

## NON-TRUST IN PUBLIC AUTHORITIES DUE TO NON- INFORMATION BY HEALTH SPECIALISTS REGARDING PANDEMIC

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***Abstract:** Since the beginning of the pandemic, Romania, compared to other states, has tried to organize and protect the country's population as well as possible, this COVID-19 virus having a major impact on society. The central authority set up the National Committee for Emergency Situations, which monitored the situation of coronavirus-infected patients and the impact on the population. At the same time, it provided measures for the organization and coordination of the health system throughout the country. Especially in the international pandemic situation, the current situation was analyzed at the national level and the citizens were informed about the restrictions imposed in this situation, as well as the respect of the fundamental human freedoms. However, compared to these priorities of the central authorities to control the pandemic situation and not to spread as in other countries, namely China and Italy, in our country there was also false information or misinformation of the population that created panic and distrust in authority. In the current conditions, the challenges of the pandemic situation in some cases have been approached differently, especially in the field of media which through the information addressed to the citizens led to misinformation of the population regarding the respect of democratic rights and freedoms of Romanian citizens. the health of the population at the level of the whole society.*

***Key-words:** public health, misinformation, health system, challenge, pandemic, coronavirus.*

***JEL Classification:** M12, I13, I18.*

### 1. Introduction

At the beginning of the pandemic, our country received this challenge with skepticism, people were distrustful due to lack of information by health professionals. The state of emergency established in our country has created panic, the population has started to stock up and to be overly attentive to the rules of hygiene and restrictions on the health of the citizen.

Also, the authorities from all over the world have focused and focused their attention on the measures to fight and attenuate the coronavirus that have had effects on the economy of both Romania and other countries. In the current conditions, the media and social channels are dominated by the pandemic situation, which transmits information related to daily reality and tries to substantially change the daily routine and social infrastructure to encourage and promote prevention in the event of such events.

Under these conditions, the resilience of the health system is mainly focused on the impact of the COVID-19 pandemic and the consequences for the population and society. In this case, the pandemic had a major impact on population health and mortality in Romania, a figure found in most EU countries, the number of deaths caused by COVID-19 being about 34,500 by the end of August 2021. Due to this situation, the measures taken by the central authority to keep the pandemic under control had a significant impact on the economy, in the sense that Romania's GDP fell to 3.9% compared to the EU GDP of 6.2%.

In order to be a country open to the current situation, Romania has joined the actions regarding the vaccination campaign, but the research shows that we have a vaccination rate that places us among the last in the world and the penultimate in Europe, respectively about 27.5 % of people vaccinated at full dose. In these conditions, analyzing the situation of deaths, we are on the second place in Europe and on the sixth place in the world about 92% of Covid-associated deaths.

The pandemic situation was something new, but due to the incorrect information and the appearance of some feek news, or misinformation of the population, the citizens did not trust the authorities anymore, which reduced the vaccination rate. Researchers think that informing the population in a different way means informing the population in a different way so that they can gain confidence and become trusted specialists in order to mobilize the population and vaccinate on a very large scale.

## **2. Methods and research**

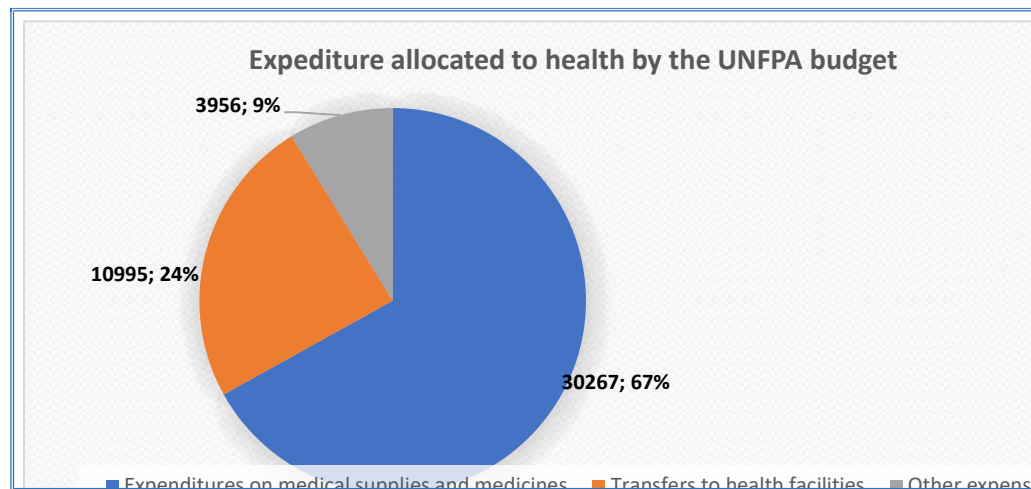
Public health care is coordinated by the Public Authority responsible for health insurance and is provided by all types of state or private health units. In this regard, we mention that the greatest responsibility for public health insurance lies with the Ministry of Health, the county and Bucharest public health directorates and other specialized structures, the National Health Insurance House, the specialized structures within the ministries and institutions with own health network, as well as local public administration authorities.

