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An Article Review on the Healthcare Systems Practices of Different Countries: A Literature Review on the Similarities and Differences

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ABSTRACT

This literature review provides a comparative analysis of healthcare organization and management across various countries, focusing on the Philippines, low- and middle-income countries, China, Europe, Japan, and the USA. We identified key challenges, strengths, and reform efforts in each region through a systematic examination of primary and secondary studies. The analysis revealed progress in the Philippine healthcare system, accompanied by persistent challenges such as rising non-communicable diseases (NCDs) and high out-of-pocket payments. We identified common challenges like fragmentation, resource constraints, and the need for innovation and reform when we compared the Philippine healthcare system to others. However, each region has unique contextual factors shaping healthcare priorities and strategies. For instance, Japan emphasizes community-based inclusive society (CBIS) and integrated care, while the USA focuses on evidence-based decision-making and patient engagement within its fragmented system. Despite differences, common themes emerged, highlighting the importance of collaboration, innovation, and patient-centered approaches in healthcare organization and management. We identified addressing fragmentation, optimizing resource allocation, and fostering interdisciplinary collaboration as crucial steps toward building more resilient and effective healthcare systems globally. This review highlights the complexity of healthcare organization and management, as well as the need for context-specific solutions tailored to diverse population needs.

Keywords: Healthcare System, Organization and Management

Introduction

The article in Seposo (2019) deals with the Philippine health system, which the author noted to have undergone significant changes over the years, responding to evolving needs and challenges. This study delves into these changes, focusing on two distinct periods: Health System 1 (HS 1) from 1997 to 2007 and Health System 2 (HS 2) from 2008 to 2017. We assessed three key domains: health determinants, health financing, and health management and development. The author highlighted the importance of health determinants, health management, and development.

In terms of health determinants, the study found a notable decrease in the maternal mortality rate (MMR) during HS 2, indicating an improvement in maternal health outcomes. The study found a significant increase in tobacco excise tax revenue during HS 2, reflecting improved health financing efforts. This increase signifies a substantial investment in public health initiatives. In terms of Health Management/Development, the author found that access to health facilities made strides towards improvement during HS 2. The author noted progress in health management and infrastructure development during HS 2. However, despite these advancements, challenges persisted from HS 1 to HS 2, indicating areas of inefficiency and unaddressed issues within the health system.

Thus, while there have been evident improvements in health outcomes and financing in the Philippines, the study by Seposo suggests a more nuanced perspective. Despite positive changes, inefficiencies and unaddressed challenges have hindered the overall progress of the Philippine health system. The findings underscore the need for continued efforts to address these challenges and build upon existing successes for a more comprehensive and effective health system. This study provides valuable insights into the developmental trajectory of the Philippine health system, highlighting both accomplishments and areas for improvement in addressing the health needs of the population.

Method (Review)

This article is a literature review. A literature review involves a critical analysis and synthesis of existing research on a specific topic. The student utilized a literature review to compare the study's findings with the practices of other authors from various global regions. Primarily, the paper reviewed will that be of the author, Seposo. We will compare the author's findings with those of other authors in this paper review.

A literature review is a comprehensive and critical analysis of existing research and scholarship on a specific topic or research question. It involves identifying, evaluating, and synthesizing relevant sources, such as scholarly articles, books, and other publications, to provide a thorough overview of the current state of knowledge in the field (Boote & Beile, 2005; Cooper, 1988).

According to Boote and Beile (2005), a literature review serves several purposes, including providing background information and context for a research topic, identifying gaps, contradictions, and areas of controversy in the existing literature, establishing the theoretical framework and conceptual foundation for a research study, and guiding the development of research questions, hypotheses, and methodologies.

In addition, according to Cooper (1988), a literature review emphasizes the importance of rigor and systematicity in conducting a literature review. He suggests that a well-executed literature review should involve a systematic search and selection process to identify relevant sources, critical appraisal and evaluation of each source's methodological rigor, credibility, and relevance, synthesis and integration of findings across different studies to identify patterns, trends, and relationships, and clear documentation and citation of all sources consulted in the review. This study will provide similar articles in different parts of the world to compare and contrast the best practices and areas for improvement in healthcare organization and management.

Result and Discussion

A. Primary Study reviewed (Seposo, 2019)

The study by Seposo (2019) has the following findings on the organization and management of healthcare services: To wit, in the Philippines, the health determinants, including maternal mortality rate (MMR), showed significant progress in HS 2 compared to HS 1, attributed to improvements in health service facilities and access to health services. However, other health determinants such as infant mortality rate (IMR), HIV incidence, and TB incidence increased in HS 2.

