

1830 Heilbronn

1710 Bourg-en-Bresse

2042 Sarnico e Valle Cavallina



## WE IN EUROPE – TOGETHER FOR GOOD MEDICAL CARE FOR EVERYONE







Istituto Superiore Lorenzo Lotto

### Structure

- 1. Introduction
- 2. Medical care in France, Italy and Germany
- 3. Medical care in our countries and in the EU: comparisons and further consideration
- 4. Ideas to improve the current situation in our countries and in the EU
- 5. Ideas to improve the current situation in our personal life
- 6. Conclusion
- 7. Reflection about the project





## **1. Introduction**



#### Health care is an important topic because...

#### ... everyone needs it ...

- The EU has been equipped with its own bill of rights:
  - → The EU Charter of Fundamental Rights
- Chapter 1 focuses on the fundamental rights protection

Article 1 - Human Dignity

Article 2 - Right to life

#### ... but not everyone has access to it!

- → social injustices (private / statutory insurance)
- → poverty (high costs of private services / doctors)

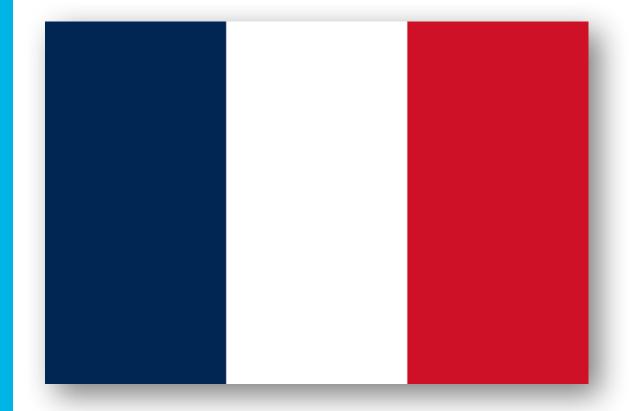


2. Medical care in France, Italy and Germany





## 2. Medical care in France





#### Facts

- Health insurance is obligatory and the deficits of the system are paid by the government.
- We pay in advance our medical bills and are later refunded by the insurance.
- General practitioners' fields of expertise has been expanded to avoid expensive visits to a specialist
- Doctors are free to work where they want which leads to medical deserts in some areas.



#### Laws

• Of 4 March 2002:

Outlines patient rights, enhances healthcare quality, addresses organ donation

• Of 21 July 2009:

Restructure the healthcare system, emphasizes hospital governance, coordination between health services...

- Nutritional information on food packaging (nutri-score)
- Fight and actions against **smoking**



### Health system in France

#### **Problems in our daily life**

• Get an appointment in certain fields:

Dentists Pediatrics General practitioners

• Lack of doctors, young doctors:

needed = 60 000 doctors quitting = 180 000 doctors

A long waiting time in emergency rooms





#### **Problems in our country**

- 30% of the French population live in a medical desert
- Underpaid staff: low wages don't make people want to pursue medical careers
- Lack of doctors and staff (especially in rural areas), beds, medical supplies



# 2. Medical care in Italy





#### Facts

- Italian citizens pay taxes which are partly used to finance the NHS
- Health plan (for example goals, finance, laws...) is determined by the Ministry of Health
- The quality levels of medical treatments change from region to region
- Each citizen can go to family doctors for basic needs (the service is free) or they can visit a specialist for special needs (the service can be free but with long waiting lists or you have to pay a fee)



#### Laws

#### Article 32 of Constitution:

The Republic protects health as an individual right; it guarantees free treatment for the poorest ones

#### • Law 833 (1978):

There are three fundamental principles on which the NHS is based:

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Universality – Equality – Equity
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• Law 328 (1999):
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Regionalization Reduction of hospitalizations Service Charter Levels of Health Care

 Law 219 (2017): Biological will



#### **Problems in our daily life**

- Long waiting lists for check-ups or specific examinations
- Many people struggle to get **appointments** for medical treatment
- A lot of patients pay for treatment in private institutions/ clinics instead of waiting for the commitment from the public healthcare system



#### **Problems in our country**

- Health workers are often on strike due to non-renewal of contracts.
- A lot of health workers decide to move abroad for work.
- Some **medical tests** are only carried out in private sector and so many citizens cannot afford the fees.



