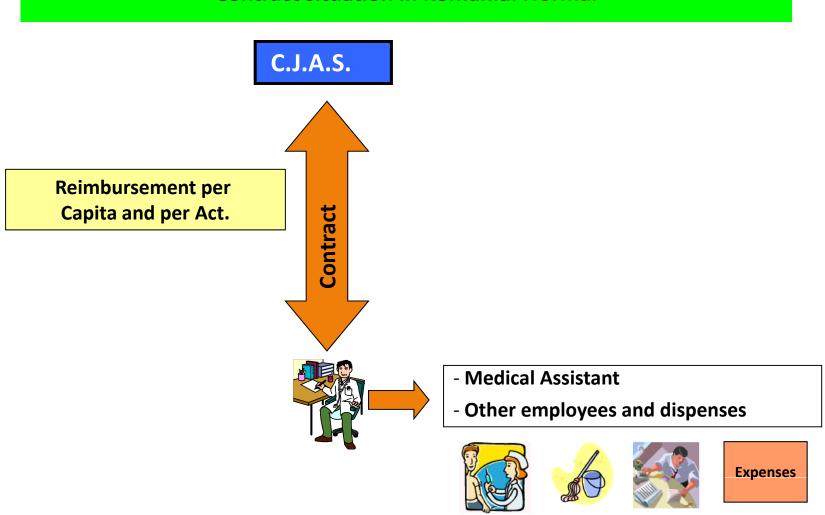


What exactly is an ADAM? (cont.)

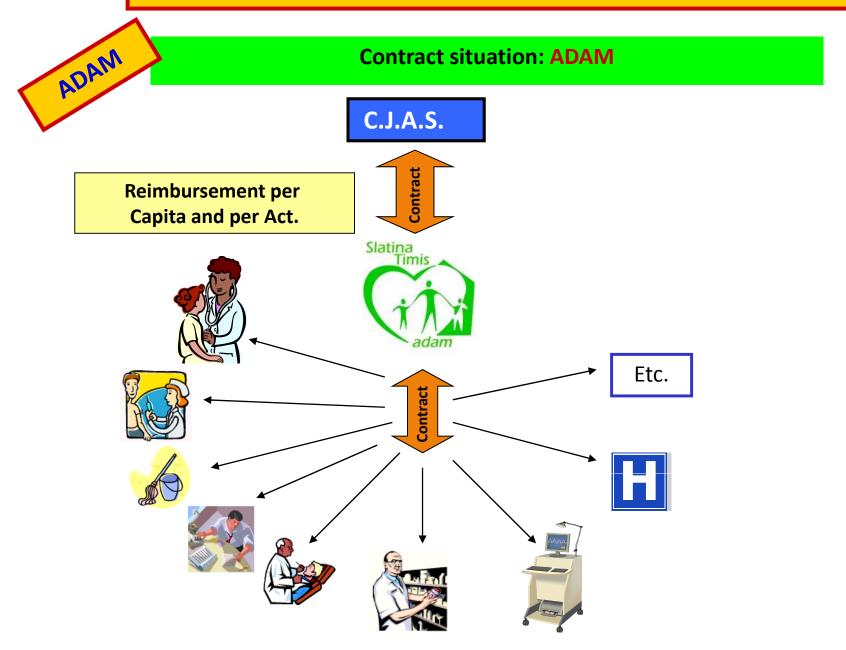
- Co-operation
- Volunteer engagement
- Non profit oriented
- Independent
- Contract with the CJAS
- •Close collaboration with own or contracted health care providers
- Social fixed prices
- •Close collaboration with CNAS & CJAS a win-win situation

Medical cabinet Family Doctor:

Contract situation in Romania: Normal



Medical cabinet Family Doctor:



















- •Contract ADAMSlatina CJAS Caras-Severin for doctor and dentist: first in Romania.
- •2 doctor cabinets: 1 doctor contract with ADAMSlatina.























•Treatment room + 2,5 assistants + 0,5 local coordinator: contract with ADAMSlatina (1 assistant mountain village).















• Dental cabinet: 1 dentist contract with ADAMSlatina.

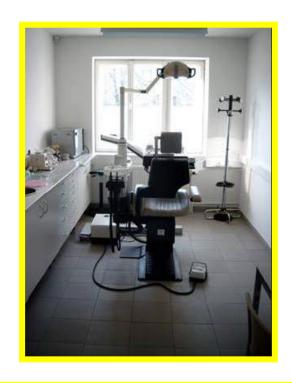
•Cleaning woman: contract with ADAMSlatina

Accountant: contract with ADAMSlatina





















- •Pharmacy fully equipped: contract third party with ADAMSlatina. Also parapharmacy.
- Evolving towards a social pharmacy.