From the analysis carried out at the level of 2020, it is observed that the share of expenditures for health care in the total expenditures made from public funds represents about 7.4%, these being provided and financed from the state budget, local budgets and UNFASS.

In 2020, in our country, health expenditures were allocated by the Ministry of Health from the state budget in the amount of 19,890 million lei, and from the FNUASS budget through the National Health Insurance House the amount of 45,220 million lei, which is observed that from public funds were spent in the amount of 65,110 million lei for the health sector. During this pandemic period, out of the total expenses allocated to the Ministry of Health for the field of health, 63% were transferred to other public institutions in order to purchase Covid-19 specific materials, medicines and equipment.

Apart from the ones mentioned above, we specify that the public hospitals were organized especially for Covid, and in some hospitals special sections were organized for people with Covid. Medical services were provided to all patients, and separate circuits were created and measures were taken to restrict the infection of people with covid-19. Analyzing this aspect, we notice that at the level of CNAS, expenditures were made for the health field in the amount of 45,220 million lei.

We present below the schedule on the distribution of expenditures from the UNFASS budget, as follows:



Source: financial statements [www.cnas.ro](http://www.cnas.ro)

Compared to the expenditures allocated for the health field from the FNUASS budget, the hospitals also benefited from funds from the state budget and local budgets, the largest share being from the local budgets, respectively 32,557 million lei, about 62%. In 2020, the health sector was the area most affected by the COVID-19 pandemic. Also, with the increase in the number of cases of infection, the number of medical needs that could not be covered by the public health system has increased. This was observed by the fact that the health system in Romania was fragile and before the outbreak of the pandemic, with the spread of the virus, a multitude of problems faced by this field were highlighted.

As a result of the pandemic, the importance of strengthening primary health care, prevention services and public health in a health system currently heavily dependent on hospital services has been highlighted.

Given the fact that the Romanian health system is fragile and with many problems, as well as the fact that there was a lot of controversy at the international level, the virus was spreading rapidly and the measures taken by the authorities in some situations could not cope. It transmitted news that informed or misinformed the population, this created distrust in the authorities.

In this sense, in Romania the vaccination campaign against COVID-19 started relatively well, although it suffered delays due to supply problems. The vaccination campaign was also supported by a communication strategy, but reluctance to vaccinate continued to severely limit vaccination coverage, and the vaccination program slowed.

Compared to 2019, approximately 44% of Romanian health expenditures were allocated to hospital services (an increase of 3 percentage points compared to 2010).

This is the highest share of EU countries, averaging 29%. However, the total amount per capita remains low in absolute terms. In this respect, they are the lowest in the EU in terms of per capita spending on prevention, indicating that public health was under-resourced and under-performing before the pandemic.

At the level of our country, health expenditures amounted to 1,310 euros per year for health per capita, compared to 3,523 euros, the average of EU countries, placing us on the penultimate place in the EU. As a share of GDP, Romania allocated 5.7%, the second lowest percentage of EU countries, after Bulgaria. Due to the emigration of medical staff, it has contributed to the shortage of health workers in the country, and the number of doctors and nurses per capita is well below the EU average. This negatively affects access

to care and increases waiting times. The health workforce has also been a key concern in preparing for the pandemic.

According to Eurostat data, current health expenditures accounted for 5.7% of GDP in Romania in 2019, compared to the countries with the highest amounts spent on health, such as France and Germany, where the share was over 11, 0%. Also, as in the other Member States, in Romania the balance is tilted in a significant proportion to the public sector, with 80.5% of current expenditures in 2019, the main source of financing public spending on health being the financing schemes with compulsory contributions to the social security system.