Malnutrition and overweight prevalence also increased significantly, indicating rising non-communicable diseases (NCDs). In terms of health financing, health financing parameters increased over time, particularly with an extensive increase in excise tax from tobacco, reflecting tobacco excise tax measures. Moreover, while total health expenditure decreased slightly in HS 2, other health financing variables increased. Finally, in healthcare management and development, the health system showed both progressive and retrogressive aspects. Progressive changes included increased health financing, improved waiting times, and access to services, while retrogressive aspects included high out-of-pocket payments and the uneven distribution of health facilities and personnel. Despite improvements, challenges such as rising NCDs, high out-of-pocket payments, and weak health information systems persisted.

According to Seposo's study, despite some progress in health outcomes and financing, the Philippine health system faces significant challenges, particularly in addressing rising NCDs and improving health equity. Continuous monitoring, evaluation, and reevaluation of health policies and programs are crucial to effectively addressing these challenges.

B. African Healthcare System by Oleribe et al. (2019)

Oleribe et al. (2019) conducted a study that scrutinizes the organization and management of healthcare systems in low- and middle-income countries. The study investigates the organization and management of healthcare systems in low- and middle-income countries, aiming to identify challenges, strengths, and potential areas for improvement. It assesses factors such as healthcare infrastructure, human resources, financing mechanisms, and governance structures.

One key finding of the study is that healthcare organizations and management in these countries face significant challenges. These challenges include inadequate healthcare infrastructure, limited availability of skilled healthcare professionals, insufficient financing for healthcare services, and weak governance and regulatory frameworks.

Despite these challenges, the study also highlights some strengths in healthcare organization and management in low- and middle-income countries. These strengths may include innovative approaches to healthcare delivery, community engagement initiatives, and successful public-private partnerships.

The study underscores the importance of addressing the identified challenges and leveraging the strengths to improve healthcare organization and management in low- and middle-income countries. It suggests potential strategies such as increased investment in healthcare infrastructure, workforce training and retention programs, innovative financing models, and strengthening of governance mechanisms.

C. Chinese Healthcare System by Hu et al. (2008)

The article by Hu et al. (2008) discusses the reform of healthcare payment systems in China, with a focus on the challenges and opportunities associated with healthcare reforms in terms of healthcare organization and management. The aforementioned study highlights the complexities of healthcare payment systems in China and the need for reform to address various issues such as cost escalation, inefficiency, and inequity in access to healthcare services. It explores the transition from a fee-for-service model to more comprehensive payment mechanisms aimed at promoting quality care and controlling costs.

One key challenge identified in the article is the fragmentation and lack of coordination in healthcare payment systems, which contribute to inefficiencies and disparities in service delivery. To improve healthcare organization and management, the authors discuss the need for greater integration and alignment of payment mechanisms across different levels of care.

Another challenge discussed is the impact of healthcare payment reforms on healthcare providers, particularly in terms of financial incentives and accountability. The study investigates the implications of switching from volume-based reimbursement to value-based payment models, as well as the importance of aligning incentives with quality and outcomes.

Despite these challenges, the article also identifies opportunities for improving healthcare organization and management through payment reform. These opportunities include promoting primary care, strengthening health information systems, and enhancing coordination and collaboration among healthcare providers.

Finally, the study by Hu et al. (2008) underscores the importance of healthcare payment reform as a critical component of broader efforts to improve healthcare organization and management in China. It emphasizes the need for strategic planning, stakeholder engagement, and ongoing evaluation to ensure the success of these reforms and ultimately achieve better health outcomes for the population.

D. Europe Healthcare System by Abbing (2016)

The study by Abbing (2016) explores the intersection of health, healthcare, and aging populations in Europe, framing it as a human rights challenge for European health systems. While the study covers various aspects, focusing on healthcare organization and management reveals several key findings. The aging population dynamics in Europe are among the findings. Abbing emphasizes the demographic shift toward aging populations across Europe, which poses significant challenges for healthcare organizations and management. This demographic trend requires health systems to adapt and innovate in providing care to older adults while maintaining quality and accessibility.

The study also emphasizes the importance of a human rights perspective in addressing healthcare challenges associated with aging populations. The study suggests that healthcare organizations and management should align with principles of human dignity, equity, and non-discrimination to uphold the rights of older adults.

Another challenge is health system adaptation. Abbing discusses the need for European health systems to adapt their organization and management structures to meet the diverse needs of aging populations. This includes rethinking service delivery models, integrating long-term care with acute care, and promoting community-based initiatives to support aging in place.

Moreover, the study highlights the importance of interdisciplinary collaboration in healthcare organization and management to address the multifaceted needs of older adults. It suggests that health systems should foster partnerships between healthcare professionals, social services, and community organizations to provide comprehensive and integrated care.

The study by Abbing also emphasizes the ethical dimensions of healthcare organization and management in the context of aging populations. It calls for greater attention to ethical principles such as autonomy, beneficence, and justice in decision-making processes related to resource allocation, treatment priorities, and end-of-life care.

