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APPLICATION OF SWOT-ANALYSIS FOR EVALUATING THE PUBLIC ADMINISTRATION OF THE HEALTHCARE SYSTEM IN UKRAINE

Keywords: public administration, performance appraisal, SWOT analysis, health care system, strengths, weaknesses, medicine.

ABSTRACT: The health care system is an important vector of effective management in the current conditions of the Ukrainian health care system. The article deals with the analysis of the main factors influencing which is the development of effective interaction between public administration and the health care system of Ukraine. In the article we analyzed activity by a qualitative method of SWOT-analysis.

According to the results of SWOT analysis, the defining strengths and related opportunities should be focused on in implementation and development of mechanisms of public administration of The Ukrainian health care system. The weaknesses presented in the analysis reflect the current problems of the medical sector in Ukraine, in particular: insufficient number of highly qualified staff due to imperfection of the medical educa-

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tion system; insufficient level of institutional development and information secrecy, which leads to the impossibility of using modern information and communication technologies; insufficient infrastructure as a result of the low priority of the health sector in the system of public needs. During the years of Ukraine's independence, the infrastructure of an industry not only did not improve, but over time almost completely deteriorated. This applies to both medical institutions and ancillary institutions, sanatoriums, etc. A similar situation is observed with regard to insufficient quantity and outdated equipment for maintenance. The article outlines the factors that will affect their functioning and interaction in the future. In particular, the factors of external influence (scientific and technical, geographical, economic, social, public policy) and internal influence (infrastructural, economic, innovative, organizational) are highlighted.

This, in turn, allowed us to identify priority steps in planning management decisions to improve efficiency, using scientific methods.

The aim of the article is to study factors influencing the competitiveness of the Ukrainian health care system.

Material and methods include concepts and strategies for the development of any system, including health care, are usually based on the results of various types of analysis of baseline situations. Strategic planning processes require the active implementation and practical use of SWOT analysis and self-assessment procedures to identify strengths and diagnose problems, in order to improve its performance on the way to solving the tasks facing the health care system. Analytical research method.

INTRODUCTION

Public health, or the health of nation, is one of the main indicative factors of state formation and state security, it is a basic component of human capital and competitiveness of a country and is closely integrated with the economy, science and defense. The health of population is a guarantee of a stable foundation of a state, first of all, a favorable socio-moral atmosphere and trust in the state, and a doctor acts as a guarantor of its preservation, protection and strengthening.

Health care is an integral part of state-building, the social system and politics, and the national security system.

RESEARCH RESULTS

For a long time, Ukraine has been trying to build an economically efficient, socially protected, and politically stable society. Among these tasks, health care as an important component of the social sphere of the state occupies a significant place.

The state policy of all countries of the world, including Ukraine, in the field of health care, is aimed at improving the level of health, improving the quality of life and preserving the human potential of future generations and nation as a whole.

Thus, health of population is one of the determining factors in the development of any country's economy, an indicator of its well-being, effectiveness and efficiency of social reforms. Preserving and improving the health of the nation is one of the most important priorities of state regulation.

In particular, the basic conceptual provisions for the development, operation, management of health care and improving the quality of care are disclosed in the scientific works of scientists around the world (Mosialos, 2010; Thomson, 2010; Taylor, 1929; Mayn, 1945; Deming, 1953; Starr, 1982; Donabedian, 1985; Palmer, 1991; Read, 1993, etc.) (Tokareva, 2010).

Original and meaningful scientific publications on essence, tasks and technologies of standardization, the processes of standardization in health care are covered by such scientists as Yarosh N. P., V.M. Lehan, L.W. Kriachkova, M.I. Zayarsky, Akimov I and others. (Iarosh, 2016, Lekhan, 2018, Akymova, Maksymchuk, 2017).

At the same time, Ukrainian and foreign scientists were interested in the issue of qualitative changes in public administration. In particular, in the works of A. Melnyk (Melnyk, Obolenskyi, Vasina; in Melnyk, 2009), the need for large-scale innovative changes in the system of public administration with the use of innovative strategies to improve its efficiency is

emphasized. Recognized tool of strategic planning Yu. Sharov (*Entsyklopediia derzhavnoho upravlinnia*, 2011, p. 32, 33), Lekhan V.M (Lekhan, Slabkyi, Shevchenko, 2015), G. Slabky (Slabkyi, Hoida, Moiseienko, