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## GENERATING CONFIDENCE IN THE HEALTHCARE SYSTEM THROUGH INFORMATION ACTIVITIES OF HEALTHCARE INSTITUTIONS

**Abstract.** *The modern snowballing development of informatization processes significantly impacts the healthcare sector, especially the doctor-patient relationship. It requires the analysis of the social, psychological, and moral aspects of the doctor-patient relationship in the information society to search for more effective models of medical communication, increase the trust in the healthcare system, and develop the mechanisms for resolving growing conflicts and contradictions in the doctor-patient relationship. Thus, this study aims to assess the healthcare of Ukraine to elaborate the recommendations for the administration of the healthcare institutions on conducting the relevant information activities to increase the trust level in the healthcare system. This study involved comparative, analytical, statistical, and questionnaire research methods to achieve the above goal. The research information base is the legal framework, relevant scientific treatises, scientific and practical conference materials, statistical reference books, and Internet resources. The quantitative research relies on a questionnaire survey of 203 inhabitants of the Sumy region conducted on social networks and public hospitals. The survey findings showed that most population does not trust the healthcare system of Ukraine and assesses the state of medicine as satisfactory. At the same time, the information policy in Ukraine requires improvements, while employees of healthcare institutions should be more engaged in innovative development. The survey results confirmed the low communication between doctors and patients. Therefore, this study recommends strengthening the relationships between doctors and patients and increasing the information literacy of medical professionals. The obtained results have practical value. They could be helpful to the healthcare institutions' administration in conducting information activities concerning improving the patients' attitude toward the healthcare system and state healthcare institutions; raising the information literacy among citizens and medical workers; ensuring a responsible attitude of the people toward their health; paying sufficient attention to disease prevention under the family doctor's recommendations.*

**Keywords:** healthcare reformation, healthcare system, informatization, trust, patient-doctor relationships.

**Introduction.** Nowadays, the social development peculiarity consists in enhancing the knowledge and information roles in society, the intensive promotion of information technologies, and the formation of new qualitative forms of information interaction between people. Besides, the informatization processes significantly impact the healthcare sector, including the doctor-patient relationship. To search for more effective models of medical communication and mechanisms for resolving growing conflicts and contradictions in communication requires the study of the social, psychological, and moral aspects of the

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doctor-patient relationship in the information society.

Social relations between doctor and patient rest on the practical mutual trust. The better the communication between them, the better the result. It positively affects the patient's satisfaction with the quality of care provided. In turn, it increases the reputation and loyalty to the medical institution.

According to the «Health Index. Ukraine», public distrust of doctors grew significantly in 2019 (Health Index, 2019). The outstanding feature was the refusal of medical care (17.5%), which remained unchanged in 2017 (11.2%) and 2018 (10.0%). The level of satisfaction with hospital care was 52%. Noteworthy here, there are significant differences between Ukrainian regions, varying from 23 to 73%. Therefore, the healthcare reform in Ukraine boosts the scholars' particular interest. These studies consider the indicators of the effectiveness of change.

It stands to specify that the current Ukrainian healthcare reform was launched in 2018. In turn, its implementation started in 2020. As of 2019, most respondents stated that they did not support the government's course of reform (42.1% do not support it at all, 25.0% rather do not support it), while 32.9% of respondents supported healthcare reformation (Kyiv, 2021).

The Ukrainian healthcare market is disorganized since Ukrainians do not trust public or private healthcare institutions. The above could be considered the first factor of distrust. 87% of Ukrainians choose a doctor based on the experience of acquaintances. It is believed that private healthcare facilities extort money from the patient, while public healthcare organizations convince the patient of no diseases. Besides, some patients consider public healthcare organizations to provide incompletely free health care (Liga.net, 2021).

On the other hand, the second factor of distrust is insufficient awareness of clients about the information of the public healthcare organizations, qualifications of specialists, ways and stages of seeking medical care, depending on the problems. Sometimes, the patients can not defend their rights because of the lack of information about the new rules and the specific list of medical services that they could receive under the Constitution of Ukraine. Ukrainians still do not understand the healthcare reformation features. Some of them aren't aware of the possibility of changing their family doctor at any time.

A non-transparent referral system and significant financial and organizational barriers hampered access to quality medical services (Us et al., 2020; Starchenko et al., 2021; Lyulyov et al., 2019; Pimonenko et al., 2021). The low level of trust in the health care system leads to self-medication or refusal of medical treatment. In turn, it affects the unsatisfactory general condition of the population (Liga.net, 2021).

The third factor of distrust is the unavailability of healthcare. Only 14% of Ukrainians believe that in 2018-2019 the quality of medical care provided by family doctors has improved. Patients do not follow the doctors' recommendations and do not believe in their recovery. Besides, they cannot buy the necessary drugs (Voronenko et al., 2014).

Therefore, it is relevant to study the reasons for patients' low level of trust in doctors of public healthcare institutions and the Ukrainian healthcare system as a whole.

**Literature Review.** The public health sector covers various areas, including health information and knowledge. Following the above, the parties exchange information and best practices and implement other joint activities, including the gradual integration of Ukraine into European healthcare networks (Public Health, 2021).

The electronic medical information system is an information and telecommunication system that automates the work of economic entities in healthcare to create, view, and exchange information electronically (Resolution, 2018). Due to the electronic healthcare system, the patients have access to information about the results of medical tests and services, medical cards, and other relevant medical information. The patients can submit or cancel the medical declaration and review its status, download and print the necessary documents, and perform other actions legislatively prescribed.

Systematization of scientific background indicates the necessity to consider the doctor's and patient's communication effectiveness (Coculova et al., 2020; Chygryn et al., 2021; Kadar and Reicher, 2020; Vasylieva et al., 2020). Konyk (2016) noted patients expect the primary healthcare center provides them with information about their rights systematically and transparently, inform them about the possibilities of the new healthcare system, and unveil its positive impact on their lives. Moreover, it should give them the option to provide feedback.

In turn, the information continuity of the primary care health center ensures the accumulation of information about a particular patient, both documented (in the outpatient card) and in the memory of the family doctor, as well as the ability to transmit and receive such information as needed (for example, when referring a patient for inpatient treatment, consultation or laboratory and diagnostic studies) (Ministry of health, 2021).

The scholars express concern about protecting the patients' data based on the above. Data security covers legal, administrative, organizational, technical, and other measures to ensure information protection and integrity and the necessary access procedure. It stands to note that the main directions of the Ukrainian state information policy (Amendments, 2011) are as follows:

- ensuring everyone with information access;
- equal opportunities to create, collect, receive, store, use, disseminate, and guarantee the protection of information;
- openness and transparency of the authorities' activities;
- designing information systems and information networks;
- constantly updating, enriching, and preserving national information resources;
- information security of Ukraine and promoting international cooperation in the information sphere and Ukraine's entry into the world information space.

According to the Law of Ukraine on «Protection of patients rights» as of 01.02.2020, medical information is information about the patient's data (health status, diagnosis, information obtained during the medical examination, relevant medical documents, etc.) (Law, 2020). Noteworthy here, the health care worker is obliged to provide the patient in an accessible form with information about his health, the purpose of the proposed medical examination and treatment, and forecast the possible development of the disease, including the risk to life and health. However, healthcare professionals have the right to provide incomplete information about the patient's health and limit their access to certain medical documents if the information about the patient's disease can worsen his health and impair treatment (Law, 2012).

Therefore, based on the above, trust plays a unique role in the relationship between doctor and patient. Trust is a particular state of inner psychological peace manifesting in the absence of external irritants and internal emotions. At the same time, the satisfaction of a patient's needs depends on several informational, physical, economic, and social factors.

Primary medical information is stored by various health professionals, primarily in paper form. It leads to administrative burdens on staff, significant time costs, low monitoring capacity, and a high probability of losing control and management. Besides, the medical staff has no access to the information outside the institution. In Ukraine, there are no effective mechanisms to collect quality information for effective action by health authorities and to prevent abuse in this area. The national healthcare information infrastructure is insufficiently developed. Moreover, the health workers have a low level of digital competence, while the state of computerization of health care facilities requires improvements (Order, 2020).

The search for more effective models of medical communication and mechanisms for resolving growing problems in the healthcare system requires an analysis of the social, psychological, and moral aspects of the doctor-patient relationship in the information society (Bilan et al., 2020; Chygryn and Pimonenko, 2014; Kubatko et al., 2021; Letunovska et al., 2020).

Nowadays, computer technologies and the Internet allow patients to gain full access to medical knowledge. Consumers of medical services increasingly use them for self-education in medicine, looking for alternative treatment options, checking the information received from the doctor, discussing the symptoms and methods of disease treatment in thematic forums, and leaving reviews about medical specialists, medicinal preparations, their efficiency and side effects. Moreover, the patients can receive online consultations with medical specialists in various fields of medicine. There is a formation of Internet communities that unite people with the same diseases. Therefore, there is a diminishment of the monopoly on knowledge in medical professions (Ahmed et al., 2020).

However, Aliyeva (2020) emphasized that doctors are pessimistic about the medical self-education of patients. Besides, it complicates the communication between them. Therefore, the medical community doesn't perceive the rise in the patients' medical awareness. The «ideal patient» image includes little medical knowledge and the patient's willingness to follow a doctor's appointment without discussion.

As mentioned above, online consultations have become a new form of communication in the information society. Vladzimirsky and Gorokhova (2005) noted that the main advantages of online consultations are the free-of-charge basis, asking clarifying questions, and maintaining a history of messages.

On the other hand, the amount of information that the doctor works with constantly increases. The medicine enriches with dozens of new diagnostic methods in the international registers, descriptions of new pathological conditions, symptoms, and syndromes, and registration of new medicines (drugs). Therefore, it puts a significant burden on medical professionals.

Thus, this study aims to elaborate the recommendations for the administration of the healthcare institutions on conducting the specific information activities to increase the trust level in the medical system.

