Comparative Health Policy and Healthy Ageing

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Part 1: Health policy in international comparison

Part 2: Access to healthcare: gatekeeping or freedom of choice?

Part 3: Cost barriers and trust in healthcare systems

Part 4: Innovative research project for studying access to care and inequalities in health among older people
Part 1: Health policy in international comparison

Article

Mapping European healthcare systems: a comparative analysis of financing, service provision and access to healthcare

Claus Wendt*,

University of Mannheim, Germany,
and Harvard University, Cambridge, MA, USA

Journal of European Social Policy 2009 19 (5)
Institutional differences in European healthcare systems

Table 3 Description of clusters

<table>
<thead>
<tr>
<th>Cluster</th>
<th>THE in US$ per capita</th>
<th>Public funding in % of THE</th>
<th>Private out-of-pocket payment in % of THE</th>
<th>Index inpatient care</th>
<th>Index outpatient care</th>
<th>Entitlement to healthcare</th>
<th>Remuneration of GPs</th>
<th>Access regulation index</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cluster 1</td>
<td>AT, BE, DE, FR, LU</td>
<td>High level of THE (at average US$ 2,805 per head)</td>
<td>High share of public funding (80% of THE)</td>
<td>Medium share of out-of-pocket payment (13% of THE)</td>
<td>Medium inpatient index (105)</td>
<td>High outpatient index (133)</td>
<td>Contributions</td>
<td>Fee-for-service</td>
</tr>
<tr>
<td>Cluster 2</td>
<td>DK, GB, IE, IT, SE</td>
<td>Medium level of THE (US$ 2,269)</td>
<td>High share of public funding (80% of THE)</td>
<td>Medium out-of-pocket payment (15% of THE)</td>
<td>Medium inpatient index (103)</td>
<td>Low outpatient index (81)</td>
<td>Citizenship</td>
<td>Capitation (except SE: salary)</td>
</tr>
<tr>
<td>Cluster 3</td>
<td>ES, FI, PT</td>
<td>Low level of THE (US$ 1,721)</td>
<td>Medium public funding (73% of THE)</td>
<td>High out-of-pocket payment (22% of THE)</td>
<td>Low inpatient index (80)</td>
<td>Medium outpatient index (107)</td>
<td>Citizenship</td>
<td>Salary</td>
</tr>
</tbody>
</table>
Access to healthcare: gatekeeping or freedom of choice?

Regulating Patients’ Access to Healthcare Services

Nadine Reibling, University of Mannheim, Germany
Claus Wendt, Siegen University and University of Mannheim, Germany
Doctor visits by number of chronic conditions

Germany: Probability of Having Any Medical Doctor Visit

France: Probability of Having Any Medical Doctor Visit

Denmark: Probability of Having Any Medical Doctor Visit

Netherlands: Probability of Having Any Medical Doctor Visit
Differences in specialist visits by patients with different levels of education

Change in predicted probabilities

Legal Regulation Index

• Country Position  Linear Prediction
Summary

- Patients with higher education have easier access to specialist healthcare
- This relationship is particularly strong in systems where people have freedom of choice and direct access to specialists
Part 3: Cost barriers and confidence to receive medical care

Perspective

Cost barriers reduce confidence in receiving medical care when seriously ill

Confidence in receiving medical care when seriously ill: a seven-country comparison of the impact of cost barriers

Claus Wendt MD,* Monika Mischke MA,† Michaela Pfeifer MA,† and Nadine Reibling MA,‡

© 2011 Blackwell Publishing Ltd Health Expectations, 15, pp.212–224
Not going to the doctor because of costs

- Netherlands: 1.5%
- UK: 1.8%
- Canada: 4.1%
- Germany: 11.7%
- Australia: 13.5%
- New Zealand: 19.9%
- USA: 24.6%
Confidence: differences among social groups

- Cost barriers: distance with and without cost barriers
  - USA
  - UK
  - Canada
  - Germany
  - New Zealand
  - Netherlands
  - Australia

- Distance: poor to good
  - New Zealand
  - Australia
  - UK
  - Germany
  - Canada
  - Netherlands

- Income: lowest to highest
  - USA
  - Australia
  - New Zealand
  - UK
  - Germany
  - Canada
  - Netherlands

- Education: lowest to highest
  - USA
  - Australia
  - New Zealand
  - Canada
  - Germany
  - UK
  - Netherlands

- Gender: female to male
  - Germany
  - UK
  - Australia
  - Canada
  - Netherlands
  - New Zealand
  - USA

Differences between social groups (in percentage points)
Factors that influence satisfaction with healthcare systems and willingness to spend more for healthcare

<table>
<thead>
<tr>
<th></th>
<th>Satisfaction</th>
<th>Spend more on healthcare</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total health expenditure (THE) in USD (ppp)</td>
<td>0.6497*</td>
<td>-0.4688+</td>
<td>15</td>
</tr>
<tr>
<td>Public health expenditure in % of THE</td>
<td>0.3877</td>
<td>-0.1249</td>
<td>15</td>
</tr>
<tr>
<td>Public health expenditure per capita (ppp)</td>
<td>0.6579*</td>
<td>-0.4354</td>
<td>15</td>
</tr>
<tr>
<td>Private co-payments in % of THE</td>
<td>-0.4023</td>
<td>0.0192</td>
<td>15</td>
</tr>
<tr>
<td>General Practitioners per 1,000 inhabitants</td>
<td>0.6683*</td>
<td>-0.6938*</td>
<td>15</td>
</tr>
<tr>
<td>Healthcare provider index: in-patient care</td>
<td>0.1169</td>
<td>-0.0392</td>
<td>15</td>
</tr>
<tr>
<td>Healthcare provider index: outpatient care</td>
<td>0.5282*</td>
<td>-0.6574*</td>
<td>15</td>
</tr>
<tr>
<td>Access regulation index</td>
<td>-0.3299</td>
<td>0.4286</td>
<td>15</td>
</tr>
</tbody>
</table>

Note: Data weighted. + p < 0.1, * p < 0.05.
Summary

• Low income, poor health, and the experience of cost barriers reduce confidence in receiving safe and quality healthcare when ill

• The level of outpatient healthcare provision has a strong influence on satisfaction with the healthcare system while freedom of choice / access regulation has no effect on satisfaction
Part 4: New research project for studying access to healthcare
HEALSEE: Healthcare seeking by older people

Existing research:
• Main focus on healthcare utilization during the last 12 (6) months: number and type of visits

HEALSEE focus:
• Decision making in case of acute illness symptoms
• Alternative health strategies, self-care
• The role of the social network
• The role of healthcare system
Prof. Dr. Claus Wendt

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