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PLACE OF HEALTH CARE SYSTEM IN SOCIAL INFRASTRUCTURE

Currently one of the most important areas of geographic research is the study of the social development of the region. Social infrastructure serves as an important condition that is necessary for life, while its effective operation contributes to the level and quality of life. Health care system is one of the priority areas of research in social and economic geography.

Service sector is a set of economic branches whose products appears in the form of a purposeful activity or service. As part of an integrated system of social infrastructure some of its elements are grouped into specific subsystems that perform certain functions. In particular, subsystem of health care system serves as the medical services. It includes institutions (hospitals, clinics, dispensaries, health centers, rest homes, medical points, etc.), medical staff (doctors, nurses and medical personnel, staff of kitchen, dining room, laundry, etc.) and services of health care (diagnosis, screening, prevention, treatment, etc.).

Territorial organization of society includes components such as the distribution of population and industries of production and non-production sectors (including health care), natural resources, territorial division of labor, economic regionalization. At the present level of geographical scientific research, territorial organization of society acts as the main object of study of social and economic geography. Health care system, as a key component of the territorial organization of society is a geographically organized system of health care facilities, which are aimed at preserving and improving public health. Balanced development of health care system is determined by its value in society.

Key words: health care system, social infrastructure, standard of living, territorial organization, development.

Тарас Погребський. МІСЦЕ СИСТЕМИ ОХОРОНИ ЗДОРОВ'Я В СОЦІАЛЬНІЙ ІНФРАСТРУКТУРІ

У статті визначено місце системи охорони здоров'я у соціальній інфраструктурі. Встановлено, що ефективне функціонування усіх галузей соціальної інфраструктури сприяє підвищенню рівня та якості життя населення. Доведено, що система охорони здоров'я є складовою соціальної інфраструктури у блоці галузей сфери обслуговування, тому на неї розповсюджуються всі закономірності розвитку та розміщення продуктивних сил на основі вчення про територіальну організацію та територіальну структуру. Запропоновано розглядати систему охорони здоров'я як складну ієрархічно супідрядну систему, що включає такі компоненти, як установи медичного обслуговування, медичні кадри та систему управління охороною здоров'я.

Ключові слова: системи охорони здоров'я, соціальна інфраструктура, рівень життя населення, територіальна організація, розвиток.

Тарас Погребський. МЕСТО СИСТЕМЫ ЗДРАВООХРАНЕНИЯ В СОЦИАЛЬНОЙ ИНФРАСТРУКТУРЕ

В статье определено место системы здравоохранения в социальной инфраструктуре. Установлено, что эффективное функционирование всех отраслей социальной инфраструктуры способствует повышению уровня и качества жизни населения. Доказано, что система здравоохранения является составляющей социальной инфраструктуры в блоке отраслей сферы обслуживания, поэтому на нее распространяются все закономерности развития и размещения производительных сил на основе учения о территориальной организации и территориальной структуре. Предложено рассматривать систему здравоохранения как сложную иерархически соподчиненную систему, включающую такие компоненты, как учреждения медицинского обслуживания, медицинские кадры и систему управления здравоохранением.

Ключевые слова: система здравоохранения, социальная инфраструктура, уровень жизни населения, территориальная организация, развитие.

Introduction. Currently one of the most important areas of geographic research is the study of the social development of the region. In this case, an indicator of social development may be the level of social infrastructure, including enterprises of health care, education, housing and communal services, culture, community services and other non-material production industry, and public services.

Social infrastructure serves as an important condition that is necessary for life, while its effective operation contributes to the level and quality of life. One of the urgent problems of modern geographical science is the territorial organization of society, including the distribution of population and industries of productive and non-productive areas. In current economic conditions a promising line of research is to identify the characteristics of the territorial organization of one of the branches of non-productive sphere that is falling to the scope of public service or social infrastructure – health care system.

Health care system is one of the priority areas of research in social and economic geography. Medical care is under scrutiny by the public and government. Health care system ensures the preservation of public health. Health status and life expectancy of population depend on the availability of medical care, that is defined by the territorial organization of health care system. In the prevailing socio-economic conditions is important a consideration of territorial characteristics of health care within a given territory, identifying the key problems in the distribution of health care and medical care, as well as finding ways to improve the network of health care in the region.

Main material. Service sector is a set of economic branches whose products appears in the form of a purposeful activity or service. According to the authors (A. Alexeyev and S. Kovalev, 1991), the service sector includes a set of non-productive areas of the economy and a small but significant consumer of material production in each area. Service sector collectively should provide the whole complex of services that is necessary to meet vital human needs, according to the real possibilities of

society in this historical stage of development. This service defined as work that aimed directly at meeting the needs of a particular person – individual customer, client, customer of the service [2;3].

Some common interpretation is observed between the concepts of "service sector" and "infrastructure". The term "infrastructure" entered the scientific terminology in the 40's of XX century and originally meant a set of auxiliary structures that ensure successful interaction of different types of troops. Beginning from the 1950's the term "infrastructure" was explained under the rules of economic life.

From the 70's of XX century in research of infrastructure, along with industrial and economic aspects, more attention is paid to social aspects. In soviet literature infrastructure was defined as a set of industries, serving industrial and agricultural production (construction of roads, canals, ports, bridges, airports, warehouses, power industry, railway transport, communications, water supply and sewerage, general and vocational education, health, etc.).

Development of concepts of social infrastructure, part of which is the scope of health care associated with the growing need to create the necessary conditions for the life of workers employed in social production, and their families. In the 1960s-1970s. were observed boom of education and reduction of working hours, appeared a possibility of more rational organization of free time to fully meet the material and spiritual needs. In understanding the role of the social infrastructure were attended scientists and specialists of different areas – demographics, economics, economic geography, sociology, architecture, and so on [8].

For the first time in Soviet economic geography infrastructure is seen in the works of Probst as a set of conditions for the development of material production [9]. Thereafter, is observed a division of the complex concept of "infrastructure" into production and marketing, with the leading role assigned to the production infrastructure.

Growing attention from the scientific community to non-productive aspects of the people activity and their needs caused the enhancing of the role of social factors in research of infrastructure. The result was a mechanical combination of "social factors" and "household infrastructure" as a whole, which was seen as part of the non-production sphere and has been called "social infrastructure". In the scientific literature of the 1970s-1980s. was observed a division of infrastructure on product and social.

In the works of researchers of social infrastructure in the post-soviet era, along with traditional aspects within this area special attention was focused on the qualitative characteristics of social infrastructure. Increased the interest to the problems of improving the level and quality of life, spiritual values of the people and motivational aspects of behavior of the population due to meet the needs of social infrastructure [8].

As part of an integrated system of social infrastructure some of its elements are grouped into specific subsystems that perform certain functions. In particular, subsystem of health care system serves as the medical services. It includes institutions (hospitals, clinics, dis-

pensaries, health centers, rest homes, medical points, etc.), medical staff (doctors, nurses and medical personnel, staff of kitchen, dining room, laundry, etc.) and services of health care (diagnosis, screening, prevention, treatment, etc.). Social infrastructure is studied from the standpoint of meeting the needs of people with a set of elements that make up the social infrastructure needed for the organization of life.

By Aleksandr Alekseyev term "service sector" and "social infrastructure" are treated as synonyms, paying more attention to that set of institutions and enterprises in the service of maintaining such as set of elements and the social infrastructure of society, while noting that the concept of "social infrastructure" some researchers consider a wider [2].

At the same time Alexander Merkulov said that the concept of "social infrastructure" has a deeper meaning. Social infrastructure includes elements of financial sphere that are involved in ensuring living conditions and human activities, including the sphere of production. In addition, the social infrastructure may include items such as institutions of science, arts, management, not directly related with public service [4].

An important role of the service sector (including health care) in the territorial organization of society. Territorial organization of society acts as interdependent combination and functioning of settlement, economy and environmental management, information systems and life support, administrative and territorial structure and management that was formed at some stage of socio-economic development [5].

Territorial organization of society includes components such as the distribution of population and industries of production and non-production sectors (including health care), natural resources, territorial division of labor, economic regionalization. The rational territorial organization of society must ensure the effectiveness of all local units and enhance the level and quality of life. The concept of "territorial organization of society" - the most extensive interdisciplinary concept in the field of regional, social, economic and other research, it is the location of production and social infrastructure, human settlement, the relationship in a territorial socio-economic system of society and spatial processes of reproduction and problems of management [7].

At the present level of geographical scientific research, territorial organization of society acts as the main object of study of social and economic geography. Territorial organization of society covering all spatial manifestations of social life. It stands as one of the most important categories and geographic areas of study. The main aspects of the territorial organization of society are the placement of objects, territorial differences, spatial relationship, territorial system, territorial complexes, territorial structure, spatial morphology, spatial processes and territorial management.

