

PATIENT PAYMENTS IN CENTRAL AND EASTERN EUROPEAN COUNTRIES
PROJECT SEMINAR - 15-16 March 2010 –www.assprocee2007.com

A framework for the investigation of informal patient payments

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Abstract:

Empirical evidence shows that informal patient payments are an important feature of many European health care systems. However, researchers apply a variety of definitions and assign different meanings to this phenomenon. This makes it difficult to compare directly the magnitude of informal patient payments in Europe. The aim of this study is to conceptualise the term “informal patient payments” and to outline an operational definition for their measurement. This definition is then used to re-examine the existing empirical evidence on informal patient payments in Europe, and to outline their scope and scale. For this purpose, the available literature is systematically searched to identify empirical studies on this topic.

Our results suggest that informal patient payments in Europe are a multifaceted phenomenon. Overall, these payments are not official (i.e. they are made without official receipt outside the official payment channels and thus, they are not registered and not accounted for in the official statistics). In some countries, these payments are illegal since they breach existing laws and regulations. It is also possible to define quasi-formal payments, which are illegal even though formal, but for some reason tolerated by policy-makers. There is a great variety in the types of informal patient payments depending on the nature and moment of payment, the side that initiates the payment, the reason for paying informally, and the recipient of payment. Informal payments in cash requested by providers before the service provision are usually seen as corruption, while gifts after the service provision are associated with patients' expression of gratitude. The level and incidence of informal payments are difficult to compare, but the overall findings indicate that informal patient payments are a substantial phenomenon in Europe, and cannot be neglected. Yet, little is known on why these payments exist and how they are determined by specific patient-providers relationships

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