

Health for all in Cyprus: current situation, progress and prospects

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SUMMARY This report describes the health situation in Cyprus with particular reference to the attainment of health for all. The current health situation in Cyprus is outlined and the system of health provision described. The efforts made to upgrade the health services, to strengthen health promotion and disease prevention and sustain the environment to safeguard quality of life and health are all described. The prospects for health for all in Cyprus are discussed.

Introduction

The change from one century to another has always been a major impetus for monitoring and evaluating the past, on which plans for the future can be built. The turn of century provides the opportunity to assess the current situation in Cyprus with regard to the concept of "health for all", the progress made over the years and the prospects for the 21st century.

Health for all was adopted in 1977 and launched at the Alma Ata Conference in 1978 because the differences in the health of people in different countries and within countries was considered politically, socially and economically unacceptable and was a common concern of all countries. The concept of primary health care (PHC) was proposed as the most important instrument to achieve the main social target of health for all — the attainment by all peoples of the world by the year 2000 of a level of health that would permit them to lead a socially and economically productive life.

Current situation and progress

Despite the serious political problems, Cyprus has made considerable progress towards the achievement of the target of Health for All in the 21st Century. We are now in the third phase of the demographic-epidemiologic transition, the phase of degenerative and man made diseases. Communicable diseases are no longer a problem, fertility has declined and life expectancy has increased. The main problems now are the increase in chronic and non-communicable diseases and the escalating health care costs.

The challenge for the government of Cyprus is to reduce the rising costs of health care and the inequalities in access to and quality and financing of the health care system in order to maintain the progress achieved so far in controlling communicable diseases, to reduce the incidence of chronic diseases and to sustain the environment in a way that safeguards the quality of life. Recent statistical data on certain health indicators in Cyprus are shown in Table 1.

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Table 1 Statistical data, Cyprus

Indicator	Value
Population	771 000 (1998)
% children < 15 years	
1982	25%
1998	23.8%
% people 65+ years	
1982	10.8%
1998	11.2%
Total fertility rate	1.92 (1998)
% population residing in urban areas	54%
GNP per capita (US\$)	10 260 (1998)
Total adult literacy rate	95% (1995)
% population with access to safe drinking-water and adequate sanitation	100%
Infant mortality rate	7.0/1000 live births (1998)
Under-5 mortality rate	9/1000 live births (1998)
No. persons/doctor	379 (1997)
No. persons/nurse	222 (1997)
No. hospital beds/10 000 people	47.6 (1997)
Expenditure on health sector	5.8% GNP (1997)
Main causes of death	Cardiovascular diseases, cancer and accidents

Sources: Cyprus Bureau of Statistics (1998), UNICEF (1999), Ministry of Health of Cyprus (unpublished data)

GNP = gross national product

Health care provision

Currently there is a dual system of health care delivery in Cyprus that offers all three levels of care: the public system run by the Government and the private system provided by the private hospitals and practitio-

ners. PHC is provided at outpatient departments of hospitals (5), suburban outpatient departments (7), urban (5) and rural health centres (23) and subcentres (274). It is estimated that nowhere in Cyprus is further than 10 miles (straight-line distance) from a health centre, although in some parts (particularly the mountainous areas) actual travel distances probably exceed this. These PHC settings are adequately staffed and well equipped. A few of the doctors are specialist general practitioners (GPs); a programme for training the rest as family physicians, in view of the introduction of a national health insurance system (NHIS), has already been undertaken. Secondary and tertiary health care is provided by the district hospitals and by specialized centres (Thalassaemia Centre, Cyprus Institute of Neurology and Genetics). The private sector offers mainly primary and secondary health care. In urban areas, PHC is practised by all doctors working in the field of medicine, regardless of specialization.

The introduction of an NHIS is expected to reduce disparities and inequalities in the field of health by tackling issues such as:

- financial issues (mobilization of key stakeholders — the Government and private sector);
- quality issues (lack of practice standards, long waiting lists in the public sector, lack of quality monitoring systems and checks and balances);
- equity issues in access to services;
- issues of efficiency and effectiveness (oversupply of physicians and other health care workers, oversupply of hospital beds and laboratories, duplication of services, inefficient and inappropriate technology, overuse/misuse of expensive drugs, poor centralized management of public hospitals).

The NHIS, already approved by the Ministry Council, has recently been submitted to the House of Representatives (legislative body) for enactment.

Upgrading of public health services

This involves the creation of a public health laboratory, establishment of a health-monitoring system and the introduction of a surveillance network for communicable diseases. The aim of these services is to maintain control of communicable diseases and tackle chronic noncommunicable diseases, with an upgraded level of the services provided by the public health services, in keeping with the European Union acquis. The public health laboratory and the surveillance network for communicable diseases will monitor and upgrade the investigation and management of communicable diseases, establishing international collaboration as well. The existing monitoring and evaluation of the implementation, effectiveness and impact of health services provided that takes place at the central level of the Ministry of Health will be upgraded as well, with the creation of a health-monitoring system.

Health promotion and disease prevention

Health promotion is seen as a lifelong benefit for the health of the population. Awareness of the hazards of unhealthy lifestyles is growing amongst the people, not only as a result of the national policies and practices, but also as a result of the diffusion of information at schools and other places and via the media. Health education activities have continued and have been strengthened

in the field of noncommunicable diseases, as well as HIV infection. There are more than 50 nongovernmental organizations actively involved in health promotion activities, which indicates the breadth of intersectoral collaboration and community participation in the field. In the government development budgets, US\$ 400 000 per year has been specifically allocated to health education and promotion since 1993. New legislative reforms have recently been introduced in relation to tobacco and smoking and drugs and drug abuse.

Sustaining the environment to safeguard quality of life

Some of the activities of disease prevention through environment, carried out by the Ministry of Health, the Ministry of Agriculture, Natural Resources and Environment, and the Ministry of Labour and Social Insurance are the following:

- monitoring pollution
- diagnosing, treating and controlling animal diseases
- monitoring the level of environmental pollution of drinking-water supplies from pesticides and other micropollutants
- monitoring veterinary drug residues in meat and animal products
- monitoring the radioactivity in drinking-water and food.

The existing legislation, relevant to the protection of the environment, has been improved. All households in Cyprus have access to safe drinking-water and efforts have been made to improve the quality of drinking-water in accordance with European Union regulations. Water quality for domestic use is regularly monitored. Almost

100% of the population have adequate sewage-disposal facilities.

Prospects

The central vision for Health for All in the 21st Century is the same in Cyprus as in the rest of the world. The importance of health, being central to sustainable human development, is recognized and Cyprus is prepared to face the new challenges in the following ways.

- Reform of the health system, with PHC playing the central role, is expected to reduce disparities and inequalities in the field of health, and improve efficiency and effectiveness.
- The recognized interrelation between socioeconomic status and health status will enhance, at all levels, intersectoral collaboration between ministries and services involved in community devel-

opment, especially as regards agriculture, stockbreeding, industry, education, housing and transport.

- Changes in the disease pattern from communicable diseases to chronic non-communicable diseases and the problems of ageing have caused a shift in the burden of those in need and the activities required for disease prevention. Although communicable diseases are not a major cause of concern, the Ministry of Health is continuously monitoring the situation, in view of the emergence and re-emergence of communicable diseases.

We are already in the 21st century. The Ministry of Health of Cyprus is committed to the principle that "the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being".

Sources

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