
Crisi economica, sistemi sanitari e salute. Il caso Grecia



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Durissimi i tagli a un sistema sanitario già in crisi. Allarmanti gli indicatori di salute: aumentano i suicidi e le infezioni da HIV.

Ma a causa dell'inefficienza del sistema, la principale fonte del finanziamento (circa il 40%) proviene direttamente dalle tasche dei cittadini che ricorrono – *out-of-pocket* – al florido mercato privato e che spesso, nel settore pubblico, devono pagare sotto-banco gli operatori sanitari per ricevere le prestazioni.

L'inefficienza del sistema enega anche perché la

La Grecia fa parte di quei paesi del sud Europa – insieme a Italia, Spagna e Portogallo – che tra gli anni 70 e 80 decisero di passare dal modello “mutualistico” (“Bismarck”) al modello “servizio sanitario nazionale” (“Beveridge”). Tuttavia, in Grecia questa transizione non si è mai completamente realizzata, registrando una serie interminabile di crisi [1] (**vedi Risorse**).

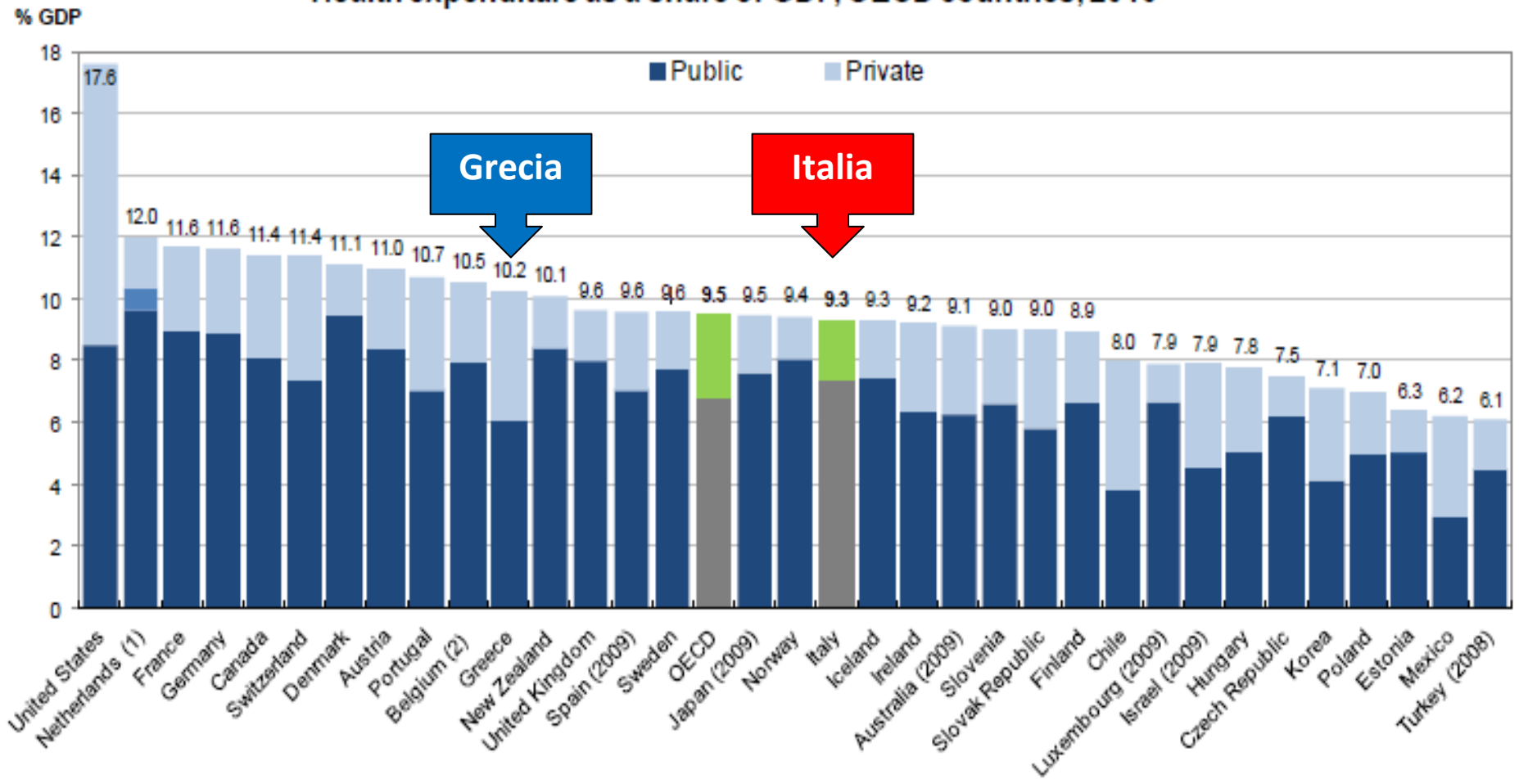
L’atto di nascita del servizio sanitario nazionale ellenico risale al 1983, ma questo atto non ha sostituito la diffusa e complessa rete di assicurazioni sociali che si erano stratificate nel tempo a partire dal 1922.

Diverse leggi varate negli anni 90 e – la più recente – nel 2004 hanno cercato di razionalizzare il sistema, ma senza successo con la conseguenza che a tutt’oggi nel paese coesistono due sotto-sistemi sanitari:

- uno – il servizio sanitario nazionale – finanziato dalla fiscalità generale
- l’altro – il sistema mutualistico – finanziato dai contributi dei datori di lavoro e dei dipendenti.

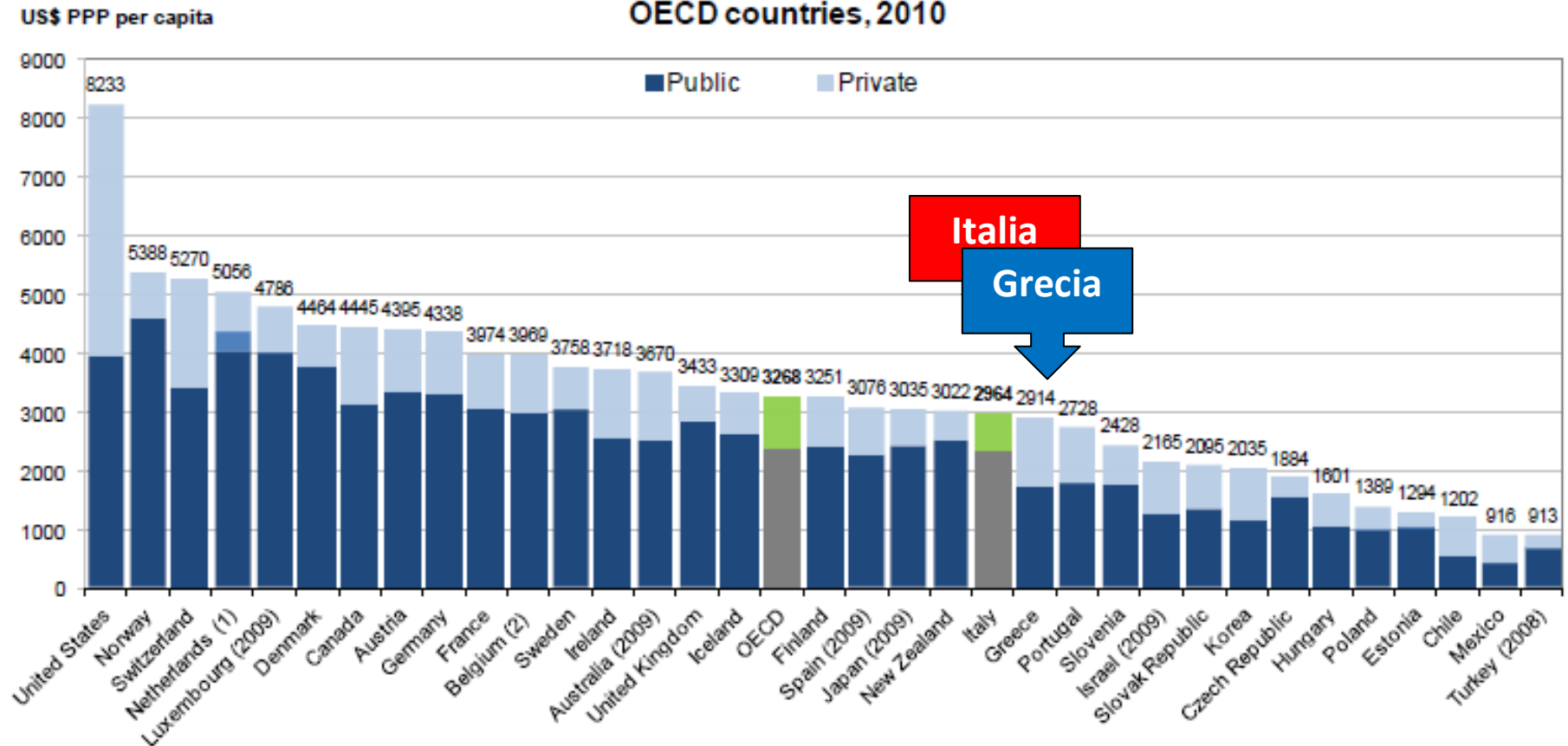
Health expenditure as a share of GDP, OECD countries