# 2. Medical care in Germany





#### **Facts**

- Everyone has to be insured
- Financed by:

**Statutory insurances** (90%): people don't have to pay the bills; the doctors get their money from the insurances

**Private insurances** (10%): people get a bill, it's refunded by the insurances

#### • Statutory insurances:

financed by people's income (15% of the salary) the higher the salary, the more you pay

- $\rightarrow$  principle of solidarity
- $\rightarrow$  to achieve social justice



#### Laws

#### Article 2:

Everyone has the right to life and physical integrity

#### Article 74:

The economic security of hospitals and the regulation of hospital care rates

#### Article 193 (compulsory health insurance):

Every person domiciled in Germany is obliged to take out and maintain health insurance with an insurance company licensed to do business in Germany



#### **Problems in our daily life**



#### Lack of doctors and nurses:

- long waiting times for appointments/sites
- not enough time for communication
- low number of students in nursing programmes



#### Health care system:

- high amount of bureaucracy in the health care sector
- differences in quality of treatment



#### **Medication:**

lack of medication



#### **Problems in our country**



#### Lack of doctors and nurses:

- long waiting times
- over-worked and poorly paid medical staff
- declining quality of care
- doctors in rural areas often do not find successors

#### **Medication:**

- lack of medication
- rising medical drug prices



#### Health care system:

- high health care costs
- unexpected health risks (for ex. Covid-19)



Slow digital transformation:
Lack of uniformity in data formats and communication standards



3.Medical care in our countries and the EU: Comparisons and further consideration





**EU-Charter of Fundamental Rights:** 

- Article 1 Human dignity
  - Human dignity is inviolable. It must be respected and protected.
- Article 3 Right to integrity of the person
  - Everyone has the right to respect for his or her physical and mental integrity.
- Article 35 Health care

Everyone has the right of access to preventive health care and the right to benefit from medical treatment under the conditions established by national laws and practices.





European Health Union

#### European Health Insurance Card

### EU4Health Programme

#### European Medicines Agency

- Cooperation
   between all EU
   Countries
   (prepare, respond, work together)
- For medical care in other EU countries
- Boost disease
   prevention
- Invest in health related research and innovation
- All drugs must be approved before going on the market

Improving the resilience of Europe's health systems



#### Comparison

Italy's differences and similarities are:

- **Organizational structure:** European medical systems vary. Italy is decentralized with regional governments managing healthcare delivery.
- Funding mechanisms: Both Italy and the EU are based on a mix of public and private funding. Italy primarily relies on general taxation, supplemented by copayments and private insurance.
- **Technological integration:** Both invest in technological advancements such as electronic health records and telemedicine services.



#### Comparison

- Laws in France: precise, complicated, detailed
- Laws in Europe: easier to understand, more global, because Europe needs to make sure to be equal to all countries, even those in difficulty
- Europeans have access to a **bigger budget** (5,1 billion) because the EU is an association of many countries



#### Comparison

- The **topics** are similar: human rights, working conditions, hospitals, insurance, digitalization
- The **measures** of the EU are mostly kept more general
- Germany has a set of laws and measures: more specific and sometimes more adapted to the citizens' needs but sometimes difficult to implement in practice





#### Conclusion

Obviously, the laws and measures **are not sufficient** because many demanding problems in the field of health care in the EU remain.

But we have thought about some solutions ...