**Methodology and research methods.** This work involved comparative, analytical, statistical, and questionnaire research methods to achieve the study aim. The information base of investigation is the analysis of previous scientific findings, the legal framework, scientific and practical conference materials, statistical reference books, and Internet resources. The quantitative research relies on a questionnaire survey on social networks and public hospitals.

The first stage of the quantitative research preparation was calculating the sample size. According to the Main Department of Statistics in the Sumy region, the permanent population of the Sumy region aged 16 and older on 1 January 2020 was 916578 people. Herewith, 412327 of them were men, and 504251 – women. The urban population was 631084 people, and the rural population – 285493.

To calculate the sample size, the following formula (1) was applied:

$$n = 1 / (\Delta^2 + 1/N), \tag{1}$$

N – total sample;  $\Delta$  – the maximum sampling error.

The maximum sampling error for the questionnaire survey is 7%. In turn, the questionnaire survey involved 203 respondents (Table 1). The sample size considering the maximum sampling error was 0,9545.

**Table 1. The sample size (No. of respondents)**

At the maximum sampling error of			Total sample
5%	7%	10%	916578
400	203	100	

Sources: developed by the authors.

The next step was to create a questionnaire, which consisted of three parts: general questions, detailed, and personal data. The designed questionnaire mainly addressed the assessment of trust level in the healthcare system and its state, identifying the reasons for choosing a state or private healthcare institution, detecting the criteria taken into account when choosing a family doctor, and the patient's communication channels with the doctor.

The questionnaire form was posted on the social networks Facebook and Telegram. Therefore, most citizens (153 people) passed the online survey, while 50 respondents were interviewed offline.

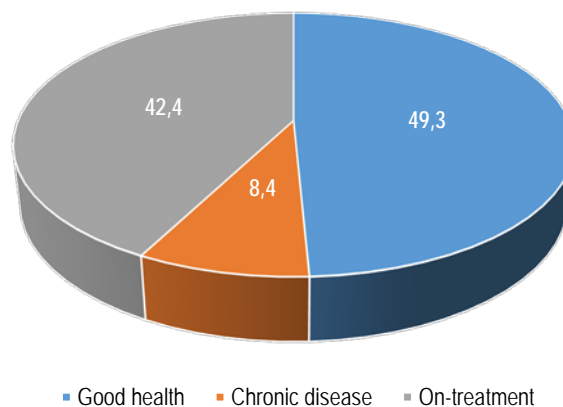
**Results.** In February 2021, a representative survey was conducted among the population of the Sumy region to determine the people's attitude toward public healthcare institutions. 203 respondents took part in this survey: 117 women (58%) and 86 men (42%) (Table 2). Herewith, 55 respondents (26%) were early working age (16-24 years); 56 (27%) of the primary working age (25-54 years); 67 (33%) of mature working age (55-64 years) and 25 (14%) of the elderly (65 and older).

**Table 2. The sample structure**

Sex	Age				Total
	16-24	25-54	55-64	65+	
Female	29	36	37	15	117
Male	26	20	30	10	86
<b>Total</b>	<b>55</b>	<b>56</b>	<b>67</b>	<b>25</b>	<b>203</b>

Sources: developed by the authors.

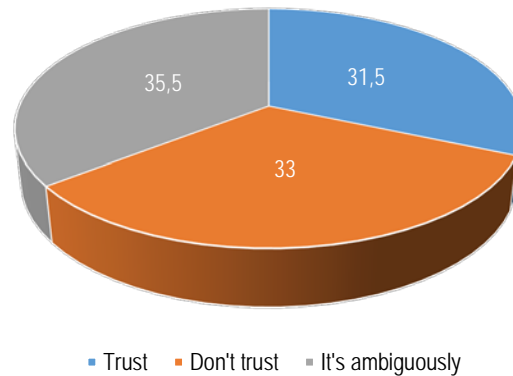
The 155 (76.4%) city residents, 21 (10.3%) village inhabitants, and 12 (13.2%) residents of the regional center took part in the questionnaire. The questionnaire included one question about health to understand how often respondents go to healthcare facilities. The obtained results showed that 100 (49.2%) respondents are healthy, 103 (50.8%) are sick, 86 (42.4%) have chronic diseases, and 17 (8.4%) are on-treatment (Fig. 1).



**Figure 1. State of health, %**

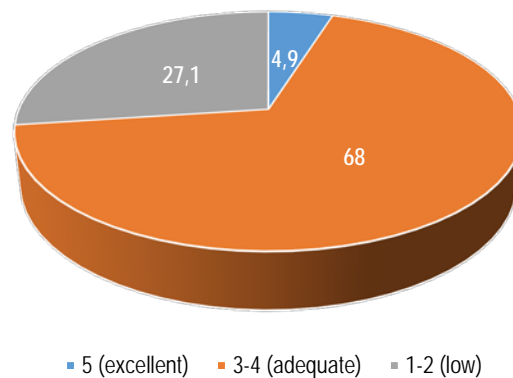
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Figure 2 shows that only 64 (31.5 %) respondents trusted the Ukrainian healthcare system, 67 (33 %) didn't trust, and 72 (35.5 %) were neutral.