Health expenditure as a share of GDP, OECD countries, 2010



Health expenditure per capita, public and private, OECD countries, 2010

Health expenditure per capita, public and private expenditure, OECD countries, 2010

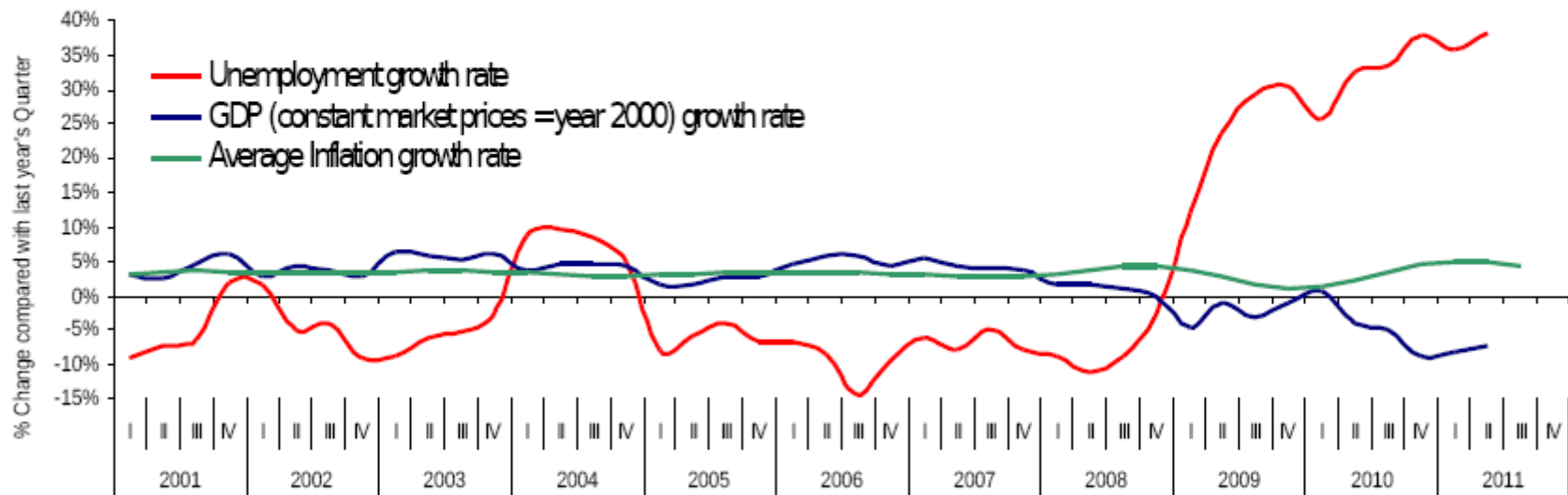


1. In the Netherlands, it is not possible to distinguish clearly the public and private share for the part of health expenditures related to investments.
 2. Total expenditure excluding investments. Source: OECD Health Data 2012, June 2012.

Data are expressed in US dollars adjusted for purchasing power parities (PPPs), which provide a means of comparing spending between countries on a common base. PPPs are the rates of currency conversion that equalise the cost of a given 'basket' of goods and services in different countries.

