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Review article

Rural Healthcare in Kazakhstan: Problems and Trends (Literature Review)

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Abstract

Improving the welfare and quality of life of the population, ensuring fair and equal access to health services are priority areas of social policy in Kazakhstan. As modern domestic studies show, the quality of health of the rural population lags far behind the urban population and has a steady tendency towards deterioration.

One of the leading factors affecting the health of rural residents is the low level of accessibility of primary healthcare. It should be noted that the availability of healthcare services is directly and to a greater extent related to the availability of medical organizations and their provision with qualified human resources. In Kazakhstan, an imbalance in the provision of personnel between urban and rural healthcare remains, and the availability of medicines for the rural population is much lower than for the urban population.

The purpose of this study was to conduct a literary review of domestic and foreign sources on the problem of rural healthcare in the Republic of Kazakhstan and abroad.

Key words: rural healthcare, the quality of life of the rural population, the availability of medical services, social justice.

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Relevance

The primary tasks of the social policy of the Republic of Kazakhstan are to consistently improve the level and quality of life of the population, to ensure universal availability of basic medical and social services.

Increasing the availability of medical care is especially important for the rural population living in remote and hard-to-reach areas. The issues of health protection of the rural population of the Republic of Kazakhstan are relevant both at the regional and at the national level.

The main goal of all levels of government is to improve the availability and quality of medical care for the rural population and residents of remote areas. Although

the rural population of the Republic of Kazakhstan makes up almost 42% of the total population of the country, or about 7697.4 million people, the problems of rural health care are still quite acute and priority directions in the state policy of the country. Given the share of the rural population, it is important to preserve rural health care, so the transformation here is aimed primarily at increasing accessibility [1,2].

The purpose of the study: to conduct a literary review of domestic and foreign sources on the problem of rural health care in the Republic of Kazakhstan and abroad.

The quality of life of the rural population

The issues of improving the well-being of the people and the quality of life of the population is one of the urgent directions and the most important tasks of state policy in the field of healthcare at this stage.

As modern domestic studies show, the quality of health of the rural population lags far behind the urban population and has a steady tendency towards deterioration. Low availability of medical care and a low level of living comfort in rural areas, underdeveloped infrastructure, difficult working conditions lead to a deterioration in the health status of rural residents [3,4].

The standard of living of the rural population in many countries is lower than that of the urban population, which correlates with low health indicators. According to a number of studies, about one billion people in the

world breathe polluted air, suffer from a shortage of clean drinking water, do not have a centralized sewage system, specially designated places for storage and disposal of household waste, etc. [5].

Numerous modern medical studies prove that good health is directly related to the standard of living, a sense of well-being, and an increase in social and economic status [6,7]. Factors that directly affect the state of human health are age, conditions, level and way of life, the presence and composition of the family, the number of children, the level of education, the availability of work, the level of well-being, housing conditions, a sense of security, the availability and quality of medical care.

Availability of Primary Healthcare

The availability of medical care is the most important problem in the organization of health care. Maintaining and strengthening the health of the population by increasing the availability and quality of medical care is more relevant for rural settlements than for urban ones. This can be explained both by the difficult living conditions of the villagers, the high level of unemployment, the outflow of specialists to cities, the underdevelopment of the road transport infrastructure, and the imperfection of the state social policy and the low quality of medical care in rural areas [8,9].

One of the leading factors affecting the poor health of rural residents is the low level of accessibility of primary healthcare (PHC). Universal coverage of the population by the PHC system provides better health indicators and higher social satisfaction with medical care at lower costs [10]. Many of the health problems can be solved by building a sustainable PHC system. In this regard, the process of improving and strengthening the PHC service, focused on the needs of the population, continues throughout the world [11-13].

According to the Declaration of Alma-Ata, ensuring adequate access to PHC services is vital for governments

and health authorities in most countries [15]. Good access increases the timely use of health services [16].

PHC, through its integral user-centeredness and its relationship with the community, is the gateway to other levels of care. Geographic access remains a key determinant of the use of health services when needed, so it is important that health planners minimize barriers to access to the provision of PHC services [17,18].

The village PHC network is more ramified with a variety of organizations created to ensure the availability of PHC, taking into account the geographic and demographic characteristics of the country: a large territory and an uneven population density. PHC for the rural population is provided in 10 PHC departments at district polyclinics, 134 units and organizations of PHC at central district hospitals, which include 3407 MPs, 868 FAPs, 17 independent and 1470 medical outpatient clinics at the Central District Hospital; 28 district and 2 rural polyclinics [19].

Provision of human resources

The provision of the rural population with qualified medical care is mainly influenced by several factors, these are the remoteness of medical organizations, the low quality and high cost of transport and medical services, and the depletion of human resources. A regularity was revealed: the better the provision of qualified specialists,

the higher the assessment of the quality of their work. Therefore, in order to attract young and highly qualified specialists to healthcare, it is necessary to create decent living conditions in the countryside [20,21].