4. Ideas to improve the current situation in our countries and in the EU





#### **Medical staff**

- Paying higher wages to make the jobs more appealing
- Financing the studies/training for the future doctors to provide qualified staff
- Lack of medical staff  $\rightarrow$  hiring staff from abroad

#### **Mental health**

- Educating students with courses about mental health
- Hiring more therapists/social workers



#### **Digitalization and improvement**

- Improving and accelerating the use of technologies and digitalization in health care
- Modernizing hospitals and healthcare facilities

#### Promotion

- Motivating people to lead a healthy life (diet, fitness programs...)
- Encouraging prevention of avoidable diseases

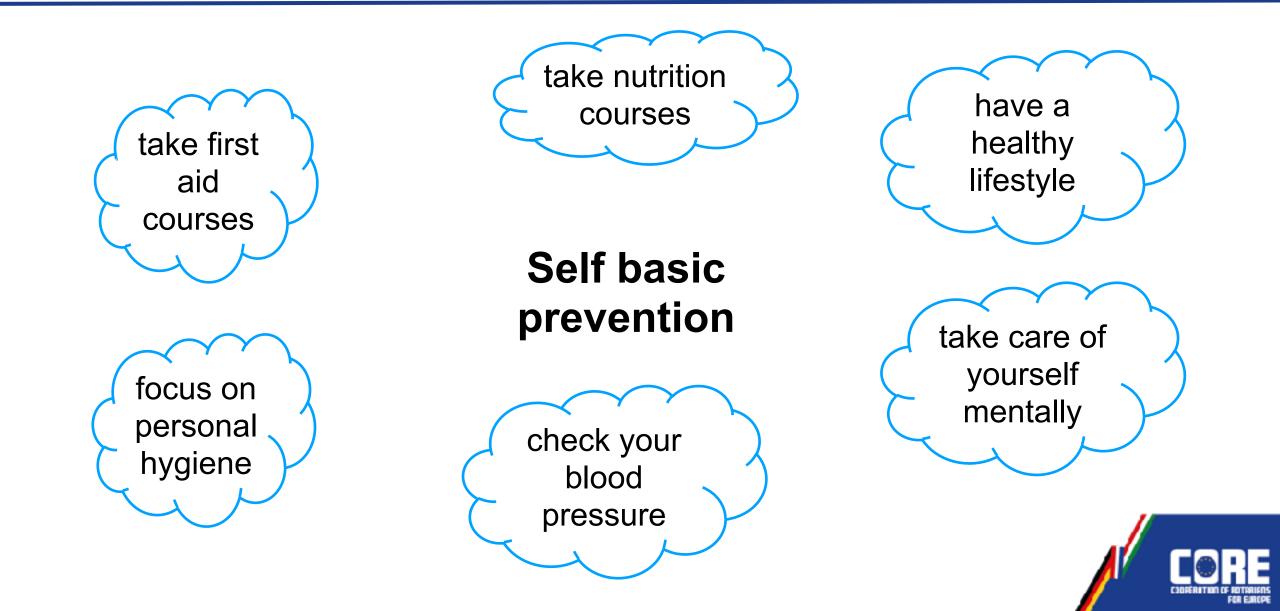


5. Ideas to improve the current situation in our personal life





#### Individual suggestions to make the situation better



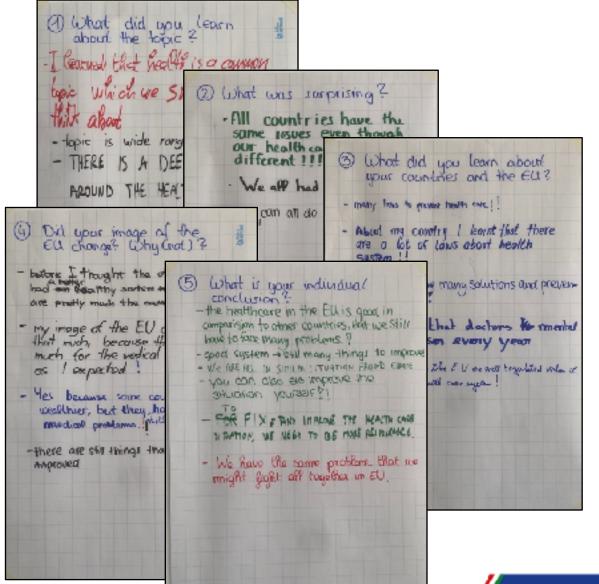
### Individual suggestions to make the situation better

- Ask your sourrounding about their **mental health** to prevent mental issues
- Blood and organ donation
- Become a young medical volunteer
- Raise awareness about paying taxes to guarantee free health service for everyone
- Go to the emergency room only for major injuries





