

General overview

Botoșani County, situated in the north of Romania, is part of the north-east development region. The County borders the Urkainain Cernăuți Region to the north, the Briceni, Edineț, Rîșcani and Glodeni Rayons in the Republic of Moldova to the east, Lași County to the south, and Suceava County to the west. The territory of Botoșani County covers 4965 km² (2.1% of that of the whole country) (1).

According to the 2011 census, the population of Botoşani County counted 412 626, with a density of 83 inhabitants per km² and 59.3% of the population living in rural areas. A large part of the population (25%) lives in the town of Botoşani, the history of which goes back to the year 1439 (1,2). After Romania joined the European Union (EU) in 2007, increasing numbers of people emigrated to other EU Member States, mainly Italy and Spain. Recently, however, a reverse trend has been observed, and many are returning to their home towns or villages.

Due to a challenging economic environment, the birth rate is low. Moreover, many people who leave the County to complete their higher education in other counties do not return. Life expectancy in the county is 75.3 years and the share of people over 65 years of age is increasing.

Health care

Romania has a social health insurance system, which is highly centralized despite consistent efforts to move away from the previous Semasko type of organization. It provides a comprehensive benefits package to those insured (85%); those who are not covered have access to a minimum benefits package.

Health care in Botoşani County is provided by a network of primary-care offices, ambulatory offices, hospitals and social health-care units. The largest health-care provider is the Mavromati County Hospital (which has external units for obstetrics and gynecology, pediatrics and psychiatry). The link between the different types of providers could be improved, since many of them work separately with poor connections to and communication with other providers. There are inequalities between the quality of care for people in rural areas versus those in urban areas (3,4).

Community health care is also provided at the county level. Its beneficiaries are usually people of low socioeconomic status, unemployed people, people with disabilities and chronic illnesses, and people with terminal illnesses in need of palliative care. Transportation – when needed – is provided

by the County Ambulance Service, which has a main station in the town of Botoşani, as well as five sub-stations (in Darabani, Dorohoi, Nicolae Bălcescu, Săveni and Truşeşti), which together cover the entire County.

Regarding hospital infrastructure, most of the hospitals are in a good shape, having benefitted from massive investments during 2013–2017. A shortage of health professionals, however, poses some challenges. Of the 516 doctors working in the County, 83% do so in urban areas. People living in rural areas have access to primary-care physicians (family physicians), but it is often difficult for them to avail themselves of this service because of the distance to be covered and poor infrastructure.

According to data from the County Public Health Authority, in 2011, there were 174 family physician offices, 63 ambulatory offices, 122 dentistry offices, 6 laboratories and 127 pharmacies in Botoşani County.



Strengths

In Botoşani County:

- access to health-care services is provided for all medical specialties;
- ✓ all health-care institutions are accredited by the national accreditation body (Agenţia Naţională pentru Managementul Calităţii în Sănătate (National Agency for Quality Healthcare Management) (ANMCS));
- ✓ the Botoşani County Council provides support to the health-care institutions;
- ✓ transnational partnerhsips in disease epidemiology.



Aspirations

Botoșani County is aiming to:

- √ improve accessibility to health-care services;
- ✓ invest more in research (delivery of clinical and healthservice research);
- establish public-private partnerships in health-careservice delivery;
- increase the overall quality of care and patient satisfaction.

____ Challenges

These are:

- ✓ to further develop end-of-life and palliative care;
- ✓ to improve the integration of services;
- √ population ageing;

✓ to enhance retention strategies for health professionals.

Potential areas of collaboration

Botoşani County is interested in collaboration with other regions on:

- health promotion and disease prevention at the population level;
- ✓ the development of palliative-care services;
- ✓ ways of integrating the work of nongovernmental organizations;
- ✓ the development of retention strategies for the health workforce.

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Working groups

Botoşani is interested in participating in working groups on:

- √ health systems/primary health care;
- ✓ Sustainable Development Goals (SDGs) (5)/equity;
- ✓ participatory approaches/resilience.

People active in the Regions for Health Network (RHN)

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