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## HEALTH SECURITY - COMPREHENSIVE CARE AND SHARED RESPONSIBILITY

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### ABSTRACT

Security and health are values in universal sense. They are things necessary to meet basic human needs. According to the author, health security, the subject of research in this paper, is incorrectly defined as a state of protection from dangers and threats to the public health. Health security should be understood as the ability of the health systems to maximize the detection and use of existing opportunities for solving problems related to health protection on personal, community, national, regional and global levels.

**Key words:** health, security, management, values, capabilities, policies, protection

The security challenges to modern societies reflect the complexity and interdependence of the global processes and require an urgent redefinition of the security policies and practices. An example is the global public health emergency that humanity has never experienced before. COVID-19 showed the shortcomings and weaknesses in the management of health care in the nation states and the mechanisms of the European Union to manage health threats. It reveals that humanity still does not have the potential to unite globally in the name of ensuring human security. It exacerbates the necessary to rethink the traditional security concepts, such as increasing the use of force and resources to neutralize dangers and threats or minimize risks. It outlines the importance of the hitherto neglected humanitarian aspects of security in theory and practice, the need to reach a consensus on the importance of „health security" and to rethink the impact on public relations in their incapacity.

The protection of human health is a multiple-aspect problem that is not new to humanity, but has recently become the subject of a widespread debate, especially in the context of the new concept of 'health security'. The numerous studies of its emergence and development highlight the significant impact of the United Nations Development Program (UNDP) Report - The New Dimension of Human Security, published in 1994. On a global level, it raises the question for the need of a new approach to the security policies and practices of the nation states. The report outlines the sole legitimate goal of good governance, such as caring for human life. It is about achieving the humanitarian goal - prosperity that can be attained by ensuring free and unimpeded access to development resources. Human security, according to the authors of the paper, is a universal concern for people, which for the first time links not only economic, political and environmental issues, but also human health problems, such as security issues. In this way, health security finds its natural place in the outlined key elements of human security. The subsequent development of the concept of "health security" is reflected in a number of UN documents, which outline the fundamental

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principles of the policy for its implementation - cooperation, dialogue, mutual support, transparency and accountability. There is a need to adopt a new proactive management approach to achieve not only "freedom from fear", but also "freedom from need" and empowerment of man by developing the ability to adapt to the dynamics of the environment. However, for the effective institutionalization of this concept, a necessary condition is the insight into its essence and the understanding of its practical significance and impact on the policies of the states. (1)

In this regard, the study aims to broaden and enrich the understanding of the essence of health security. The material is part of a broader study and is kind of a plan for the implementation of further research ideas. The author is aware of some formal and conceptual shortcomings as well as the lack of completeness of ideas and bibliographic references, wherefore comments and suggestions are welcome. The results that are expected to be achieved are aimed at increasing, on the one hand, the competence of health workers for the challenges to health security, which requires the development of skills to ensure high health status of each person and the population as a whole. On the other hand, the aim is to draw attention to the need to implement policies on a state level in order to develop sustainability of the health systems in accordance with the expanded understanding of the essence of health security. To achieve this goal, both a review of published materials and a retrospective analysis of the available data was made. The initial results will be commented in the context of the Bulgarian reality.

In the traditional scope of understanding health security, the emphasis is on the security in the context of the concepts of national, regional and international security, on account of human security and care for people, their health and well-being. The 1994 UNDP report reaffirms this finding and argues that for too long security has been interpreted narrowly as security in the territory from external aggression or as protection of the national foreign policy interests. Similarly, health security has long been defined and used to justify policies and practices, especially in the narrow aspects of the state-centric approach. The efforts are focused on addressing the national

security challenges related to public health and especially emergencies that have the potential to harm the economic, political and social stability of the country. As a result, the policy and practice have been focused on protecting security from external threats, especially infectious diseases and bioterrorism, and health security is most often defined as a state of protection from dangers and threats to public health. A humane idea, in the center of which man is placed, has once again become an instrument for realization of foreign policy interests. (1, 2)

Such a restriction on certain security risks associated only with highly communicable diseases and bioterrorism ignores other significant health threats that have the potential to have a future negative impact on security - human, national and international. It should be noted as a positive development of the concept that the range of issues addressed in the context of health security has been expanded and a number of documents of international organizations identify new risk factors with a potential impact on health security such as violence, conflicts, humanitarian emergencies, food insecurity, poverty, etc. Attention is also being paid to the antimicrobial resistance, which is emerging as a global threat. These are a number of new challenges that will face the security of the state, and gradually humanity, as a result of the deteriorating health on individual level as a consequence of unhealthy living conditions, behavior, poor health care and poor management of health resources. Therefore, a question arises: is the established policy approach to health management based on fear for security and protection only from exceptional threats to public health a successful formula for achieving health security? Isn't it time to displace the decades-old security paradigm that places the state as a major security target? Isn't it time to change the thinking about security and to transform the "security from" model, which requires more and more resources to limit and repair damages and sanctions, to a positive aspect such as "security to" and to start investing resources in achieving human security by ensuring the security of human rights and expanding the opportunities for human development? In the same direction, the authors of the 2003 report "Human Security Now" of the UN Commission on Human Security outline the

vision of human security as a foundation of the national security. (3)