Due to the health infrastructure that is below EU standards, due to inefficient operations and financial management, as well as the lack of investment, healthcare costs are very low and the level of medical needs is unmet. As a result, these costs are limited to hospitals and hospital services, with primary and community health care remaining underdeveloped.

In this situation, the consequence is that preventive health care is underfunded, and ensuring access to health care does not meet all categories of people. In Romania, a large number of people do not benefit from health insurance, for example the categories of people who are not registered and do not pay social health insurance contributions (people working in the underground economy, subsistence agriculture, people who do not have a identity etc.).

At the same time, the hospital units do not correspond to the safety norms and the hygienic-sanitary norms, which generates the distrust of the citizens and increased costs regarding the maintenance of the hospitals.

The authorities also have limited administrative capacity, which makes it difficult to carry out reforms, especially in the field of health. However, the pandemic has highlighted the social role and responsibility of the media, as well as the fact that it will address in depth the way in which journalism goes through this period of misinformation looking for a way back to truth and accuracy. By setting up the official news site, official information about the pandemic, number of cases and other elements specific to the pandemic were presented, where the citizen was informed from a reliable source.

A UNICEF survey found that young people believe that the lives of children have improved to a greater extent, but adults and older generations appreciate the health services, education and physical safety that today's children enjoy. higher level than in the previous generation.

At the same time, in the UNICEF survey, children are opposed to seeing the world through the eyes of adults, are optimistic about it and are inclined to keep life expectancy, considering a more global perspective and are determined to make the world a better place.

Also, all countries included in the survey believe that the vast majority of young people said that their countries would be less exposed to threats such as COVID-19 if governments coordinated with other states instead of acting on their own.

At the same time, for the younger generations it is essential to be directly consulted with social, everyday issues, for their well-being and with the changes in their lives.

A study by INSCOP concludes that the conspiratorial view of global control is stronger among the population with primary education and low rural incomes, but in the case of the COVID pandemic, the share of the population believes in this scenario and extends not only among those from urban with secondary education, but also among the population with higher education and high income.

In conclusion, the World Health Organization acknowledges that one of the most dangerous aspects of the COVID-19 pandemic is misinformation, which show public distrust of public health measures and lead people to make wrong decisions that contribute to the spread of the virus.

### **3. Conclusions and recommendations**

The public authority responsible for health insurance aimed to plan efforts with a focus on key values, in the sense of prioritizing and developing health services, treating patient dignity with respect, firm cross-sectoral and interdisciplinary involvement of health personnel and local communities, by ensuring the report between the expenditures made especially during the pandemic and the benefits obtained in improving the health of the population for going through these difficult periods.

First of all, the advertising campaign was made impossible to present unrelated materials, in the sense of presenting conclusive and real images. For example, the population had to check the sources of information in order to be correctly informed from reliable sources.

Through a source of correct information, not fed by panic, an aspect that can help the Romanian population to be vigilant in the way it accesses, assimilates the news presented in the media.

Due to the fragile problems of the health system, the pandemic situation also created a good aspect, in the sense that additional funds in the field of health were allocated, equipment and medical equipment were purchased to improve the health system and fight coronavirus.

Also, in this pandemic, few have made donations to the health care system, but some have been skeptical that the money donated could reach people in need of medical care. At the same time, studies and research have shown solidarity and empathy for doctors, for people returning from abroad in the midst of a pandemic, for the elderly or those in more difficult situations, but some of those surveyed made organized donations at the site. some donations on their own initiative to people who needed it, less donations in cash due to the suspicion of distrust that they will end up in the health system or those in need.

This distrust of the authorities, this pessimism of the population is due to the fact that nothing comes naturally, but only after receiving aid from abroad, then the protective equipment and medicines appear on the market for sale. In this situation, the information from questionable sources, thinks that the authorities had to deal with the purchase of medical supplies and medical equipment centrally before receiving aid and allowing their marketing.

At the same time, the crisis has brought to light beautiful things in our society, in the sense that it has reset many things in our thinking and social dynamics. By empathizing and volunteering to help those who have been infected and have not been able to afford food, we can draw conclusions about improving mechanisms in both health and social care.

In conclusion, the lack of transparency of funds dedicated to helping those in the front line is claimed by many citizens, but from good deeds and volunteerism by citizens, the authorities could learn from some non-governmental associations the formulas that have led to gaining people's trust. .

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