# Volume 8, Issue 3 /2006 - Editorial

## A Health Economy as Opposed to a Health System

An ongoing debate on the future direction of healthcare is becoming ever more intense in almost every country in Europe. Now that health systems have assumed a special role in social and political development, the question repeatedly being asked is whether the State should assume greater control or market mechanisms should be given free reign. More often than not, these debates are couched in the “eitheror” dichotomy. Is it not imperative, given the immensely complex and highly diverse nature of health systems, that we take a more sophisticated approach to this question? Would it not be preferable to approach it from a “not only, but also” perspective?

Given their critical role within the healthcare network, hospitals will play a prominent role in shaping and safeguarding the future of our health services. In this respect, the challenges facing healthcare are multidimensional, particularly in view of demographic changes, advances in medicine, labour market developments, and the issues of quality, effectiveness and efficiency in the system. Should healthcare, in the broadest sense of the term, not assume a leading role - if not the leading role - in social and economic development? This can only be achieved if a new type of thinking evolves, in which the view of healthcare as a cost factor is consigned to the past.

It is patently obvious that our ageing society urgently needs change of this kind. It is vital that older people are given an opportunity to actively participate in society for as long as possible so that the burden on the state and the health and nursing care insurance systems can be reduced. However, this argument is valid only when quality, efficiency and effectiveness can be guaranteed and considerable work remains to be done in this regard. New mechanisms, instruments and incentives are needed, including greater competition and personal responsibility (a balance must be struck between solidarity and subsidiarity), a stronger emphasis on prevention and refinement of reimbursement systems.

In terms of the impact of the employment market, we are all aware that the service sector will determine the future. By this, I do not mean simple services which are being superseded by automated processes but interpersonal services characterised by personal attention to the consumer. The healthcare sector, in its broadest sense, will have a major role to play in these changes and it is imperative that we seize all available opportunities.

Hospital management must face up to the challenge and prepare the political arena and society in general, both at national and European level, for the fundamental changes ahead. These must be planned for by reconfiguring services, developing and reorganising structures and creating more effective and efficient processes. Hospital and the EAHM are endeavouring to shadow this process and are building a platform on which to do so, particularly in the European context.

Even at this early date, I would like to draw readers’ attention to our forthcoming EAHM Congress which will take place in Dublin from 31 August until 2 September. An interesting and varied programme lies in store. A thematic overview on page 6 provides a brief outline of the presentations and will, no doubt, generate interest in this event, which has been organised by our colleagues in Ireland.

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