The natural human rights are essential needs and satisfying them actually means recognizing the right of the human beings to be human. Health is a fundamental human right, a key component of the minimum dignified life. Health is about well-being as a standard of living and as a quality of life, and security means ensuring this minimum threshold. The World Health Organization defines health as "a state of harmonious physical, mental and social well-being and not merely the absence of health or disability." (4) The absence of disease is therefore part of health, but health is more than the absence of disease, because the deteriorating health, in the context of the WHO definition, is a cause for insecurity. Numerous dangers, risks and threats stemming from uneven economic development, diseases related to poverty and poor environmental factors, degenerative and chronic diseases, emerging epidemiological threats, mental health problems affect the vulnerability of the individual and endanger their health. Security challenges can, therefore, be caused by a variety of deteriorating health conditions, and this change should be reflected in the approaches which address them. It is also important to say that the experience of danger or threat to life and health is subjective. It depends on the type of danger or threat as well as on the abilities and resources of the individual to cope, on the environmental conditions, the availability of support and the opportunities of society, the public attitude to cooperation and the quality of government. All this is directly dependent on the ability of the state to provide security to its citizens. The most direct way to achieve this goal is by integrating the security policies into all other sectoral policies. By security policy the author understands the management of the social processes in the direction of creating the necessary conditions and prerequisites in order to guarantee the human rights, thereby increasing their security.

The above is part of the author's argument that the foundation of health security should not be the traditional and limited interpretation of the relationship between health and safety, but the state of the relationship between the normatively

proclaimed right to health and ensuring the security of the right to health, health as a function of good governance of the healthcare system. A similar definition is given by V. Borisov: "Public health security is a system of norms, institutions, activities and relations aimed at the maximum possible equality in the chances of citizens to ensure their health, their access to high quality health services, respectively." (5)

An approach based on the right to health and the principles of fairness, efficiency and accessibility, as well as the quality of goods and services, is valuable for improving health security, especially with regards to the primary health care and to strengthening the health systems. The primary health care is considered one of the safest paths to health security. This is a qualitatively new health policy that invests primarily in health care, at the expense of the treatment of disease states. The health security policy in its broadest sense is integrated into all other policies in order to achieve a better quality of life and well-being of the individual and the society as a whole. (6)

In our country, the implementation of the concept of health security has neither a tradition nor a practical dimension. In the guiding documents - strategies and concepts of the Council of Ministers and, in particular, of the Ministry of Health, it is sporadically applied without giving a definition or outlining the way to achieve it. The draft of the last strategy uses health security only in the context of the functions of controlling communicable diseases. Since the start of the health reform in our country, three national health strategies with a time scope of 2001-2010, 2008-2013, 2014-2020 had been developed and adopted. Practically, the first two strategies outline the way to transform healthcare in the context of the political changes in our country, however, due to the lack of political stability and consensus, their implementation was assessed as unsatisfactory and led to partial and chaotic changes in the system, a health care chaos. The vision in the third strategy is outlined as: "*In 2020, Bulgaria should be a country that guarantees to its citizens health and well-being, high quality of life and reduction of health inequalities through a comprehensive, fair,*

*sustainable and high-quality health system."* (7) *The strategic priorities are defined* - investing in health at all stages of human life and expanding the rights of the citizens; solving the current problems in the field of non-communicable diseases; building a human-oriented health system; increasing the role of the local municipalities and creating a supportive environment. This vision is in line with the new direction outlined above for transforming the understanding of the expanded concept of health security. However, the assessment of the implementation of these priorities can be highlighted by the shocking data from the analysis of the demographic processes in our country over the past decade, the data on the state of health in our country and the assessment of the quality of the health services in the latest publicly available on project level National Health Strategy of the Republic of Bulgaria 2021-2030. The Republic of Bulgaria remains the country with the highest standardized coefficients of mortality (1 631% LLC) among the EU countries (998.1% LLC), with main causes by circulatory diseases and neoplasms. The infant mortality (5.6%) is permanently higher than the EU average (3.7%). The hospitalizations are steadily increasing due to the leading diseases of the circulatory, respiratory and digestive systems. At the end of December 2021, our country ranked first among the EU countries and second in the world in terms of mortality from COVID-19. (8) The document National Health Strategy of the Republic of Bulgaria 2021-2030 summarizes the challenges to the system:

„•Increasing the public expenditures for health care without achieving the desired medical results and patient satisfaction with a healing effect;  
 •Lack of a unified information system for tracking and control of the activities and expenditures;  
 •Lack of a correlation between the growing costs for outpatient care and the hospitalization trends;  
 •Unbalanced system of expenditures in favor of those for medicines compared to those related to the prevention and prophylaxis;  
 •Direct payments by the patients that are the highest in the EU, with unregulated payments;  
 •Lack of interaction between the responsibilities of the physicians in the outpatient and inpatient systems;

- Imperfect system of negotiating prices and volumes of activities with representatives of the professional organizations;
- Lack of connection between the mechanisms of financing the medical activities and the criteria and standards for quality and effectiveness of patient treatment;
- Dissatisfaction of the population with the quality of the provided services and the high and unregulated amount of the additional payments;
- Lack of coherence and synchronicity in the normative documents and in the actions of the institutions involved in the sector;
- Uneven allocation of the medical specialists on the territory of the country, territorial imbalances in the distribution of the resources and medical specialists;
- Lack of compliance between the medical standards, accreditation and permits for operation of the medical institutions;
- Conclusion of contracts between the National Health Insurance Fund and the medical establishments "on the basis of a historical budget" without control over the fulfillment of the criteria and requirements on the part of the establishments.“ (8)

I believe that it is not necessary to draw conclusions for ensuring the security of the right to health. Our national health system produces insecurity. Moreover, the introduction of the project states: “health **should be** a basic individual, public and institutional value - one of the main components of the national security, hence - universal care and shared responsibility. “ The future tense use of 'wishful thinking' in the definition of health as a value means either lack of grammatical competence of the authors or, lack of normative competence, which is essential for ensuring the security of any human right. The lack of vision for the nature of the health security on state level, more precisely only its partial inclusion as a goal solely in the narrow conceptual sense as protection against communicable diseases, is the reason for serious reflection in the future. Due to the lack of efforts on the part of the public authorities in this direction, the academic community has started a discussion on the health security and for more than a decade there has been an increased activity of publications and research in this area. The

research by specialists in the field of public health, social medicine and medical law prevails. The lack of significant research by security specialists in the field of health security leads to the conclusion that in our country the traditional approach of close understanding of the security only in the context of the national and international security, and the policy aimed at ensuring the state security as a subject of security and protection from external threats, respectively, is still rooted in the governance of the country. The finding is also a call to the scientific thought to make efforts through the scientific expertise of security professionals to systematize the knowledge about the security of the right to health and to draw the attention of the public authorities to the need of a broad approach to the health security. The state of absence of health hazards or the maintenance of a resource for prevention and neutralization of the consequences, if they occur, is a state of safety, which in its absolute form is unattainable. Security is in the realm of the subjective and is manifested in "the ability to maximize the discovery and use of real opportunities, turning them into real results, in reality." (9) A conclusion can, therefore, be drawn about the irrelevance and absurdity of the protected understanding of health security. It should be understood as the ability of the state to protect everyone and the society as a whole from the factors that negatively affect health, to create a legal order that ensures the greatest possible equality in the chances of the citizens to access high quality health services. According to Abraham Maslow, a good society is psychologically healthy, and mental health is achievable only in an environment which freely offers each individual a wide range of

opportunities for development and realization of abilities. It is about ensuring the security of natural human rights, as is health.

#### REFERENCES

1. Simon Rushton & Jeremy Youde eds., Handbook on Global Health Security, Routledge, 2015
2. Chiuq Ya-Wen, Yi-Hao Weng, Yi-Yuan Su, Ching-Yi Huang, Ya-Chen Chang and Ken N Kuo, The essence of international health security, *Asia Pac J Clin Nutr*, 18(4):679-683, 2009
3. Commission on Human Security: Human Security Now, New York, 2003
4. Preamble to the Constitution of the World Health Organization" as adopted by the International Health Conference, 1946
5. Borisov, V., Health Management with Basics of Health Policy, Sofia, 2003
6. Stoycheva, M., Health and Quality of Life – Modern Dimensions, Priorities and Trends in the Health Policy of the Republic of Bulgaria under the Conditions of the European Integration, <https://essuir.sumdu.edu.ua/bitstream-download/123456789/28500/1/integration.pdf>, last access 02.02.2022
7. National Health Strategy, 2020, Official Gazette, No.101 of 22 December 2015
8. Project of the National Health Strategy 2030, <https://www.strategy.bg/PublicConsultations/View.aspx?lang=bg-BG&Id=5755>, last access 02.02.2022
9. Hristov, P., Environmental Security, Varna, p.20-28, 2007