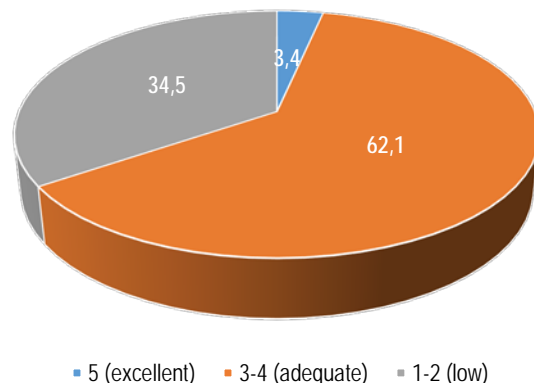
**Figure 2. The attitude to the Ukrainian healthcare system, %**  
Sources: developed by the authors.

Furthermore, this study assessed the trust level of the Ukrainian healthcare system on a 1-5 scale. The findings showed (Fig.3) that 55 (27.1%) respondents assess the Ukrainian healthcare system as low (1-2 points), 138 (68 %) – as adequate (3-4 points), and 10 (4.9 %) – as excellent (5 points).



**Figure 3. The trust level in the Ukrainian healthcare system on a 1-5 scale, %**  
Sources: developed by the authors.

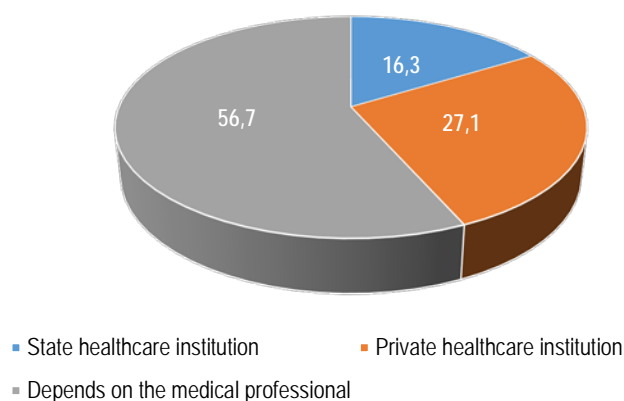
In the next stage, the respondents gave an appraisal of the healthcare state in the Sumy region. Figure 4 shows that 126 (62.1 %) residents consider the healthcare state of the place of their residence as adequate (3-4 points), 70 (34.5 %) – as low (1-2 points), and 7 (3.4 %) – as excellent (5 points).



**Figure 4. The state of healthcare in the Sumy region on a 1-5 scale, %**

Sources: developed by the authors.

Figure 5 demonstrates that 55 (27.1%) respondents sought specialized doctor's advice in the private healthcare institution, while 33 (16.3%) chose state healthcare institutions.



**Figure 5. The choice of healthcare institution, %**

Sources: developed by the authors.

The findings showed that 138 (68.1%) respondents chose the state healthcare institution for free consultations, while 56 (27.5%) – free treatment. In turn, 48 (23.8%) respondents believe that the medical specialists of the state healthcare institutions are competent, 29 (14.4%) of them indicated the importance of the specialists' attentiveness. 36 (17.6%) respondents consider the state healthcare institution to be clean, and 28 (13.8%) are sure of the confidentiality of medical and personal information. 15 (7.5%) respondents noted the preference of the state healthcare institution is a lack of queues, 10 (5%) of them believe that they have all the necessary medical equipment. Only 9 (4.4%) respondents rated the atmosphere in the private healthcare institutions as comfortable. Besides, the rest choose the state healthcare institutions to obtain a certificate or because private healthcare institutions are too expensive (Figure 6).

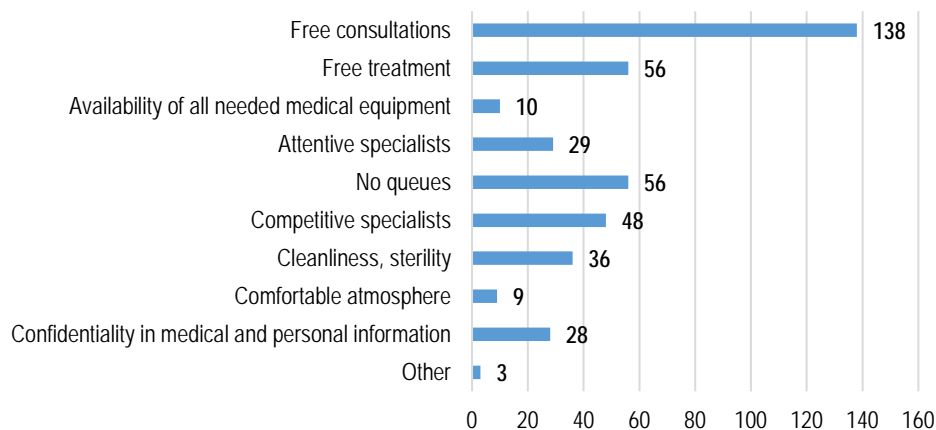


Figure 6. The reasons for appealing to the state healthcare institution, respondents  
Sources: developed by the authors.