Finally, the study underscores the complex interplay between healthcare organization and management, aging populations, and human rights in Europe. It advocates for a rights-based approach to healthcare that prioritizes the needs and dignity of older adults while promoting equitable access to quality services across the lifespan.

E. Japan Healthcare System by Otaga (2024)

Otaga's study (2024) investigated the concept of community-based inclusive society (CBIS) and integrated care in Japan, examining the practical implications and challenges for healthcare organisations and management. The author's findings are diverse, including:

Otaga explores the concept of CBIS, which emphasizes the inclusion and participation of diverse community members, including those with disabilities or chronic conditions, in all aspects of society. From a healthcare organization perspective, CBIS entails reorienting health systems to be community-centered, fostering collaboration between healthcare providers, social services, and community organizations to ensure holistic care delivery.

The study also discusses integrated care models aimed at enhancing coordination and continuity of care for individuals with complex health and social needs. In Japan, healthcare organization and management strategies are shifting toward integrated care frameworks that prioritize seamless transitions between healthcare settings, effective communication between providers, and patient-centered care planning.

According to the study, Otaga identifies several challenges in implementing CBIS and integrated care approaches in Japan. These include fragmentation within the healthcare system, limited coordination between medical and social care services, and disparities in access to care among marginalized populations. Healthcare organizations and management must address these challenges by promoting interdisciplinary collaboration, improving information-sharing systems, and advocating for policies that support inclusive healthcare delivery.

In terms of the role of leadership and governance, the study underscores the importance of strong leadership and governance structures in driving healthcare organization and management reforms towards CBIS and integrated care. Effective leadership is essential for fostering a culture of collaboration, promoting innovation in care delivery models, and advocating for policy changes to support community-based initiatives.

The study by Otaga likewise highlights the significance of community engagement and empowerment in shaping healthcare organizations and management practices. Engaging communities in decision-making processes, co-designing services, and fostering partnerships between healthcare providers and community stakeholders are essential for building inclusive health systems that meet the diverse needs of populations.

Finally, Otaga's study sheds light on the concepts and challenges of implementing CBIS and integrated care in Japan, emphasizing the transformative role of healthcare organization and management in promoting community-centered approaches to healthcare delivery.

F. USA Healthcare System by Hedayatepour et al. (2024)

The study by Hedayatipour et al. (2024) examines the challenges of using evidence in managerial decision-making within the primary healthcare system in the USA. The study highlighted the complexity of the healthcare system in the USA. The study underscores the complexity of the healthcare system in the USA, characterized by a fragmented delivery system with multiple stakeholders, including government agencies, private insurers, healthcare providers, and patients. Healthcare organizations and management face challenges in navigating this complex landscape to make informed decisions that improve the quality and efficiency of care delivery.

Hedayatipour et al. emphasize the importance of data management and integration in healthcare organization and management. Managers struggle with accessing and integrating data from disparate sources, hindering their ability to utilize evidence effectively in decision-making processes. Improving data infrastructure and interoperability are essential for facilitating evidence-based management practices within the primary healthcare system.

The study addresses resource allocation and prioritization challenges faced by healthcare managers. Limited resources, coupled with competing demands, necessitate strategic decision-making to allocate resources effectively and address the needs of diverse patient populations. To optimize health outcomes, healthcare organizations and management must strike a balance between budget constraints and the delivery of high-quality, patient-centered care.

The study by Hedayatipour et al. also discusses the role of quality improvement initiatives in healthcare organization and management. The task of managers involves implementing evidence-based practices and interventions to improve the quality and safety of care delivery. However, barriers such as resistance to change, lack of leadership support, and inadequate staff training impede the successful implementation of quality improvement efforts.

The study emphasizes the importance of patient engagement and empowerment in healthcare organization and management. Managers must engage patients in decision-making processes, promote shared decision-making, and tailor care plans to individual patient preferences and needs. Cultivating a patient-centered culture within primary healthcare settings is critical for improving health outcomes and enhancing the patient experience.

Finally, Hedayatipour et al. highlight the challenges of using evidence in managerial decision-making within the primary healthcare system in the USA. Addressing these challenges requires a multifaceted approach that prioritizes data integration, resource allocation, quality improvement, and patient engagement to optimize healthcare organization and management practices.