In Kazakhstan, an imbalance remains in the provision of personnel between urban and rural

healthcare. According to the data reflected in the State Program for the Development of Healthcare of the Republic of Kazakhstan, 83% of all doctors work in the city and only 17% in rural areas [22].

Despite the numerous incentive policies proposed by governments in many countries for some time, recruiting and retaining doctors in small, often isolated, rural communities remains a challenge [23-25].

Insufficient provision of rural areas with medical personnel in the Republic of Kazakhstan has always

existed, but in recent years, this problem has become one of the most important and significant in terms of importance. However, so far the personnel crisis associated with the shortage of medical specialists in rural areas has not been overcome in any way. The concentration of medical workers in large cities of the Republic of Kazakhstan continues to increase from year to year. In rural areas, compared to cities, there is a shortage of competent medical personnel [26,27].

Availability of medicines

It should be noted that the problems of ensuring and organizing drug accessibility to the population living in rural areas are in most countries solved by the state, depending on the current situation and the realities of socio-economic development. The World Health Organization has recognized drug provision and the provision of pharmaceutical services to the population in developing countries as unsatisfactory [28].

Despite the fact that in the Republic of Kazakhstan there are more than 9.000 facilities providing pharmaceutical services to the population, about 4.000 rural settlements do not have pharmacy facilities, and only 64% of them have organized the sale of medicines through medical and sanitary facilities [29]. The provision

of the rural population with medicines on market principles led to a restriction of the availability of the rural population due to the following reasons: remoteness of the territory, difficulties in delivery, and insolvency of the population.

The availability of medicines for the rural population was 30% lower than for the urban population. Therefore, the issues of the organization and quality of medical care for the rural population require further development and, first of all, the development of social programs for young specialists in order to make work in the countryside socially attractive [30].

Conclusion

Having analyzed numerous domestic and foreign sources, we can conclude that medical and social problems are especially pronounced in rural areas: these are high rates of morbidity and mortality, a low level of quality of life of the population. Modern rural settlements

of our country are experiencing a shortage of medical personnel, including narrow specialists, insufficient provision of medicines, the need to update the material and technical base of healthcare.

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Қазақстандағы ауылдық жерлердегі денсаулық сақтау саласының мәселелері мен тенденциялары (Әдеби шолу)

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Түйіндіме

Халықтың әл-аукаты мен өмір суро сапасын жақсарту, медициналық қызметтерге әділ және тен қолжетімділікті қамтамасыз ету - Қазақстанның әлеуметтік саясатының басым бағыттарының бірі. Қазіргі заманғы көптеген зерттеулер көрсеткендей, ауыл тұрғындарының денсаулығының сапасы қала тұрғындарынан едәуір артта қалып, нашарлау үрдісіне ие.

Ауыл тұрғындарының денсаулығына әсер ететін жетекши факторлардың бірі – алғашқы медициналық-санитарлық көмектің қолжетімділігінің төмен дөңгөйі. Айта кету керек, денсаулық сақтау қызметтерінің қолжетімділігі тікелей және көбірек дөрежеде медициналық үйімдардың қолжетімділігіне және олардың білікті кадрлік ресурстарымен қамтамасыз етілуіне байланысты. Қазақстанда қала мен ауылдың денсаулық сақтау саласы арасында кадрлармен қамтамасыз етудегі тендерімсіздік сақталуда, ауыл тұрғындарының дәрі-дәрмекпен қамтамасыз етілуі қала тұрғындарына қарағанда әлдеқайда төмен.

Бул зерттеудің мақсаты - Қазақстан Республикасындағы және шетелдегі ауылдық денсаулық сақтау мәселесі бойынша отандық және шетелдік дереккөздерге әдеби шолу жасау болды.

Түйін сөздер: ауылдық денсаулық сақтау, ауыл тұрғындарының өмір сапасы, медициналық қызметтердің қол жетімділігі, әлеуметтік әділеттілік.

Сельское здравоохранение Казахстана: проблемы и тенденции (Обзор литературы)

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Резюме

Повышение благосостояния и качества жизни населения, обеспечение справедливым и равным доступом к услугам здравоохранения являются приоритетными направлениями социальной политики Казахстана. Как показывают современные отечественные исследования, качество здоровья сельского населения сильно отличается от городского и отличается устойчивой тенденцией к ухудшению.

Одним из ведущих факторов, влияющих на уровень здоровья сельских жителей, является низкий уровень доступности первичной медико-санитарной помощи. Следует отметить, что доступность услуг здравоохранения в большей степени связана с наличием медицинских организаций и их обеспеченностью квалифицированными кадровыми ресурсами.

В Казахстане сохраняется дисбаланс в обеспечении кадрами между городским и сельским здравоохранением, а доступность лекарственных средств сельскому населению намного ниже, чем городскому. Целью данного исследования был анализ отечественных и зарубежных литературных источников по проблеме сельского здравоохранения.

Ключевые слова: сельское здравоохранение, качество жизни сельского населения, доступность медицинских услуг, социальная справедливость.