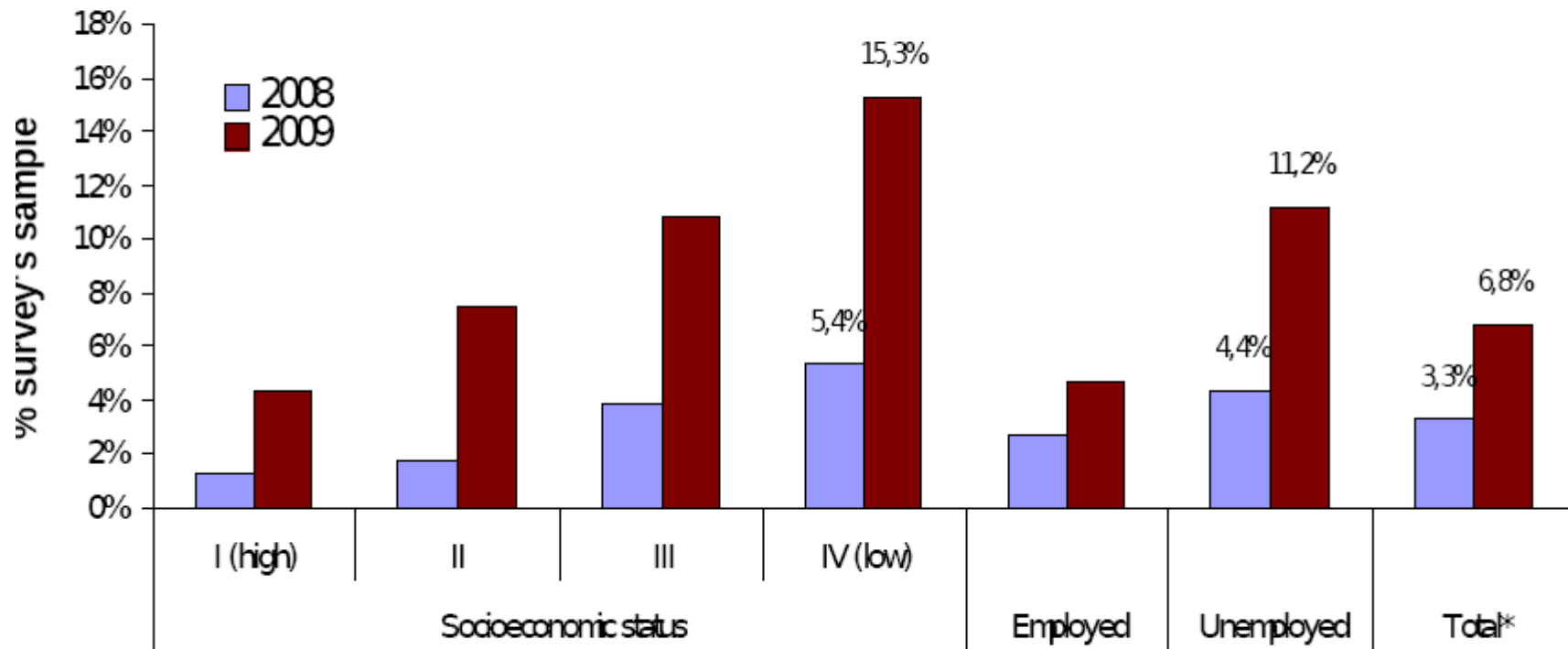
Economic crisis: Greece 2009-

Basic economic indicators, Greece 1 Jan 2000 - 30 June 2011



Economic crisis: Greece 2009-

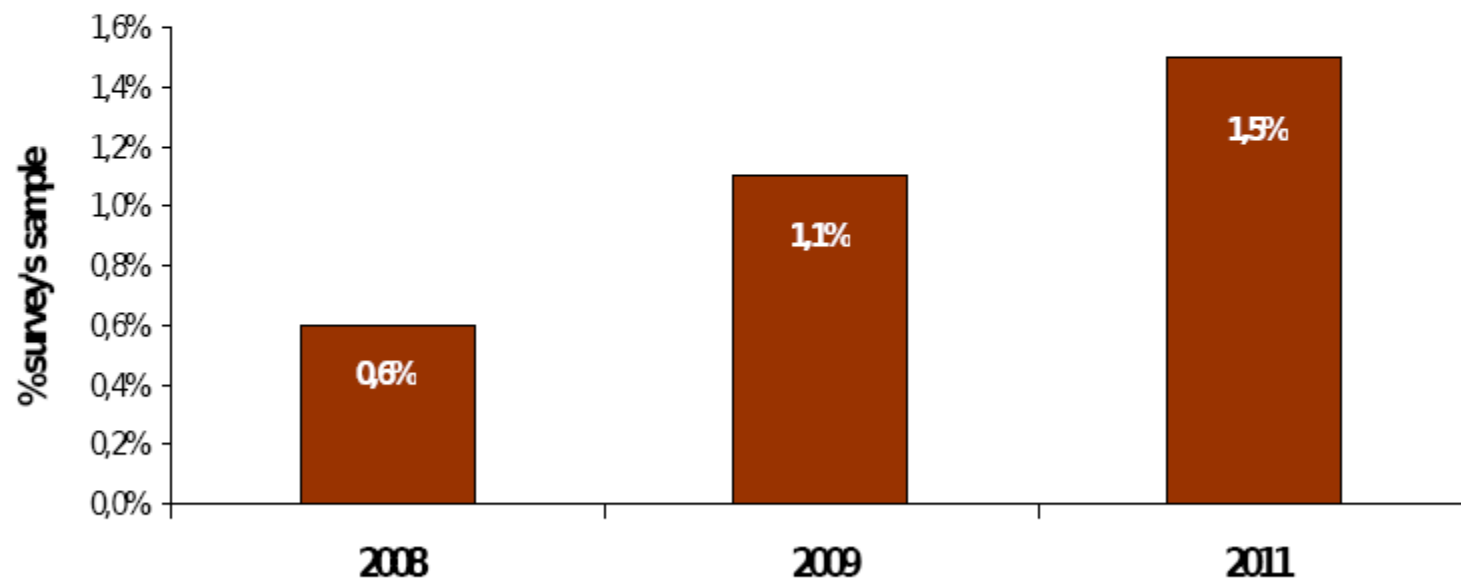
One-month prevalence of Major Depression Episode, Greece 2008-9



