



FROM PEOPLE TO SYSTEMS:  
LEADERSHIP FOR A SUSTAINABLE FUTURE

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Mirela Mustata  
PhD, Researcher  
mmustata@cpss.ro

Identifying medical deserts in Europe: a new  
working definition from the AHEAD consortium

#EHMA2022

# AHEAD aims & expected outcomes

- Addresses the challenge of medical deserts and medical desertification in selected countries in Europe
- Search of viable solutions and tools to reduce health inequalities

## Our approach:

- Build knowledge
- Apply a participatory approach to public health policymaking
- Create Medical Deserts Diagnostics Tool to support policy makers to improve health services access



The countries were carefully selected to highlight different manifestations of medical deserts.

# Main actions

1. Literature review: set the research definition and indicators
2. Desk research: define the specific country context
3. Participatory action research: identify to what extent the representation of accessing medical services fit the literature on MD and to provide insights on how stakeholders at various levels relate to MD concept and associate it to their realities
4. Multi-stakeholder consensus-building dialogues: validate solutions
5. High-level policy dialogues at the national and EU level: build support for policy changes

# Literature review: method & results

- Method  
109 recent articles (10 years), published in top-level databases (PubMed, Cochrane Library) as well as relevant local literature

- Results  
'Medical desert' is used inconsistently - overlaps with other terms (i.e. rurality, isolated areas)

It is most often understood as:

1. Low density of health services in certain areas (or 'their neighbourhoods) as compared to population characteristics/needs.
2. Physical distance to the health services or facilities ( i.e. long travel time).

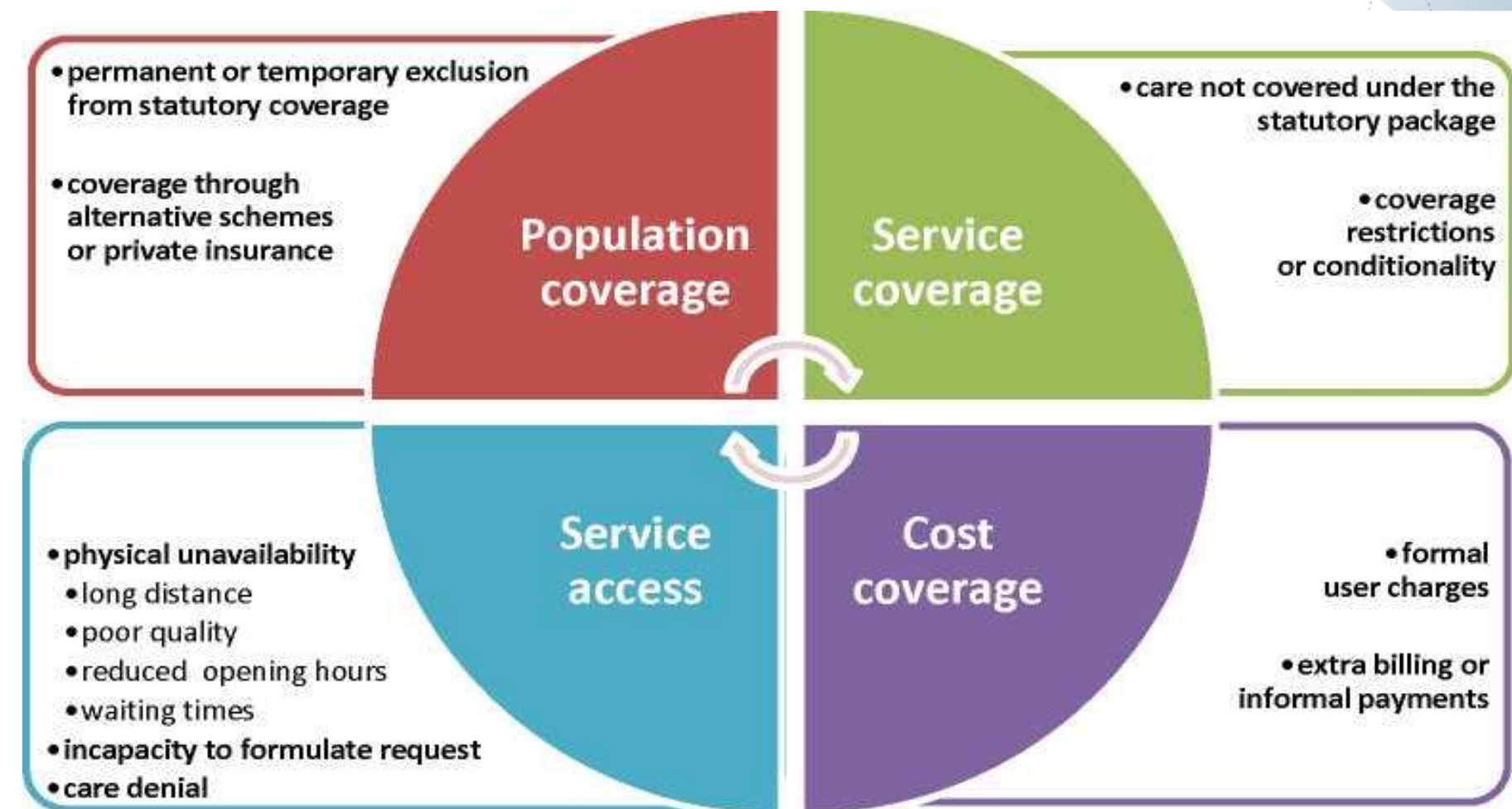


# Multidimensional definition of medical desert

“Medical deserts imply the inability of a given population to access health services; or the state of isolation in relation to receiving health services, based on quantitative and qualitative barriers, which are interrelated and dependent on each other, in varying degrees and modalities.