- •2 medical points in 2 mountain villages.
- •ADAMSlatina as a member organisation: 1.724 members.







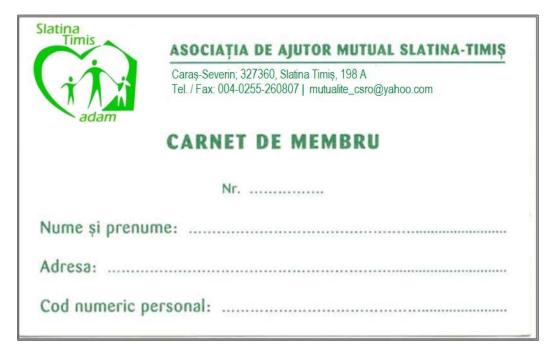


ADAM

ADAM: member organization.

ADAM: membership fee

- Contribution:10 RON 2007 15 RON 2008 et 2009 20 RON 2010 (€ 5)
- Reinvested in different services of ADAMS for the members.



Data	Cotivația	Semnātura și ștampila
2002		
2003		
2004		
2002 2003 2003		
2006		



- Mediotheque.
- •Small kitchen and bathroom.
- •Cooled stock room.



















- •Waiting room, secretariat, WC's (also for handicapped people).
- •Terrace and garden: meeting places
- Automatic international phone line medical centre and cabin outside.
- •Internet and e-mail, fax.
- Copy service.
- •Meeting rooms: 3 for 15-20 people; 1 for 30-35 people.
- PC-room: PC-classes.
- •Big exposition hall.





















- Revalidation room and equipment.
- •Consultations specialists.
- •ECG.
- Packet for newborns.
- •Body care: women (by women organisation).
- Counselling.
- •Guard.
- Home care (visits).







- •Contact 2nd line: hospitals Caransebes, Resita and Timisoara.
- •Care of the sick: organisation.























- •Glucose measuring diabetics + diabetics passport + diets information.
- •Light therapy.
- Vaccinations + vaccination card.
- Echography.

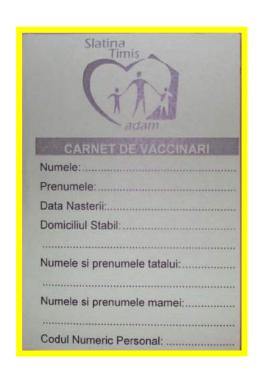






- Medical control school people (in pipeline).
- •Urine examination: sticks en microscopically.
- •Reflexology (in pipeline).







- Eye tests and reading glasses.
- Social fund.
- First aid football matches Slatina-Timis.









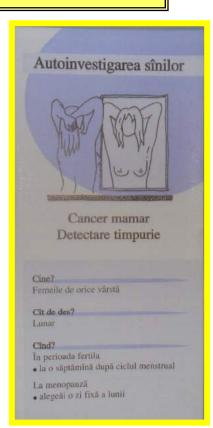




•Health promotion.









- •Service car Dacia Pick-up.
- Packet newborns.
- •Hearing aids (in pipeline).
- House for organisations.
- •Diploma's schools.
- Support social organisations.

• ...





Health situation in Slatina Timis: Comparison 1990-2000 & 2000-2010

- Beneficiaries (primary and secondary): 7000
- People inscribed on the ADAMS list= 2584
- MEMBRII ADAMS = 1658

1. AVERAGE AGE OF DECEASED PEOPLE:

1990-2000 @ 68,1 years

2000-2010 **73,8** years

2. INCIDENCY OF INFECTIOUS – CONTAGIOUS DISEASES

1990-2000 = 40%

2000-2010 = 18%

A) TBC Ex:1996- 3 cases 2002- 2 cases

1997- 3 cases

2003 ----

1998- 4 cases

2004- 1 case

B) HEPATITA: 1990-2000 © 21 cases

2000-2005 3 cases

2005-2010 ® none



Health situation in Slatina Timis: Comparison 1990-2000 & 2000-2010

3. PREVALENCE OF THE CHRONICAL SICK

a)TUMORS - CANCER

1990-2000 @ 28 cases

2000-2010 **7** cases

b) DIGESTIVE AFFECTIONS

1990-2000 @ 62 cases

2000-2010 **12** cases

c) LUNGS SICKNESS

1990-2000 **50** cases

2000-2010 **2** 26 cases

d) RHEUMATISMS

1990-2000 **45** cases

2000-2010 **4**0 cases



Health situation in Slatina Timis: Comparison 1990-2000 & 2000-2010

e) HEART DISEASES

1990-2000 **148** cases

2000-2010 **155** cases

*in alignement with the ongoing increase of the national average rate

f) DIABETES TYPE 2

1990-2000 @ 21 cases

2000-2010 **36** cases

g) RHENAL DISEASES

1990-2000 **21** cases

2000-2010 @ 19 cases

































First Line Social Health Care





Possible Structures:







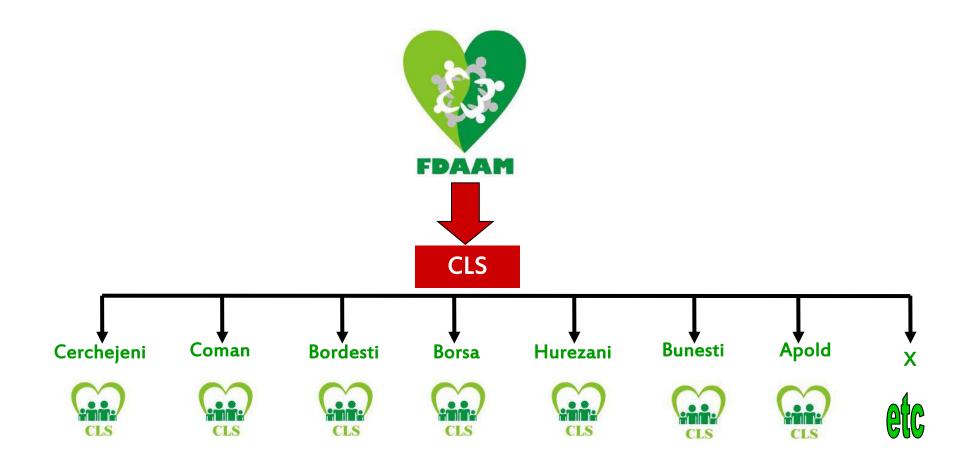


Health Shop

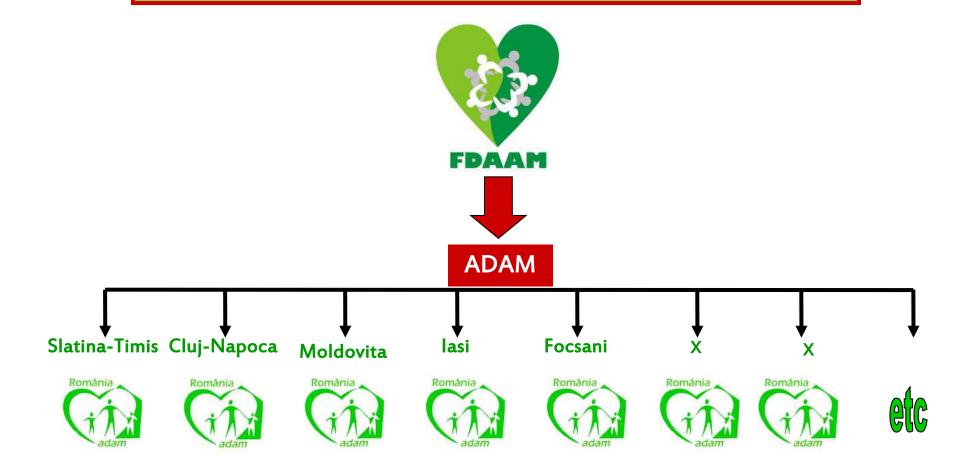




CLS:



ADAM



ADAM

Who are the principal players in Romania?

