

Healthcare Policy in Albania Compared to the Healthcare System in the World and methods to Achieve Success

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Abstract – Over the past ten years, the proportion of private healthcare services has grown significantly. Particularly in major urban areas, the amount of specialist private diagnostic centers, laboratories, and hospitals has been rapidly increasing. The 13 private hospitals provide a full spectrum of medical services, in addition to numerous private inter-diagnostic centers and laboratories.

The goal is to provide equal access to education, employment, and other opportunities to people who have been traditionally excluded. It is a set of initiatives, including programs, and procedures that are designed to promote access to health care employment, and business opportunities for people historically excluded and underrepresented groups. The primary intention is to offset the effects of past discrimination and to create a level playing field for those who have been disadvantaged by historic injustices.

Finally, it will examine the arguments against healthcare action, including the idea that it leads to evaluating the system of healthcare and provides a general scheme that promotes health for all in the future.

Keywords – Healthcare, Diagnostic, Action, Business, Radical, Agencies, Employment

I. INTRODUCTION

Albania's healthcare system has undergone significant structural adjustments in the last ten years that have had an impact on primary healthcare. Both outside the health sector, in the shape of decentralization, and within the health sector, initiatives to restructure coverage and access and administration in Tirana, are the driving forces behind these reforms. The healthcare system (Saric, J. et al. (2021)) has been damaged during the past ten years as a result of some of these radical reforms as well as the additional social and financial difficulties the nation is facing. Therefore, the primary healthcare system has been the center of current healthcare reform initiatives. It refers to policies that seek to rectify the effects of past discrimination by providing special privileges to people from historically oppressed groups.

The Ministry of Health gave its approval to the healthcare system and health promotion strategy following extensive engagement. The approach addresses the state's public health issues while simultaneously utilizing and attempting to maintain the nation's assets in the healthcare system. This will necessitate a significant amount of effort to prevent existing scenarios from damaging Albanians' wellbeing, and even more work to reverse them. The plan is based on the WHO's Health21 general scheme for Europe, which promotes health for all in the twenty-first century.

The plan includes the justification for involvement and an examination of the circumstances and tendencies in Albania, as well as a list of the major part policy domains that both individually and jointly impact public health. Specifically, the evaluation is located in section 7, "Mechanisms for Improving Health in Albania." Numerous individuals reviewed the primary documentation, which resulted in the creation of realistic and useful short- to medium-term suggestions and goals. Section 6 of the report contains basic suggestions for enhancing the public health system (Crosby, R. D., Kolotkin, R. L., & Williams, G. R. (2003)).

Albanian health care administration and management attempts to ensure that agencies are answerable to the people, while also promoting professional commitment and increased service provision effectiveness. The nation is undergoing significant radical reforms, including the consolidation of social and healthcare regulation entities, and institutional reform that resulted in the establishment of new agencies. The primary intention is to offset the effects of past discrimination and to create a level playing field for those who have been disadvantaged by historic injustices. At its core, as in (Fryer Jr., R.G. and Loury, G.C), affirmative action is intended to create an environment of fairness and to ensure that individuals are judged based on their individual merits and accomplishments, rather than on their race, gender, or other characteristics. Through the use of affirmative action (Mark C.Long, 2003), individuals have the opportunity to access occasions that were previously unavailable to them due to systemic discrimination. This is important in order to create a fair and equitable society, in which everyone has an equal chance to succeed.

On the one hand, some people argue that healthcare policies are a form of reverse discrimination, while on the other hand, others contend that affirmative action is a necessary corrective measure to address the long history of discrimination against minorities and historically disadvantaged groups.

1. Method Approach for designing strategies

This strategy plan is built on a multifaceted examination of Albania's PHC system and the variables impacting it. A PHC-specific evaluation has been conducted in this regard, and it is founded on the "WHO European Framework for Action on Integrated Health Service Delivery" approach and the tracking systems suggested by the European WHO Center for the PHC. More than 180,000 people were served by the 46 medical clinics in Albania, where 73 PHC healthcare workers (supervisors, specialists, nurses) were reached and contacted. Additionally, 25 significant sources were questioned at the local and national levels at 15 pertinent organizations. The plan was created over the course of six months by a multidisciplinary team made up of experts in many PHC fields. International authorities in the field have approved the group's efforts. Programs for affirmative action in the workplace aim to eliminate or lessen historical patterns of employee harassment based on demographic differences, (Harrison, Kravitz, Mayer, Leslie, Lev-Arey, 2006). They expand the number of members of historically marginalized groups in places where they have been prevalent (Spann,1995).

By avoiding disease, offering evidence-based programs, strategically managing disparities, protecting vulnerable populations, and lowering the demand for needless hospital services, PHC facilities safeguard and enhance social health. Regardless of gender, ethnicity, or economic condition, services are offered. Because they provide personnel inside an organization with the responsibility of keeping an eye on the problem, these programs also help organizations (Hajrulla, S., Demir, T., Bezati, L., & Kosova, R. (2023)) identify persistent social injustices.

This is accomplished by methodically gathering pertinent data, looking for tendencies in the data collected, figuring out what caused the pattern, and resolving the issue (Fullinwider, 2018). This literature review will explore the topic of whether affirmative action is a fair way to address historical injustice. First, it will provide an overview of the development and implementation of affirmative action policies in the United States. Second, it will discuss the arguments in favor of healthcare action, including the idea that affirmative action and applying economics instructions on international relations (HAJRULLA, S., & HAJRULLA, G. (2021)) is needed to compensate for centuries of institutionalized discrimination and to ensure that all individuals can succeed. Using some mathematical models we can see it growing statically and calculate approximations in statistical data (Kravitz & Klineberg, 2000; Hajrulla S & Hajrulla G, 2021). Finally, we use one method for getting results through methods used in the previous article (Hajrulla S, Osmani, Lino, Avdiu and Hajrulla G, 2022). It will examine the arguments against affirmative action, including the idea that it leads to reverse discrimination and that it undermines the notion of a merit-based society.

The origin of healthcare action in the United States can be traced back to the Civil Rights Act of 1964, which prohibited discrimination in employment and education. Since then, affirmative action policies have been implemented in various forms, including the use of quotas, preferential hiring, and the consideration of race and gender in college admissions. This policy was implemented in the United States in the 1960s and has since been a controversial topic in the public eye.

The history of affirmative action begins in the 1960s with President John F. Kennedy's Executive Order 10925, which prohibited discrimination in the workplace based on race, creed, color, or national origin. This order paved the way for Title VII of the 1964 Civil Rights Act, which added gender to the list of protected classes. Title VII enabled the federal government to "take affirmative action" when it came to

employment decisions, in order to remedy discrimination and ensure equal opportunity for all. This was followed by the 1965 Voting Rights Act and the 1968 Fair Housing Act, which further reinforced the concept of affirmative action. Numerous studies have shown that these policies have had a positive effect, especially in terms of increasing the number of women and minorities in higher education and in the workplace.

II. BASIC HEALTHCARE SERVICES ON CERTAIN IDEALS AND GUIDELINES

Proponents argue that healthcare action is an effective way to level the playing field and ensure that all individuals could succeed. On the other hand, opponents of healthcare argue that it is unfair and can lead to reverse discrimination. They contend that healthcare policies favor certain races and genders over others, which undermines the notion of a merit-based society. Additionally, they argue that healthcare action policies can be used to punish individuals who are not responsible for historical injustices.

The contention that was at the heart of the Michigan instances was that affirmative action is necessary to ensure the heterogeneity of school systems and workforces (Hajrulla, Demir, Bezati & Kosova, 2023; Mark C.Long, 2003).

2.1 Ideals and Guidelines

- **Consideration for the patient:** In primary health care centers, everyone is given the proper consideration, dignity, and treatment; services are patient-centered and promote the patient's care;
- **Teamwork:** Healthcare professionals collaborate to foster openness and provide the best treatment possible for their patients.
- **Quality:** The clinic strives for continual quality development and is founded on the evidence-based medical concept.
- **Inclusivity:** The conceptual leadership and performance assessment of primary health care services engage communities and customers.
- **Sustainability of care:** Primary health care services ensure communication and collaboration with other levels of the health system, as well as with social and community programs.
- **Cost-effectiveness:** Medical treatments and procedures that offer affordable treatment of health issues are given priority in basic healthcare.

Healthcare action's contribution to ensuring fair recruitment processes and decisions is a further justification. This position was included in the American Psychological Association's advisory opinion in the Michigan cases and has particular significance to public discussions (Blanchard & Crosby, 2012). Affirmative action, according to critics, is essential to diversify American companies and schools (Tierney 1997). The proof that affirmative action helps ethnic minorities get a chance to attend college up until recently included analyzing admission trends over time and was therefore, at best, speculative (Sterba, 2011). But in 1998, former Princeton and Harvard University presidents William Bowen and Derek Bok wrote the ground-breaking book *The Shape of the River* (Bowen & Bok 1998). Their work offered the first comprehensive quantitative analysis of the effects of affirmative action.

A recent review of data for around 27,000 students who were accepted to approved law schools in 1991 and were followed throughout law school and beyond contrasts with the claim that affirmative action helps promote diversity (Spann, 1995). The statistics revealed that African Americans were significantly less likely than whites to graduate from law school or pass the examination and that they selected higher-tier law schools than whites with equivalent qualifications. Introductory credentials had a strong correlation

with class ranking, which helped forecast graduation and the probability of passing the bar. Recognizing the historical significance of race-conscious admissions practices, according to Sander's findings, fewer African Americans graduate from law school and take the exam as an outcome of race-sensitive admissions practices than would be the case with race-neutral ones. According to Sander, African American law students would be less likely to drop out of school if they were in the center of their course at a fairly low law school rather than at the bottom, as they currently are, in a higher-tier law school.

In this essay, I will discuss why healthcare is a fair way to deal with historical injustice. We will examine the legal and moral justification for healthcare, as well as the benefits of these policies, to make a compelling argument in favor of the topic.

First, healthcare action is a necessary step to ensure that historically marginalized groups are given an equal chance to succeed. Despite great strides towards equality in recent decades, many people still face systemic discrimination. Women and people of color are often passed over for promotions and job opportunities due to their gender or race. Affirmative action seeks to level the playing field by providing special privileges to these groups, such as preferential hiring practices and access to scholarships (Hajrulla, S., Demir, T., Bezati, L., & Kosova, R. (2023)).

Second, healthcare is an effective way to address the legacy of past discrimination. While there are no easy solutions to undo the damage caused by centuries of inequality, affirmative action is one way to reduce the gap between the privileged and the marginalized. By providing additional resources to historically disadvantaged groups, affirmative action offers them a chance to overcome systemic barriers and achieve success.

Third, healthcare action is a means to guarantee that everyone has a chance to contribute to their community. When people from all backgrounds have access to the same opportunities (Hajrulla, S., Uka, A., & Ali, L. (2022, November)), they can bring a variety of perspectives to the table. This diversity of ideas and experiences can help foster an environment of innovation and progress and level the playing field in order to give those who have been discriminated against a better chance of success. By implementing affirmative action policies, employers can demonstrate that they are committed to creating an equitable workplace.

III. RESULTS

Reverse discrimination against white males, who are often seen as the primary beneficiaries of preferential treatment. There is a risk that it could even lead to increased social tensions (Hajrulla, Demir, Bezati & Kosova, 2023). One of the major criticisms of this action is that it effectively discriminates against those who do not belong to the group that it is intended to benefit. For example, when universities set quotas for the number of students from backgrounds, it could lead to those from other backgrounds having their applications unfairly overlooked. This could have a long-term effect on the prospects of those affected and could lead to feelings of antipathy and mistrust amongst different sections of society.

At the core level of health maintenance, the combination of medical care and social assistance has already been accomplished. Since the government prioritizes ensuring universal coverage and supporting the neediest with a basic range of services, the incorporation will also include primary healthcare services.

IV. DISCUSSION

Healthcare action policies can also be viewed as unfair or even racist if they are not properly implemented. Furthermore, these policies can create a competitive disadvantage for non-minority candidates who might otherwise be well-qualified. They can be used to further the interests of those in power, rather than to benefit those who have been historically oppressed by applying international (Hajrulla S & Hajrulla G, 2021) and using a statistical method to estimate an unknown price (Hajrulla S, Osmani, Lino, Avdiu & Hajrulla G, 2022). For example, corporations may use it as a way to increase the diversity of their workforce and appear progressive, while not necessarily providing any meaningful opportunities to those from disadvantaged backgrounds. This could lead to a situation where those in charge can benefit from the policy, while those it is intended to help remain marginalized.