The obtained results showed that most respondents prefer private healthcare institutions. Thus, 114 (56.1%) people in the survey believe that these institutions have good quality medical equipment. 89 (43.9%) consider medical specialists to be attentive, and 76 (37.4%) – competent. 83 (40.9%) of respondents highlighted the absence of queues, 70 (34.5%) – the cleanliness of the institution, 58 (28.7%) – a comfortable atmosphere. In turn, 51 (25.1%) respondents are sure of medical and personal information confidentiality.

Moreover, 5 people noted that they apply to private institutions because of the need to pay for reasonable treatment in state medical institutions. Therefore, the above allows assuming the existence of corruption in state health institutions (Figure 7).

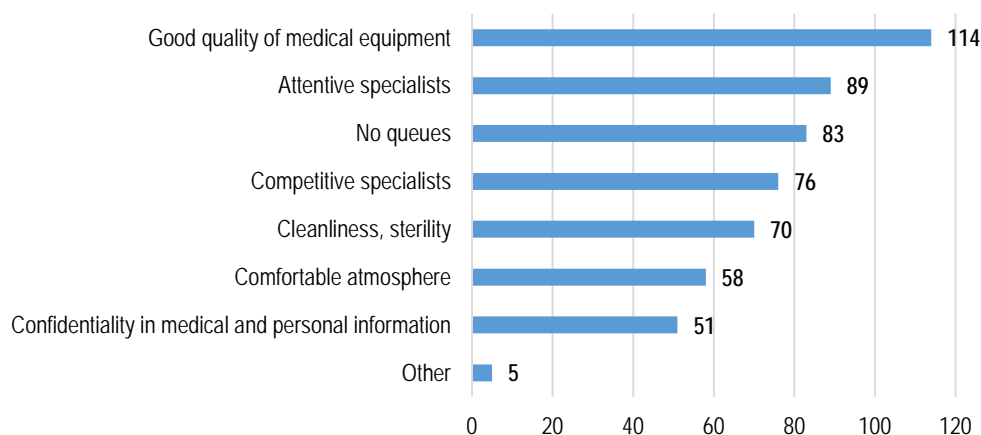
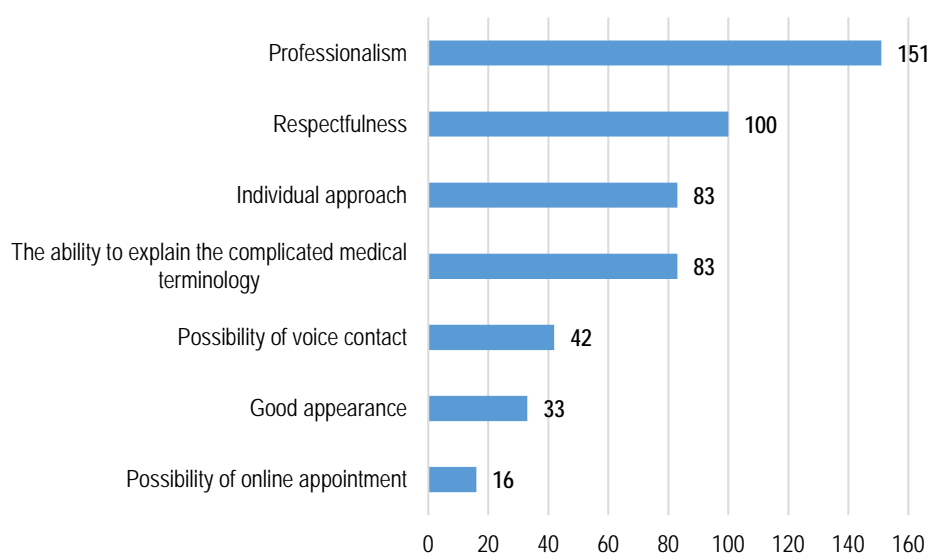


Figure 7. The reasons for appealing to the private healthcare institution, respondents  
Sources: developed by the authors.



Therefore, the survey results above explored that private medical institutions inspire more confidence than state-owned ones.

Figure 8 shows that 179 (88.3%) respondents considered professionalism to be the most critical criterion in choosing a doctor, while 119 (58.5%) – polite attitude, 98 (48.5%) – individual approach, and 98 (48.5%) – the ability to explain complicated medical terminology. Besides, 50 (24.6%) respondents highlighted the possibility of telephone communication is essential for them, and 19 (9.4%) – Internet communication.



**Figure 8. The criteria for choosing the family doctor, respondents**

Sources: developed by the authors.

In the frame of this study, some questions were devoted to the assessment of the primary healthcare reform. The findings showed that 183 (90.2%) respondents had already chosen their family doctor. However, 14 (6.9%) of them haven't signed the medical declarations, while 6 (2.9%) respondents plan to sign them. Figure 9 demonstrates that 117 (58%) respondents trust more in the primary healthcare reform, while 64 (31.6%) – the healthcare system of Ukraine.