An integral component of the territorial organization of society is the territorial organization of the service sector, which acts as a distribution manager process service functions between settlements (service centers) and their interaction with each other, which is within the specified material, labor and financial resources, providing the most complete and effective needs of the popula-

tion for services due to their compliance with the natural, economic, demographic, transportation, and the nature of settlement within a given territory. The territorial organization of the service sector can be defined and as existing at a particular time in a particular area combining local service systems and structures [1;6].

Health care system, as a key component of the territorial organization of society is a geographically organized system of health care facilities, which are aimed at preserving and improving public health. The main objective of health care system is to provide highly effective treatment and preventive care, resulting of which is development of balanced territorial community of people and reproduction. In this regard, territorial organization of health services is objectively existing process of sustainable territorial functioning of health care system aimed at the treatment, rehabilitation and improvement of living conditions.

Health care system positioned as complex hierarchically subordinate system, which includes components such as health care institutions, medical personnel, health care management system [10].

The concept of territorial organization of health care is characterized by duality, representing a current state of the existing territorial health care systems (territorial organization of the phenomenon), also including the process operation and development (territorial organization of the process). The transformation of the territorial organization of health care is more important than a simple fixation of the existing territorial structure of health care that can be attributed to the need to predicting changes in the functioning of health care system for its modernization and rationalization of territorial organization of the network of health care, which involves improving their accessibility to the public.

Transformation in the territorial organization of health care service can be caused by changes in the health care system, and in changes in the nature of the availability of facilities for the public. Changes in health

care system are determined by the development of a network of institutions (their opening, closing, reorganization) changes in their interactions (and of subordination relations). Changes in the availability of medical care may be linked to the dynamics of demographic processes, migration, changing the nature of the settlement, the development of a road network, and more.

Balanced development of health care system is determined by its value in society. The stability of the system components to external influences, the ability to maintain a symbiotic relationship between the individual elements and at the same time continuing transformation of its territorial organization determine the necessity of balanced development of health services [9;11].

Conclusions. Health care system is part of social infrastructure in the block areas of the service sector, because it spread all patterns of development and distribution of productive forces on the basis of the doctrine of territorial organization and territorial structure. In summary, the social infrastructure can be seen as a set of sectors of the economy related to human reproduction and human resources to ensure the required quality and standard of living. Branches of social infrastructure should provide the optimal conditions of the vital function of population.

According to the current understanding of the problem, concerning the social sphere as an open dynamic system that operates through direct and feedback, great attention should be paid to the external conditions that affect on social relationships and processes occurring in it. Today, rapidly changing, these "external" conditions of operation. In a global perspective – a process of integration and disintegration, globalization impact that is quickly built up. The emergence of new diseases in any part of the world is a real danger for all regions and levels of health care, health system structure and its perfection to respond to the "new" term challenges remain acute problem for most countries.

Список використаних джерел:

1. Абрамов М.А. География сервиса (Сфера обслуживания) / М.А. Абрамов.– М.: Мысль, 1985. – 225 с.
2. Алексеев А.И. География сферы обслуживания: основные понятия и методы: учеб. пособие / А.И. Алексеев, С.А. Ковалев, А.А. Ткаченко. Твер. гос. ун-т. – Тверь: [б. и.], 1991. – 117 с.
3. Ковалёв С.А. География потребления и география обслуживания населения / С.А. Ковалёв // Вест. Моск. ун-та, сер. Геогр. – 1966. – № 2. – С. 3–10.
4. Меркулов А.А. Экономико-географическое исследование здравоохранения региона России (На примере Самарской области): дис. канд. геогр. наук: 25.00.24 / А.А. Меркулов. – Воронеж, 2006. – 206 с.
5. Немець К.А. Просторовий аналіз у суспільній географії: нові підходи, методи, моделі: [монографія] / К.А. Немець, Л.М. Немець / – Харків: ХНУ, 2013. – 225 с., 191.
6. Погребский Т.Г. Социально-географические аспекты исследования региональной системы охраны здоровья / Т.Г. Погребский // Теория и практика современной науки: материалы VIII Междунар. науч.-практ. конф., 26-27 декабря 2012 г., г Москва / В 3 т.: т. III / Науч.-инф. издт. центр «Институт стратегических исследований». – М.: Изд-во «Спецкнига», 2012. – С. 95-98.
7. Погребский Т.Г. Территориальные особенности сферы здравоохранения Волынской области / Т.Г. Погребский // Муниципальные образования в регионах России (регионоведческий анализ): материалы I Междунар. межвед. науч.-практ. конф., 15–16 ноября 2013 г., г. Воронеж / Науч. ред. Ю.В. Поросенков. – Воронеж: Воронежский государственный педагогический университет, 2014. – С. 244-247.
8. Погребський Т.Г. Місце системи охорони здоров'я в соціальній інфраструктурі / Т.Г. Погребський // Регіон-2015: суспільно-географічні аспекти: матеріали наук.-практ. конф. студентів, аспірантів та молодих науковців з міжнар. участю, 16-17 квітня 2015 р., м. Харків / Гол. ред. колегії Л.М. Немець. – Х.: ХНУ імені В.Н. Каразіна, 2015. – С. 20-23.