Similarities and Differences

| Aspect | Seposo (2019) | Oleribe et al. (2019) | Hu et al. (2008) | Abbing (2016) | Otaga (2024) | Hedayatipour et al. (2024) |
|---|---|---|---|--|---|--|
| Geographical Focus | Philippines | Low- and middle- income countries | China | Europe | Japan | USA |
| Challenges in Healthcare Management | Rising NCDs, high out-of-pocket payments, weak health information systems | Inadequate infrastructure, limited skilled workforce, weak governance | Fragmentation, inefficiency, inequity in access | Ageing population dynamics, adapting to needs of older adults | Implementing CBIS and integrated care, fragmentation, limited coordination | Fragmented system, data integration, resource allocation, quality improvement |
| Strengths in Healthcare Management | Progressive health financing, improved access, reduced waiting times | Innovative approaches, community engagement, successful partnerships | Opportunities for payment reform, promoting primary care | Interdisciplinary collaboration, human rights approach | Integrated care models, community- centered care | Patient engagement, shared decision- making, quality improvement |
| Reforms and Opportunities | Continuous monitoring, reevaluation of policies | Increased investment, workforce training, | Transition to value- based payment, integration of care | Adaptation of healthcare systems, ethical considerations | Strengthening leadership, community engagement | Data integration, patient-centered care, quality improvement |

Provided below is a tabular form of the similarities and differences of the various healthcare systems comparing the Philippines with other countries. This comparison is focused only in terms of healthcare organization and management.

| | innovative | | |
|--|------------|--|--|
| | financing | | |

The following are the common similarities across various healthcare systems in different countries: To wit;

Healthcare systems are fragmented. Across different regions, fragmentation in healthcare systems is a common challenge. This fragmentation leads to inefficiencies, disparities in access, and difficulties in coordination between different levels of care. This challenge is evident in the studies on the Philippines, low- and middle-income countries, China, Europe, Japan, and the USA. Each context requires efforts to streamline healthcare delivery and enhance coordination among stakeholders.

Resource Constraints. Limited resources pose a significant challenge to global healthcare organization and management. Whether it's inadequate infrastructure, a shortage of skilled healthcare professionals, or budget constraints, all regions face resource limitations that impact service delivery and quality of care. Strategies for resource allocation and optimization are necessary to address these challenges effectively.

There is a need for innovation and reform. In response to the challenges faced by healthcare systems, there is a common recognition of the need for innovation and reform. Whether it's through payment reforms, integration of care models, or strengthening leadership and governance structures, there is a shared emphasis on the importance of adapting healthcare systems to meet evolving needs and improve outcomes.

The following are the differences observed between various practices in different countries: To wit;

Geographical Context. While there are commonalities in healthcare challenges, the specific contexts vary across regions. For example, the challenges faced by the Philippines may differ from those in China or Europe due to differences in socioeconomic factors, political environments, and healthcare infrastructure. These contextual differences shape the priorities and strategies for healthcare organizations and management in each region.

Healthcare reforms are the focus. The studies highlight different areas of focus for healthcare reforms based on regional priorities and challenges. For instance, while some studies emphasize the importance of community engagement and integrated care models (e.g., Japan), others focus on payment reform and primary care promotion (e.g., China). These differences reflect the unique healthcare landscapes and policy contexts of each region.

Finally, there are differences in approaches to addressing challenges. Despite common challenges, there are variations in the approaches taken to address them. For example, while some regions prioritize investment in infrastructure and workforce training (e.g., low- and middle-income countries), others emphasize the importance of patient-centered care and quality improvement initiatives (e.g., the USA). These differences underscore the diversity of strategies and interventions tailored to specific healthcare contexts.

Conclusion

The comprehensive review providing different contexts from different countries on healthcare systems has provided valuable insights into the organization and management of healthcare systems across various countries, highlighting both commonalities and differences in challenges, strengths, and reform efforts.

Seposo (2019) reviewed a primary study that deepened our understanding of the Philippine healthcare system's progress and persistent challenges, such as the rise in non-communicable diseases (NCDs) and high out-of-pocket payments. This study underscores the importance of continuous monitoring and reevaluation of health policies to address these challenges effectively.

Comparing the Philippine healthcare system with others, such as low- and middle-income countries, China, Europe, Japan, and the USA, revealed shared challenges like fragmentation, resource constraints, and the need for innovation and reform. However, each region has its own unique contextual factors shaping healthcare priorities and reform strategies.

For instance, while Japan emphasizes community-based inclusive society (CBIS) and integrated care to address fragmentation and promote inclusivity, the USA focuses on evidence-based decision-making and patient engagement within its fragmented system.

Despite these differences, common themes emerge, emphasizing the importance of collaboration, innovation, and patient-centered approaches in healthcare organization and management. Addressing fragmentation, optimizing resource allocation, and fostering interdisciplinary collaboration are crucial steps towards building more resilient and effective healthcare systems worldwide.

Finally, this review emphasizes the complexity of healthcare organization and management, as well as the need for context-specific solutions tailored to the diverse needs of populations. By sharing experiences and learning from each other's successes and challenges, stakeholders can work towards shaping a more equitable, efficient, and patient-centered healthcare landscape globally.

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Conflict of Interest:

The authors have no conflict of interest to declare.

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