2008: n=2.197, 2009: n=2.192, *2009-2008 difference: $p < 0.0001$
Madianos M, Economou M, Alexiou T, Stefanis C. 2011

Economic crisis: Greece 2009-

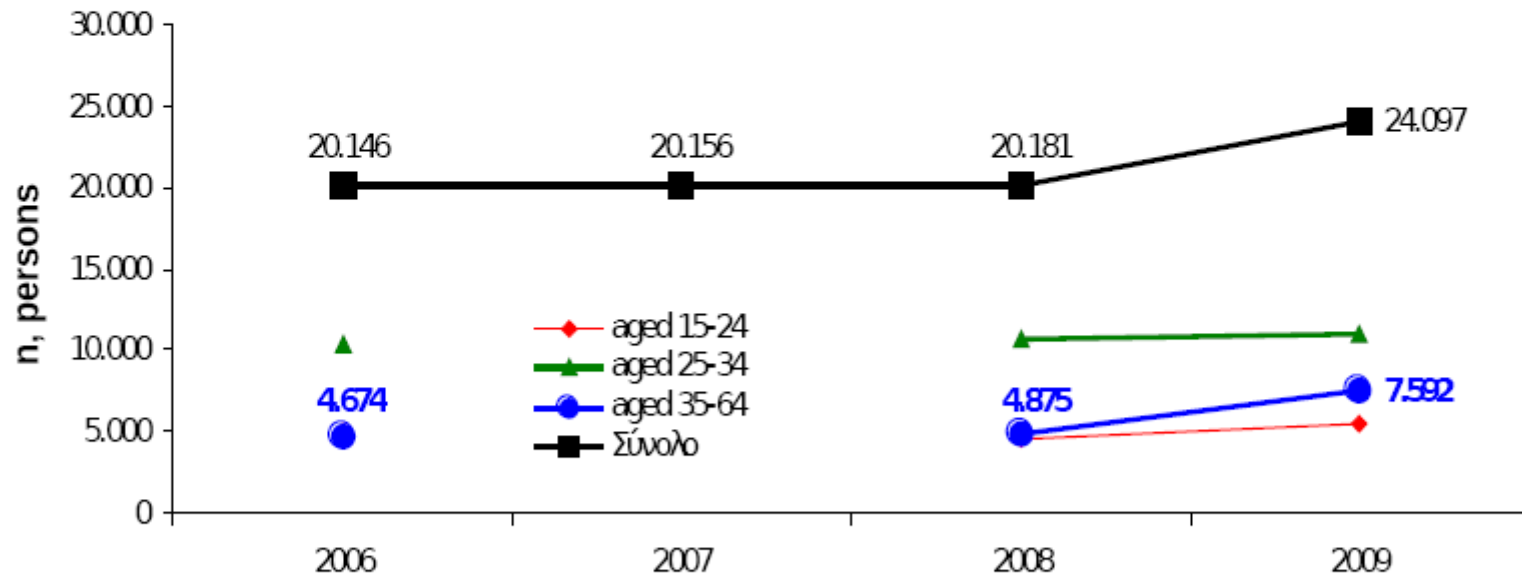
Attempted suicides one month before the survey, Greece 2008-2011