9. Тощенко Ж.Т. Социальная инфраструктура: сущность и пути развития / Ж.Т. Тощенко. – М.: Мысль, 1980. – 206 с.
10. Хакен Г. Синергетика / Герман Хакен; пер. с англ. В.И. Емельянова; под ред. Ю.Л. Климонтовича, С.М. Осовцы. – М.: Мир, 1980. – 404 с.
11. Хорев Б.С. Территориальная организация общества / Б.С. Хорев. – М.: Мысль, 1981. – 320 с.

References:

1. Abramov, M.A. (1985). Geografiya servisa (Sfera obsluzhivaniya). M.: Mysl, 225.
2. Alekseev, A.I., Kovalev, S.A., Tkachenko, A.A. (1991). Geografiya sfery obsluzhivaniya: osnovnye ponyatiya i metody: ucheb. posobie. Tver. gos. un-t, Tver, 117.
3. Kovaliov, S.A. (1966). Geografiya potrebleniya i geografiya obsluzhivaniya naseleniya. *Vest. Mosk. un-ta, ser. Geogr.*, 2, 3-10.
4. Merkulov, A.A. (2006). Ekonomiko-geograficheskoe issledovanie zdavookhraneniya regiona Rossii (Na primere Samarskoi oblasti): dis. kand. geogr. nauk: 25.00.24. Voronezh, 206.
5. Niemets, K.A., Niemets, L.M. (2013). Prostoroviy analiz u suspilniy geografii: novi pidkhody, metody, modeli: [monohrafiya]. Kharkiv: KhNU, 225.
6. Pogrebyskiy, T.G. (2012). Sotsialno-geograficheskie aspekty issledovaniya regionalnoi sistemy okhrany zdorovia. *Teoriya i praktika sovremennoi nauki: materialy VIII Mezhdunarodnoi nauchno-prakticheskoi konferentsii, 26-27 dekabrya 2012 g., Moskva / V 3 t.: t. III. Nauch.-inf. izdt. tsentr «Institut strategicheskikh issledovaniy»*. M.: Izd-vo «Speckniga», 95-98.
7. Pogrebyskiy, T.G. (2014). Territorialnye osobennosti sfery zdavookhraneniya Volynskoi oblasti. *Munitsipalnye obrazovaniya v regionakh Rossii (regionovedcheskiy analiz): materialy I Mezhdunarodnoi mezhdvostvennoi nauchno-prakticheskoi konferentsii, 15–16 noyabrya 2013 g., g. Voronezh. Nauch. red. Yu.V. Porosenkov. Voronezh: Voronezhskiy gosudarstvennyi pedagogicheskiy universitet*, 244-247.
8. Pogrebyskiy, T.G. (2015). Mistse systemy okhorony zdorovya v sotsialniy infrastrukturi. *Region-2015: suspilno-geografichni aspekty: materialy naukovopraktychnoi konferentsii studentiv, aspirantiv ta molodykh naukovtsiv z mizhnarodnoyu uchastyu, 16-17 kvitnya 2015 r., m. Kharkiv. Hol. red. kolegii L.M. Niemets. Kh.: KhNU imeni V.N. Karazina*, 20-23.
9. Toshchenko, Zh.T. (1980). Sotsialnaya infrastruktura: sushchnost i puti razvitiya. M.: Mysl, 206.
10. Haken, G. (1980). Sinergika. Per. s ang. V.I. Emelyanova; pod red. Yu.L. Klimontovicha, S.M. Osovtsy. M.: Mir, 404.
11. Khorev, B.S. (1981). Territorialnaya organizatsiya obshchestva. M.: Mysl, 320.

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