FDAAM = National Foundation



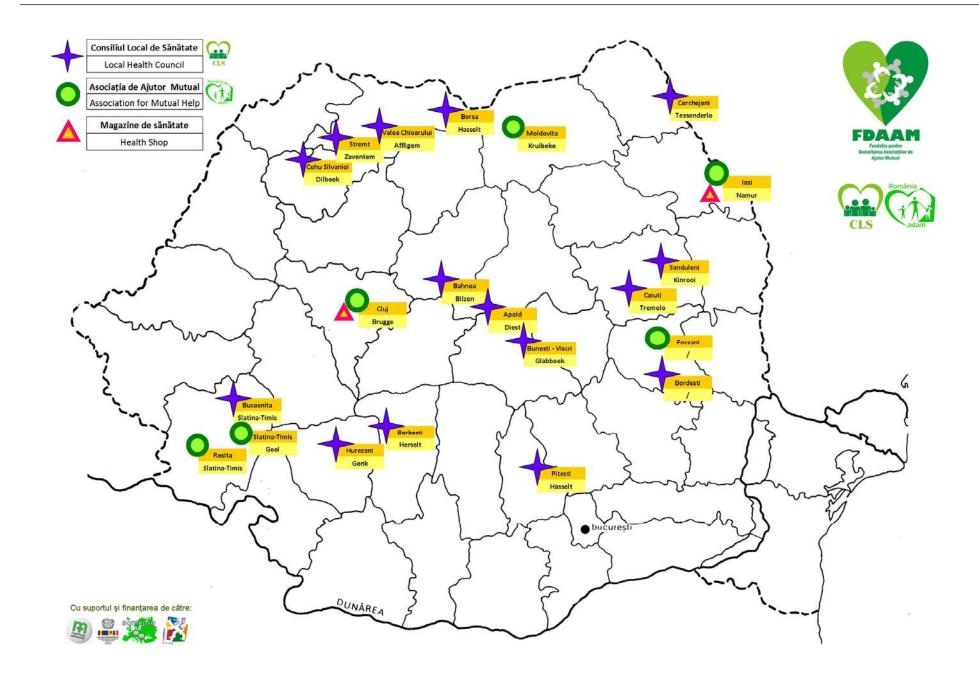


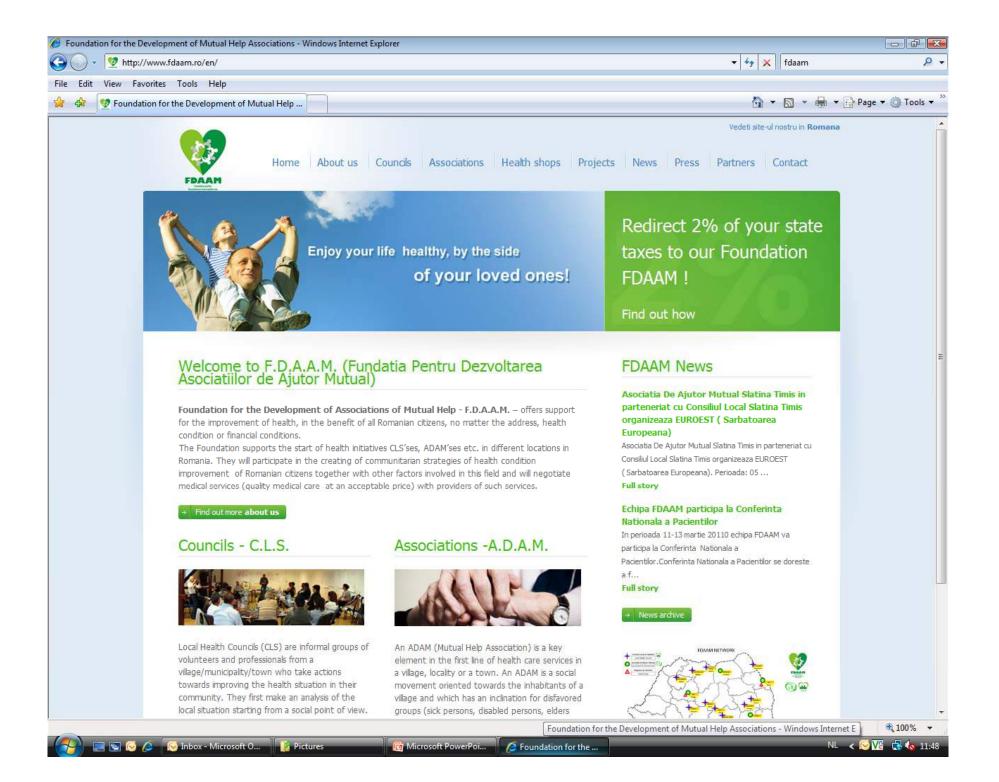




ADAM = Local Mutualistic Organization







2010 - European Year for Social Inclusion

in EU, 78 million persons - representing 16% of the popula- ... The fight against misery and social exclusion represents one tion - are presently threatened by misery. On the EU territory, of the central EU objectives, and our common approach conthe citizens think that in the area they live in, 1 person from 3 stituted an important instrument for guidance and support of (29%) five in misery and that 1 person from 10 fives in extreme misery conditions. In all the member states, a part of spector for social business, Vladimir Spidla. In the European the population is the victim of exclusion and deprivation, of- Year there will be organized much more actions for contributen being confronted with a limited access to basic services. tion to the public awareness concerning the modalities in 19% of the children are exposed to the risk of misery on the which the misery continues to affect us. entire EU territory and 1 child from 10 lives in families with non-working members. Therefore, 2010 was declared the European Year for Fight against Misery and Social Exclusion.

