



People engagement in health-care system transition in China

The introduction of the National Health Commission in China sent a strong signal about health-care system transition.¹ The report Deepening health reform in China proposed a strategic direction for the transition, from system fragmentation to people-centered integrated care.² In response to the national policy, medical consortia have been introduced to promote health-care integration.³ However, people-centeredness still does not receive enough attention.

People-centered care, in particular the notion of people as participants and not just beneficiaries of health-care services, is not commonly recognised by the general population in China because of traditional mindsets. In ancient China, doctors were regarded by patients as having mystical power.⁴ Patients obeyed doctors' orders and recommendations. Although in the era of market reforms, some patients lost trust and in some cases were violent towards physicians, the notion of patients as co-producers of health care has not emerged. The recent supply-side reforms of health-care systems in China might not achieve their goals without recognition of and attention to the importance of people as participants as opposed to simply recipients of health care.

People engagement is the foremost action in the WHO's global strategy on people-centered integrated care.⁵ However, challenges remain to engage people in China's health-care systems. First, the insufficient public capacity, in terms of health literacy, to participate in self-management and health-care decision making. Second, people-centered integrated care involves a shift in health professionals' attitudes and practice. Some doctors might not accept that their long-held authority will be challenged by the patients.

Third, deteriorating patient-physician trust creates barriers to co-producing health. Both sides need capacity and trust for moving towards people-centered care.

A comprehensive and system-wide approach to engage and empower people as participants in health-care systems is required and should be adopted by the national Government with roles of patients and physicians being well defined. China has previously achieved success in engaging with the population as participants in health production with the patriotic hygiene movement of the 1950s. Now is the time to similarly engage people as participants in transition of China's health-care systems.

We declare no competing interests.

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- 1 Lancet. Health-care system transition in China. *Lancet* 2018; **391**: 1332.
- 2 China Joint Study Partnership. Deepening health reform in China: building high-quality and value-based service delivery. 2016. <http://hdl.handle.net/10986/24720> (accessed March 18, 2018).
- 3 General Office of the State Council. Guiding of promoting the construction and development of medical consortia. 2017. No 32. http://www.gov.cn/zhengce/content/2017-04/26/content_5189071.htm (accessed March 18, 2019).
- 4 Cao J, Wei J. Evolution of the perception of the doctor's role in China. *Lancet* 2014; **384**: 742.
- 5 WHO. WHO global strategy on people-centred and integrated health service. Interim report. Geneva: World Health Organization, 2015. https://apps.who.int/iris/bitstream/handle/10665/155002/WHO_HIS_SDS_2015_6_eng.pdf;sequence=1 (accessed March 20, 2019).