There are different reasons for distrust of the family doctors. Thus, 23 (11.3%) respondents have bad experiences in medical treatment (mistaken diagnosis, undertreatment, ignoring calls, etc.). In turn, 5 (2.3%) complained about the rough treatment, 2 (1.1%) of them indicated that the doctor earned money on their treatment (the links with pharmacy), and 25 (12.1%) were discreet with anybody (Fig. 10).

The quality of communication with the doctor significantly impacts the patient's choice of the doctor. Figure 11 demonstrates that 98 (48.3%) respondents communicate with the doctor during the doctor's appointment; 72 (35.5%) – by telephone, and only 3 (1.5%) – via the Internet.

Moreover, it was found that the waiting time in queue for doctor's appointments decreased (Fig. 12). Thus, 40.4% of respondents noted they waited for 10-15 minutes in the queue, while 54 (26.6%) – less than 5 minutes. However, 40 (19.7%) people surveyed waited in the queue for approximately 20-30 minutes, while 13 (6.4%) – 30-40 minutes, and 14 (6.9%) – more than 40 minutes. Therefore, the above allows assuming the effectiveness of the healthcare reform.

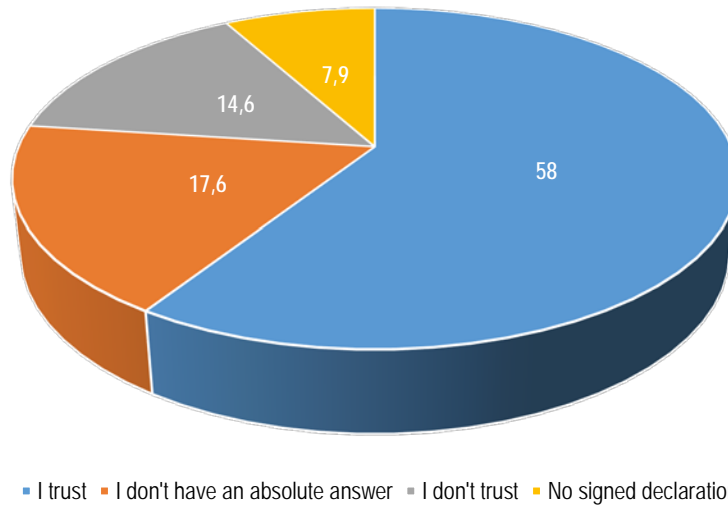


Figure 9. The attitude to the family doctor, %  
Sources: developed by the authors.

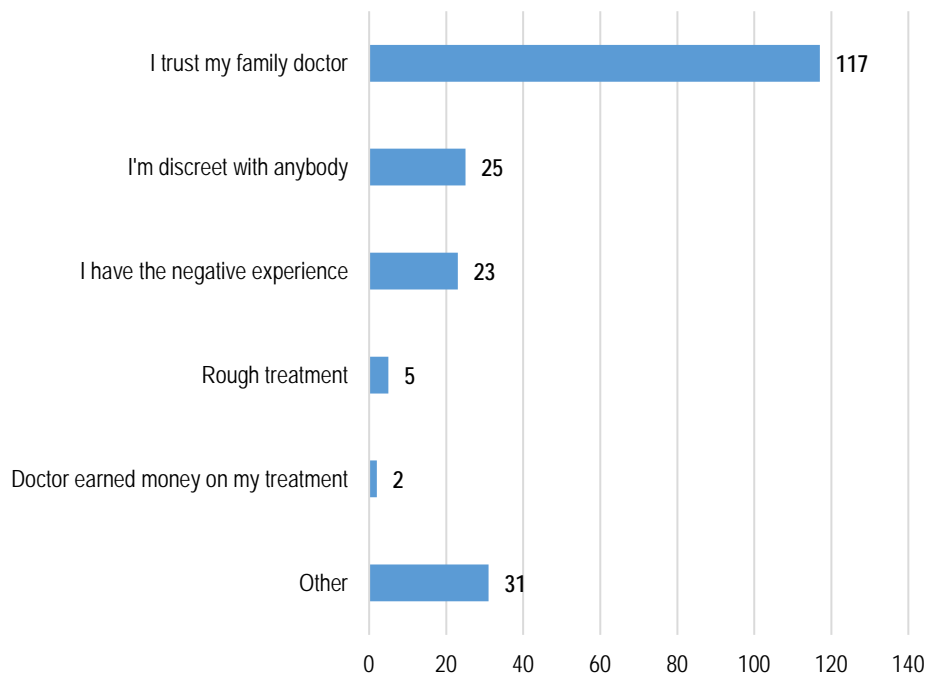


Figure 10. The reasons for distrust of the family doctor, respondents  
Sources: developed by the authors.