2008: n=2.197, 2009: n=2.192, 2011: n=2256
Madianos M, Economou M, Alexiou T, Stefanis C. 2011
Economou M, Madianos M, Theleritis C, Peppou L, Stefanis C. 2011

Economic crisis: Greece 2009-

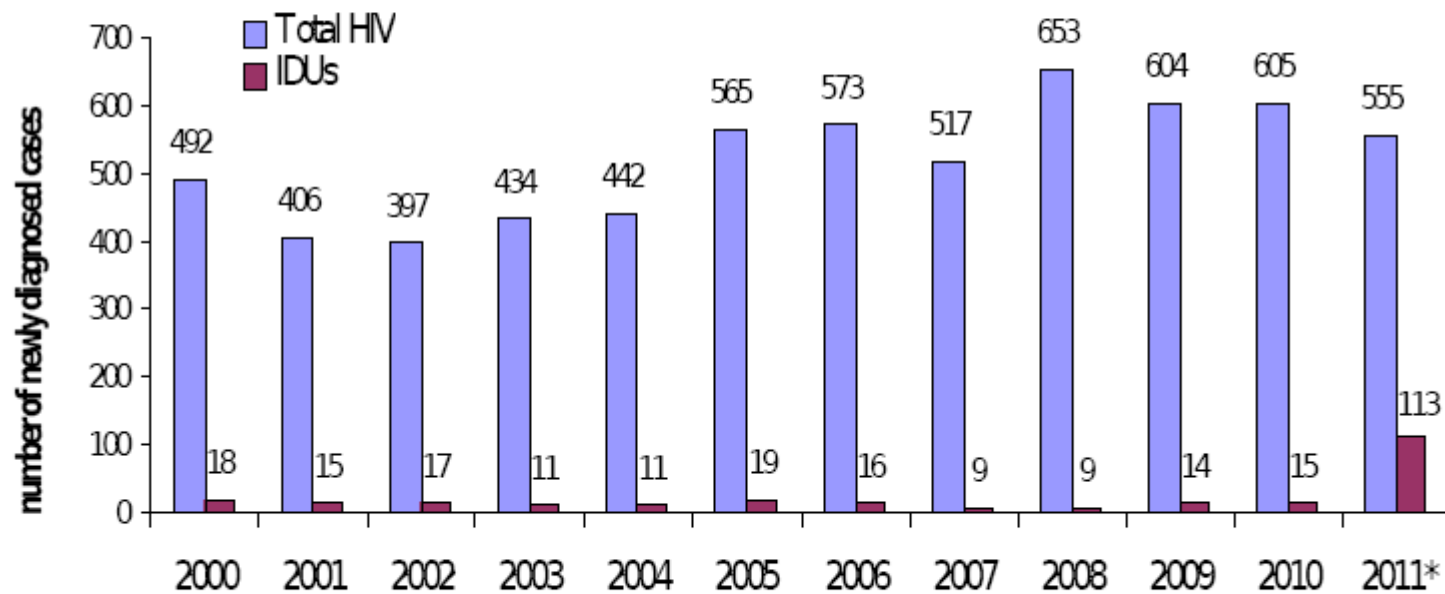
Problematic drug use, Greece 2006-9



ΕΚΤΕΠΝ. Ετήσιες Εκθέσεις για την κατάσταση του προβλήματος των ναρκωτικών και των οιοπνευματωδών στην Ελλάδα (2006, 2009, 2010)

Economic crisis: Greece 2009-

Newly diagnosed cases of HIV-1 infection reported in Greece, 1 Jan 2000- 31 July 2011



IDUs: Injecting Drug Users, * 1 JAN - 31 JULY 2011
Paraskevis D, Nikolopoulos G, Tsiara C, Paraskeva D, Antoniadou A, Lazanas M, et al 2011