Health Calendar 2010

The international health days represent a treasure of ideas for CLSes and ADAMs: they are like packets of projects - we only have to choose one, we will have enough inspiration sources for getting to action; these are established function of the health priorities of the people in the entire world and offers us a lot of visibility.

Down you can have some of the health international Days from The Mondiel Health Calendar:

February: 4- Against Cancer Day: 15-Healthy Stiles Day,

March: 5-Women Day: 21-Day of the Human Rights: 21-Down Sindrown Day etc.

April: 7-Mondiel Health Day

May Antismoking Day, 10-Movement for Health Day; 12-Medical assistants .sa.m.d.

Who we are?

FDAAM is a Romanian - Seiglan foundation.

You can contact the FDAAM staff of qualified and motivated Romanian people that can bring our projects close

Join our international network and benefit from our learning experiences (trainings, forums, conferences). Visit our website www toxers to for further information.



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"Bow over mme" -Beatrice Botezata, CLS

The international day of diabetes -- National Action Day / Full of Ife not suffering from disce-P.S

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NEWS on FDAAM and Belgian partners initiatives in Re

The ending and beginning word

On the time of asking and answering questions, we gather around the family, we bake some cozonaci, cook a pot of sarmale, drink some tuica, joke and make the best of a bad

joke. It was a difficult year and 2010 seems to be as difficult as 2009 for Romania, 2009 was a year of meeting people and knowing each other. The term of "mutuality" and "solidarity" became more or less clearly outlined in Romania. And this outline is first of all due to FDAAM volunteers. Dear colleagues, dear FDAAM volunteers, this newspaper number is for you, thank you for your endeavor in 2009 and we are waiting to initiate as much activities as possible in 2010. Without You, FDAAM wouldn't be what is today.

A National Network

The "mutuality" and "solidarity" SPIRIT is step by step rediscovered in Romania and us, FDAAM, are the authors of this change.

"Happy New Year,

May all your wish come true!"....







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CLS & ADAM

Partners







































Realisations:

2009-2010

- Filial in Resita (capital of the Caras Severin county):
 - ✓ Cooperation with met Cartel-Alfa (building).
 - ✓ Cooperation with and support diabetic organization C-S.
 - ✓ Cooperation with ASP, AGLT, Rotary, ...
- Filial in Luncavita-Verendin (15 km from Slatina) on their request:
 - ✓ Building rent for free for a long period (25 year).
 - ✓ Start a dental cabinet (01/06/10), CLS, Visidom, men organization, renting service, ...
 - ✓ About 70 members end 2010.











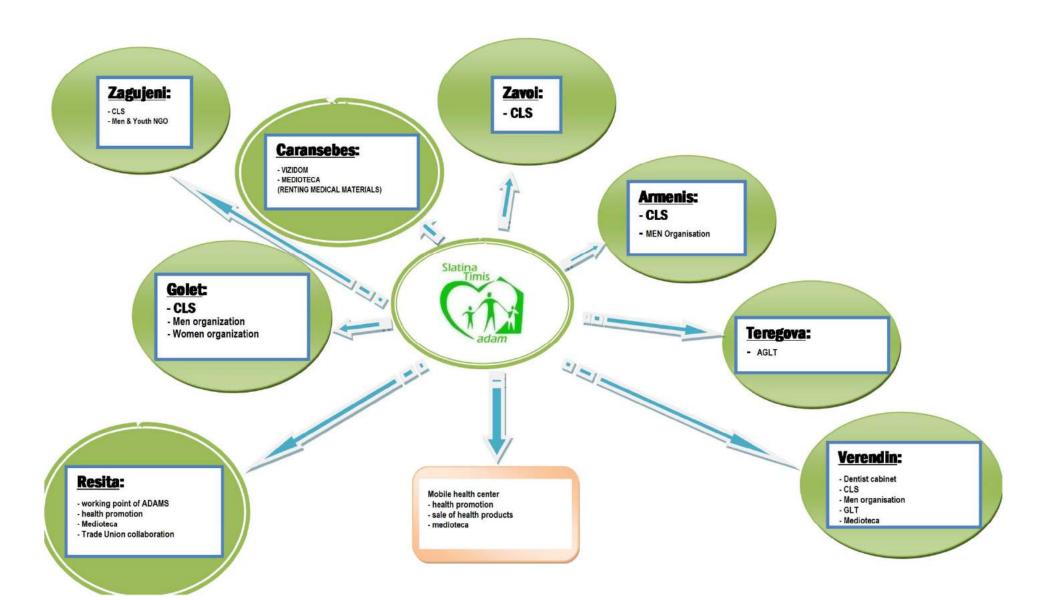








Regional development ADAMSlatina-Timis

















Thank You !!!

Multumesc!!!