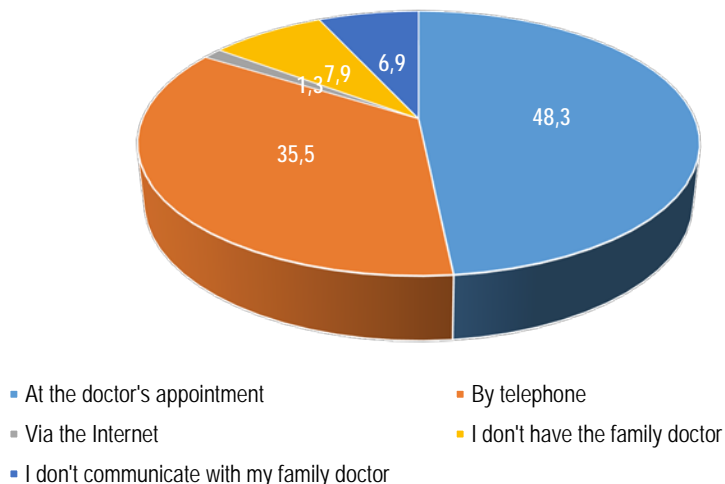


Figure 11. Communication channels, %

Sources: developed by the authors.

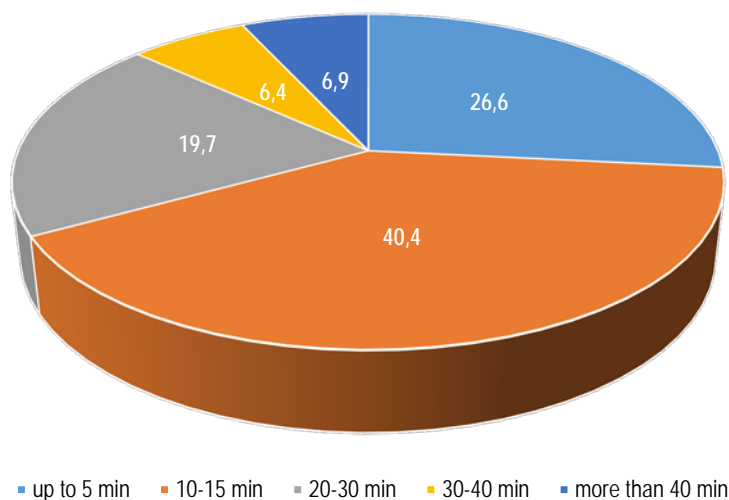


Figure 12. Waiting time for medical appointment, %

Sources: developed by the authors.

This study checked whether the doctors pay enough attention to all patients. The results showed that most respondents (159 or 78.4%) were satisfied.

It is essential to note that if people do not trust doctors, they turn to other sources of information. Figure 13 demonstrates that 150 (74.3%) patients follow the recommendations of their family doctor, 58 (28.7%) – another doctor, 42 (20.5%) – a pharmacologist, 25 (12.3%) – a friend, neighbor, acquaintance, 11 (5.3%) – Internet forums, and 1 (0.6%) – advertising or TV.

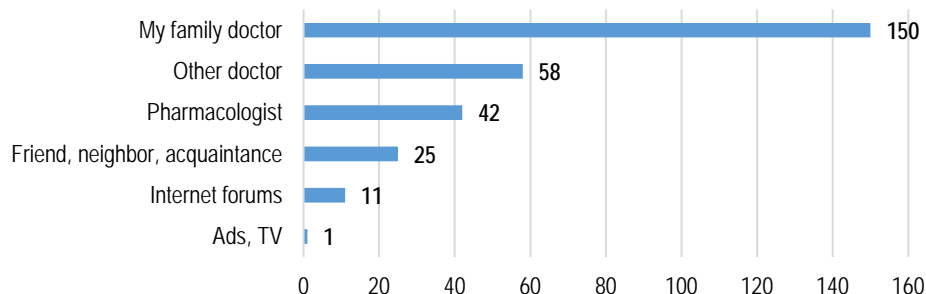


Figure 13. Recommendations for the use of preparations, respondents

Sources: developed by the authors.

**Conclusions.** The study results confirmed that most surveyed people living in the Sumy region (139 or 68.5%) do not trust the medical system of Ukraine as a whole. They consider the state of medicine as satisfactory. Besides, 27.1% prefer private institutions. The main criterion in choosing a doctor is professionalism (88.3%) and a polite attitude (58.5%). Equally important are the individual approach (48.5%) and the ability to explain complicated medical terminology (48.5%). Most respondents (79.3%) noted that the material support of the healthcare institution significantly affects their trust level in the medical staff.

90.2% of respondents have signed declarations with a family doctor. Herewith, only 58% of them trust their family doctor. On the other hand, the healthcare reformation significantly reduced the waiting time in the queue due to pre-registering (in the appendices or electronic queue).

Therefore, based on the above, it could be concluded that the level of trust in primary care has been progressing. However, there is a need to improve the communication between doctors and patients. Noteworthy here, most respondents noted the doctors could ignore their calls because of the lack of time. That is why 38.7% of respondents appeal to the medical recommendations by pharmacists 42 (20.5%), friends, neighbors, friends 25 (12.3%), Internet forums 11 (5.3%) or advertising, television (0.6%), except for doctors. However, these people often develop psychological tension in their relationship with doctors due to skepticism about the possibilities of medicine and reduced trust.

The study's findings showed that the main criteria for choosing a health care institution are the doctors' professionalism and authority. Besides, communication as an element of public relations is the best tool to gain the patient's confidence.