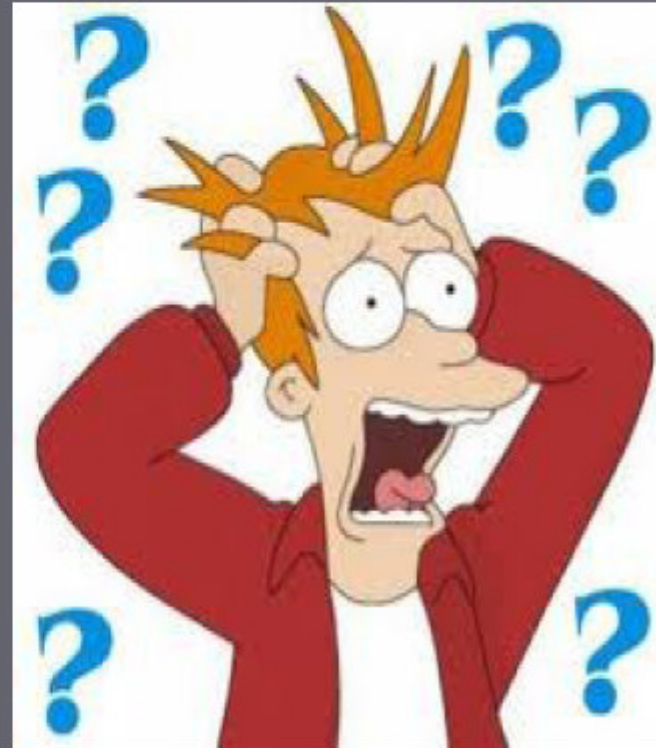
economic crisis and health services : : Greece 2009-

Public funding of NHS hospitals (% change), Greece 2010-2012

2010	-12%
2011	-13%
2012	-12.1%

So...

What is really going on in Greece?



HEALTH

- Privitazation
- Implementation of a 5 euro fee (with/without insurance)
- Fusion of hospitals
- Reduction of healthcare structure and personnel
- Public funding of NHS hospital has been reduced:
 - 2010→ -12%
 - 2011→ -13%
 - 2012→ -12,1%
- 60% cut on the functional expenses for the NHS hospitals
- Mismanagement of financial resources
- Inaccessibility of NHS (uninsuranced, undocumented miggrants)
- Unavailability of NHS

Issue III

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GlobHeM - Bulletin

Health Crisis

In this issue...

Read about the effects of the Economic Crisis and the imposed austerity measures on the Greek Health Care System and on people's health.

Consider Alternative Solutions and Social Solidarity Measures.

1st phase, first 9 months

of 2010:

60% cut on the functional expenses for the National Health System, which leads immediately to functional collapse of national health care services (unprecedented shortage of material, reduce of surgical and medical procedures). At the same time, patients trying to approach the national healthcare system have been documented to have increased 25%. All day function of privatized practices in public hospitals is established and the legal frame to pay personnel's overtime by these private practices is implemented.

People occupied in healthcare have seen their salaries cut to be almost half of what they used to be paid. By now, clinical doctors all over Greece have not been paid for their 24 hour shifts for several months now. A new law was voted in the parliament that formally reduces the number of national hospitals, merging many of them under common management.

2nd phase, September

2010 – April 2011:

Implementation of a 5 euro fee for all outpatient healthcare services in public hospitals for patients with health insurance let alone without insurance. At the same time demanding prerequisites for being able to have health insurance are implemented, increasing the days of work per year, in times when the unemployment rate is increasing day per day.

3rd phase, May 2011 –

October 2011:

Reduction of healthcare structures and personnel by merging 137 hospitals in 83, abolishing 4500 hospital beds, eliminating of whole organizations mainly responsible for primary mental health, rehabilitation for drug addicts. All these changes while it is proven that in times of crisis, the demand for public healthcare services increase and healthcare needs proliferate.

**4th phase, privatization
of public hospitals:**

556 public hospital beds are handed over to private health insurance companies and the costs for diagnostic, therapeutic procedures, as well as hospitalization have increased. That makes healthcare services unreachable to many of people with health insurance, the uninsured, let alone the immigrant. The minimum of services that someone can use for free does not any more include basic services.

In a time when health care and social services are most needed, the IMF advocates for the reduction of the public national health system in Greece.

Towards a society of solidarity...

Three months ago, on the 7th of November, Social Solidarity Clinic opened its doors in Thessaloniki. The vision of creating such a health service, for people with unmet needs of medical and dental care, excluded from the health care system, preceded the economic crisis. The creation was made possible by a team of health workers who responded positively to the call for support and solidarity to the 300 immigrants on hunger strike a year ago. The Social Solidarity Clinic is a legacy of this hunger strike, during which the vision became an enthusiastic initiative and the decision for cooperation was taken.