## 6. Conclusion





#### Conclusion

#### What did we learn about the topic?

- Topic is complicated
- Problems are similar in all three countries
- It is a highly relevant issue for our future

#### What was surprising?

- Same problems despite different health care systems
- Everyone can do something to improve the situation



#### Conclusion

#### What did we learn about our countries and the EU?

- Already many solutions  $\rightarrow$  laws, prevention programmes
- Problems remain
- Similar problems to deal with

#### Did our image of the EU change?

- No: Some of us already knew some of the benefits of the EU
- Yes: We didn't know all the programmes and laws the EU offers to improve the situation



### Conclusion

#### What is our conclusion?

We found out that in comparison to other countries, we generally

benefit from good medical care for everyone.

### BUT:

- Things can be improved.
- Everyone can do something to change the situation.

WE IN EUROPE – TOGETHER FOR GOOD MEDICAL CARE FOR EVERYONE



# 7. Reflection about the project





#### What made this project special?

- Three nationalities  $\rightarrow$  cooperation
- Dealing with important topics in different languages
- Meeting new people
- Travelling abroad/visiting new cities
- Change of point of view  $\rightarrow$  communication
- Opportunity to learn about health care in the EU





## **Reflection about the project**

#### What are our personal benefits?

- Improve speaking skills in front of an audience
- Improve language skills
- Team work
- Discover new cultures
- Visit important institutions
- More knowledge about our three countries and the EU
- We know how health care systems in other countries work





### What are the highlights of the project?

- Group activities to get to know each other (escape room, mini games ...)
- Trip to Switzerland: United Nations, CERN
- Discover new cultures (songs, language...)
- Conversations between us

### What would we suggest for the future?

- More time in the cities so that we can explore them
- Visit all three countries
- Meet again to see if things have changed





# Behind the scenes ...









Bourg-en-Bresse:

It's time to work







Bourg-en-Bresse:

Voilà: our results!







#### Bourg-en-Bresse:

Enjoying good moments and good cuisine in our stay







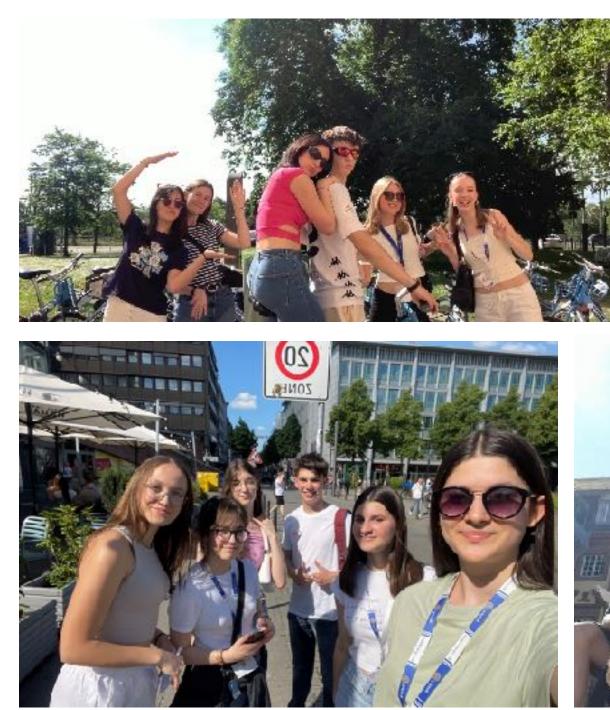
Amazing visit of Geneva





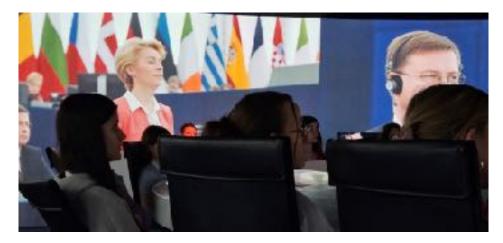
#### Mannheim: Time to focus





#### Fun moments in Mannheim







Exploring Strasbourg and the European Parliament





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# This was a great opportunity and we have learned a lot!

# Dear Rotarians, thank you very much!