Classical primary healthcare will provide additional social assistance components while also enhancing municipal-level coordination between the health system and social agencies. Small villages have been merged into bigger municipalities and an approach to solving real-life (Hajrulla, S., Demir, T., Lino, V., & Ali, L. (2023)) as a result of the wide geographical reform, and it is anticipated that this will result in a decentralization process that will give local governments more authority and accountability, especially in the area of health. PHC's objective is to place an emphasis on community health rather than just personal health. The goal of the programs offered at PHC facilities should be to prevent disease and promote good health. PHC operations are the sole way for many public health initiatives (such as vaccination, training, observation, and diagnostics) to engage communities and reduce both contagious and chronic diseases. In the areas of preventing disease and the evaluation of vulnerable or at-risk groups, the effectiveness of the interaction between the new local healthcare institutions and the health centers will be significantly enhanced.

Healthcare action critics frequently criticize the practice as unjust, arguing that it undermines the United States' valued concept of meritocracy by centering hiring decisions on demographic factors instead of capacity and performance as in (Hajrulla, Uka, Ali, 2022) Supporters adopt a distinctly different position. At the most fundamental level, they question why many other widespread behaviors that undermine meritocracy are not criticized but affirmative action is picked for criticism. Universities, for instance, develop extensive justifications (Hajrulla, D., Bezati, L., Hajrulla, G., & Hajrulla, S. (2023)) as to why legacy students are three to four times more likely to get admitted than other applicants. Additionally, some university players have profited from unique admissions standards despite evidence that institutions may not make money off of their athletics departments (Bowen, Jordan, Epstein, Wood, Levin, 2003). Consequently, rather than being based on meritocracy, staffing decisions in workplace settings are frequently made based on habit (Crosby, Kolotkin, Williams, 2003) or commercial needs.

Depending on how the method and the concept are presented or interpreted, different people have different perceptions of affirmative action. Outreach programs and other "friendly" types of affirmative action are preferred to "strict" versions, such as schemes that use gender or ethnicity as a deciding component in recruitment choices, as in (Hajrulla, Demir, Lino, Ali, 2023; Aberson, 2003). Affirmative action is generally disliked more by those who believe it to be a quota system, a structure of gender or ethnic favors. Individuals who have been convinced that affirmative action takes into consideration quality are more likely to agree with the policy than other people. In principle, a technique is ranked higher when it is thought to be impartial. Aberson (2003) discovered that when the justifications for the program were given, both individuals of color and white people enhanced their approval for it. Few

scholars have studied how various defenses or justifications affect people's perceptions of healthcare affirmative action.

V. CONCLUSION

In conclusion, the execution of this Strategy by the planning process in support of the accomplishment of the goals is the responsibility of the Ministry of Health and Social Preservation, as well as its dependent entities, including the University of Medicine, the Order of Nurses, Midwives, Physiotherapists, and Physicians of Albania.

The integrated policy management group (IPMG) established by the Prime Minister "On implementing actions for the application of the broad sectorial/intersectional methodology, as well as the founding and operation of the mechanism", will oversee the PHC improvement plan supervising.

Healthcare action is a complicated subject that requires understanding and empathy on both sides of the debate. Supporters of affirmative action argue that it is a crucial apparatus to address ongoing discrimination in the workplace and to promote diversity in educational institutions.

Opponents of affirmative action believe that it is an unfair form of reverse discrimination and that it should not be used to prioritize certain groups over others. Ultimately, the decision to use affirmative action rests with the government and employers, who must balance the need to promote fairness with the need to prevent potential abuses.

Despite the debate surrounding healthcare action, it is still a necessary tool for addressing the effects of historical injustices. While it may not be perfect, affirmative action can help to ensure that everyone has an equal opportunity for success and can help to create a more diverse and equitable society. This action is a necessary step to combat the legacy of historical injustice. It is a fair way of addressing the disadvantages that certain groups have faced in the past, and it is often the only way to ensure that those who have been systematically oppressed can have the same chances as everyone else.

The construction and strengthening of the health information system from the medical clinics to the Administrator will enable the creation of strategic and operational plans as well as the enhancement of health factors and managed service efficiency. As an important tool for creating a more equitable society, we must continue to use it to promote equality and justice.

Although some may argue that healthcare action can lead to reverse discrimination, the evidence suggests that it is an important and effective instrument for achieving greater equality. Healthcare action policies may not always be enough to help corporations and colleges reach their diversification and inclusion objectives.

The National Operator will possess adequate organizational capability to formulate regional and local comprehensive health plans, allowing HCs and other partners to participate and offering process guidance. In PHC, family physicians will make up about 50% of the workforce by 2025. There will be construction and operation of a system for tracking PHC progress.

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