## Barriers:

- (1) physical access;
- (2) social barriers;
- (3) policy barriers.”



Conceptual framework developed by the European Commission (2021): *Improving Access to Healthcare Through More Powerful Measurement Tools*.

# Our ultimate impact at societal and EU level

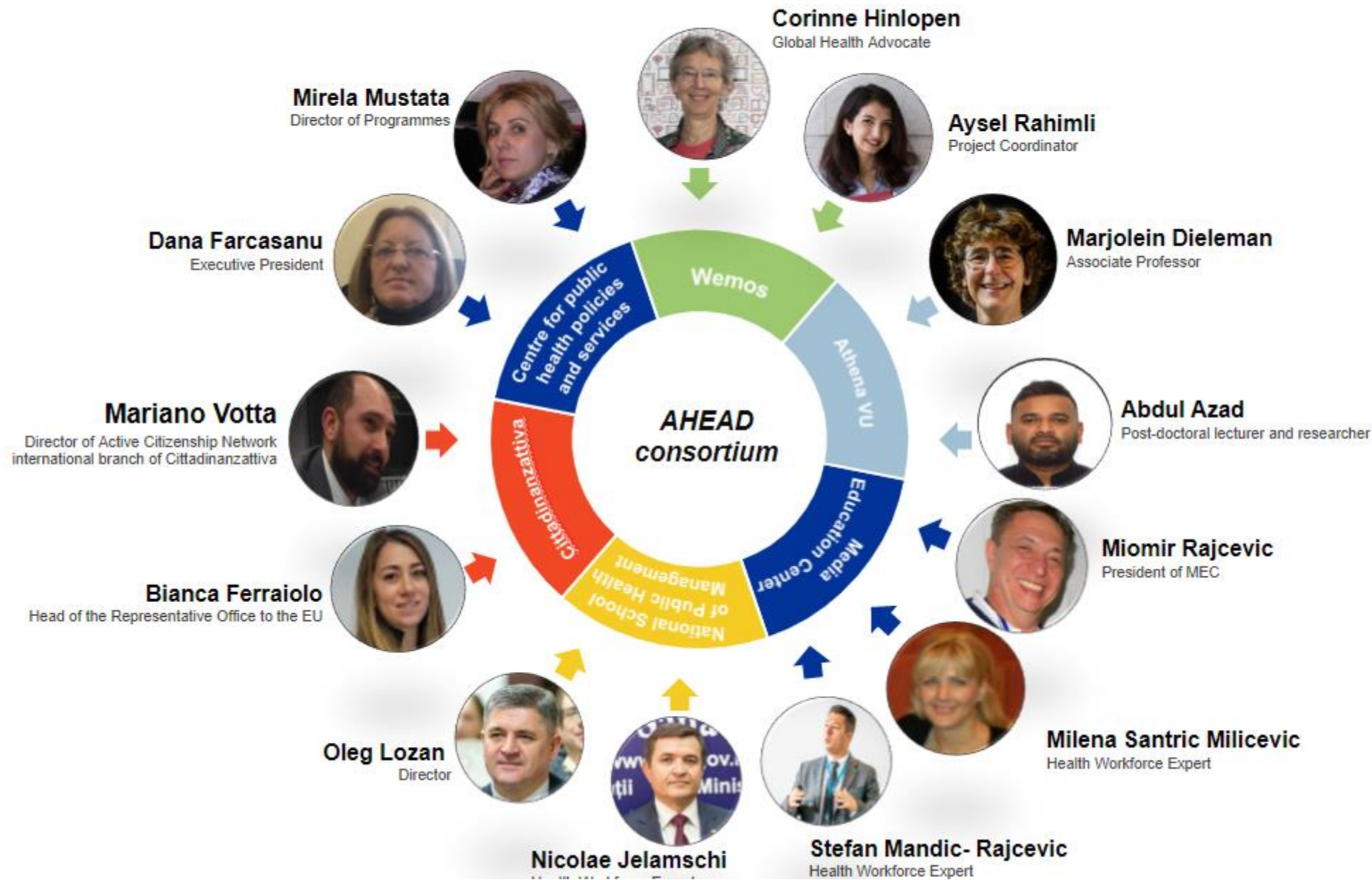


The definition will be validated and further developed through a series of research activities:

- Stakeholder interviews
- Surveys
- Consensus-building sessions

1. Better access to health services, especially for underserved populations
2. More equitable access to sufficient, skilled and motivated health workers
3. Starting with the countries involved in the project

# Meet the team



**AHEAD**



ACTION FOR HEALTH AND EQUITY  
ADDRESSING MEDICAL DESERTS

AHEAD

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