Unfortunately, the information policy development in Ukraine gets little attention. Healthcare institutions' employees are not interested in developing and keeping up with innovations. Noteworthy here, some patients still can't make an appointment or consult online because the doctor does not use social networks. Therefore, based on the obtained results, the following recommendations were elaborated to improve communication with patients, establish communication channels, and influence a positive attitude toward healthcare institutions.

Firstly, any medical specialist needs to build a personal reputation by demonstrating politeness and correctness during communication with patients, medical appointments, etc. Secondly, each family doctor should use the official website or social networks to inform potential patients about the possibility of signing a declaration, the list of medical services, the constant capacity building, and the new equipment with which they work.

According to the new healthcare reform, the salary of a family doctor depends on the number of signed declarations. Therefore, to engage more potential patients, the healthcare institutions' management should use the techniques of «personal marketing» and «organization marketing», such as:

- announcing the doctors' practice and providing an opportunity to sign the declaration;
- creating a working website of the organization and pages of medical workers on social networks;
- actively and regularly publishing relevant posts and all the news in medicine;
- conducting live broadcasts;
- holding marathons;
- disseminating the information about their services, etc.

The doctor should inspire respect from patients and be a leader to gain people's trust. The medical specialist should follow and support a healthy lifestyle and call on everyone to prevent diseases and vaccinations, talk about regular examinations, and demonstrate their knowledge and skills on social pages.

To increase the satisfaction of patients with the treatment process, it is also essential:

- to inform the patient about the proposed methods and new treatments, especially when using methods associated with risks to the health;
- to ensure the enforcement of the right;
- to predict the potential effectiveness of health services;
- to control the dynamics of the disease through further contact with the patient;
- to develop preventive measures for the prevention of pathological conditions;
- to explain the complicated medical terminology.

It stands to mention that the state medical and preventive treatment institution may significantly increase its own image and increase the trust level in the medical institution due to regular posts on social networks (YouTube, Facebook, Instagram, etc.) about new equipment, phones of duty doctors, statistics, explanations of new laws and orders in healthcare, sequence of actions in case a patient requests medical care depending on health, etc. Besides, the modern solution to attract people's attention is to set up an «information monitor», which is an LED screen of various sizes. It allows medical specialists to play videos, animation, dynamic or animated presentations, flash videos, interactive games, live broadcasts, etc., around the clock or set schedules.

**Author Contributions:** conceptualization, methodology, software, validation, formal analysis, investigation, resources, data curation, Yu. V., Ya. U., I. S., R. V.; writing-original draft preparation, I. S.; writing-review and editing, Ya. U. and R. V.; visualization, Ya. U. and I. S.; supervision, project administration, Yu. V.; funding acquisition, Ya. U.

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#### **Формування довіри до медичної системи через інформаційну діяльність медичних закладів**

Стрімкий розвиток інформатизації в Україні істотно впливає на сферу охорони здоров'я, зокрема, на взаємовідносини між лікарем та пацієнтом. Актуальним є дослідження соціальних, психологічних та моральних аспектів взаємовідносин між лікарем та пацієнтом в інформаційному суспільстві з метою пошуку ефективних моделей комунікації між ними, підвищення довіри суспільства до системи охорони здоров'я, розробки механізмів вирішення конфліктів та суперечок між лікарем та пацієнтом. У рамках даного дослідження авторами проаналізовано систему охорони здоров'я України з метою формування рекомендацій керівництву закладів охорони здоров'я щодо проведення відповідної інформаційної діяльності для підвищення рівня довіри до системи охорони здоров'я. Для досягнення поставленої мети у роботі застосовано порівняльні, аналітичні, статистичні та анкетні методи дослідження. Інформаційною базою дослідження є нормативно-правова база України, наукові напрацювання з означеної тематики, матеріали науково-практичних конференцій, статистичні бази даних, Інтернет-ресурси. Підґрунтям дослідження стали результати анкетування 203 жителів Сумської області, яке було проведено в соціальних мережах та державних лікарнях. Отримані результати засвідчили, що більшість респондентів не довіряє системі охорони здоров'я України та оцінює стан медицини як задовільний. Водночас інформаційна політика в Україні потребує вдосконалення, тоді як працівникам закладів охорони здоров'я необхідно приділяти більше уваги інноваційному розвитку. Результати анкетування підтвердили низький рівень комунікації між лікарями та пацієнтами. Таким чином, автори приходять до висновку щодо необхідності покращення стосунків між лікарями та пацієнтами, а також підвищення інформаційної грамотності медичних працівників. Результати дослідження мають практичну цінність та можуть бути корисними керівництву закладів охорони здоров'я при проведенні інформаційних заходів щодо покращення ставлення пацієнтів до системи охорони здоров'я та державних закладів охорони здоров'я; підвищення інформаційної грамотності громадян та медичних працівників; забезпечення відповідального ставлення населення до власного здоров'я та профілактики захворювань згідно з рекомендаціями сімейного лікаря.

**Ключові слова:** медична реформа, система охорони здоров'я, інформатизація, довіра, відносини між лікарем та пацієнтом.