# Forum: equity in access to health care. Introduction

Fórum: equidade no acesso aos serviços de saúde. Introdução

Claudia Travassos 1

### **Abstract**

<sup>1</sup> Instituto de Comunicação e Informação Científica e Tecnológica em Saúde, Fundação Oswaldo Cruz, Rio de Janeiro, Brasil.

#### Correspondence

C. Travassos
Instituto de Comunicação
e Informação Científica
e Tecnológica em Saúde,
Fundação Oswaldo Cruz.
Av. Brasil 4365,
Rio de Janeiro, RJ
21045-900, Brasil.
claudia@cict.fiocruz.br

The Introduction outlines this issue's special Forum on equity in access to health care, including three Articles and a Postscript. The Forum represents a continuation of the debates raised during a seminar organized by the Oswaldo Cruz Foundation in the city of Rio de Janeiro, Brazil, in 2006, in collaboration with UNICEF, UNDP, World Bank, the WHO Special Program for Research and Training in Tropical Diseases, and the United Nations Research Institute for Social Development. The authors approach health care access and equity from a comprehensive and contemporaneous perspective, introducing a new conceptual framework for access, in which information plays a central role. Trust is proposed as an important value for an equitable health care system. Unethical practices by health administrators and health care professionals are highlighted as hidden critical aspects of inequities in health care. As a whole, the articles represent a renewed contribution for understating inequalities in access, and for building socially just health care systems.

Equity in Access; Health Services; Health Services Accessibility

Social equality in health care access is the main concern for a just health care system. Equal access to health care is important for reducing social inequalities in health. The World Health Organization Commission on Social Determinants of Health assumes the health care system as a social determinant of health. Nonetheless, there is little agreement in relation to either the concept of access or a framework for explaining this multidimensional concept 1,2. Lack of both a consensus and a fully developed framework limits the design of effective policies to improve equity in health care.

This Forum introduces some of the debates raised during the seminar Equitable Access to Health Care and Infectious Disease Control: Concepts, Measurements, and Interventions, organized by the Oswaldo Cruz Foundation (FIOCRUZ) in 2006 in Rio de Janeiro, Brazil, in collaboration with UNICEFF, UNDP, World Bank, the WHO Special Program for Research and Training in Tropical Diseases (TDR), and the United Nations Research Institute for Social Development (UNIRISD). The three articles represent valuable contributions by experienced researchers for understanding the factors that affect equity in access, introducing new theoretical approaches and evidence that raise renewed perspectives and issues for societies regarding iustice in health care.

Gavin Mooney & Shane Houston, informed by the philosophy of communitarism, propose a communitarian view on equity in health care. The authors introduce trust as an important value for a society to support an equitable health care system. Building trust is a path to equity in health care. Institutional trust is essential for equity in access; inversely, lack of institutional trust can result in barriers to access. Australian society is presented as an example of lack of institutional trust that prevents Aboriginal Australians from using and benefiting from the country's health care system.

Michael Thiede & Di McIntyre present a conceptual paper, defining access as the freedom to use health services. The authors propose a framework that includes various approaches and ideas developed by other authors in this field. Access represents the "degree of fit" between individuals and communities and the health system. The "degree of fit" is interpreted in this article in the same manner as Penchansky & Thomas 3, as a two-way relationship between the supply side and individuals and communities. Thiede and McIntyre propose to represent access by three dimensions: availability, affordability, and acceptability. Information is introduced as a crucial element for understanding how potential access translates into utilization. It is an element that cuts across the three dimensions and is understood as one that empowers people to make choices. Communication is the essential element for effective information.

Arachu Castro's contribution is based on vivid stories of poor people's dramatic experience with health care systems. Besides the well-known barriers to care due to lack of financial resources and resulting in underutilization of services by the poor, the author raises a serious but rarely acknowledged practice by hospitals in the fee-for-service environment: hospital detention of patients due to inability to pay. The real-life stories shed light on unethical practices by health administrators and professionals, particularly in the context of the fee-for-service payment scheme, a hidden but critical aspect of social inequalities in health care systems.

Equity in access varies across countries with different health care systems 4. It is a major issue in many countries, including most Latin American nations as well as the United States. The articles in this Forum reiterate that inequity in health care is a complex problem that must be approached comprehensively. The debate introduces new pathways for a better understanding of how inequities are created, and how they can be overcome.

#### Resumo

Nesta introdução apresenta-se o Fórum sobre eqüidade no acesso aos serviços de saúde, composto por três artigos e um posfácio. O Fórum representa uma continuidade das apresentações e debates ocorridos no seminário Equitable Access to Health Care and Infectious Disease Control: Concepts, Measurements and Interventions, organizado pela Fundação Oswaldo Cruz com a colaboração do Programa Especial de Pesquisa e Treinamento em Doenças Tropicais da Organização Mundial da Saúde (OMS) e o Instituto para o Desenvolvimento Social das Nações Unidas (UNIRISD), realizado na cidade do Rio de Janeiro, Brasil, em 2006. Acesso aos serviços de saúde e eqüidade são abordados nos artigos do Fórum de modo abrangente e contemporâneo. Um novo modelo teórico-conceitual, no qual a informação tem um papel central, é introduzido em um dos artigos. Em outro, confiança é apresentada como um valor importante para a construção de sistemas de saúde equânimes. Questões éticas nas práticas de administradores e profissionais de saúde são destacadas como aspectos geradores de iniqüidades pouco discutidos. No conjunto, os artigos apresentam novo conhecimento sobre os fatores geradores de iniqüidades no acesso aos serviços de saúde que representam uma contribuição à construção de sistemas de saúde mais justos.

Equidade no Acesso; Serviços de Saúde; Acesso aos Serviços de Saúde

## References

- 1. United Nations Research Institute for Social Development. Conference news. Equitable access to health care and infectious disease control: concepts, measurement and interventions. Geneva: United Nations Research Institute for Social Development; 2007. http://www.who.int/tdr/publi $cations/publications/conference\_news.htm.$
- McIntyre D, Mooney G, editors. The economics of health equity. Cambridge: Cambridge University Press; 2007.
- 3. Penchansky R, Thomas W. The concept of access: definition and relationship to consumer satisfaction. Med Care 1981; 19:127-40.
- Van Doorslaer E, Masseria C, Koolman X. Inequalities in access to medical care by income in developed countries. CMAJ 2006; 174:177-83.

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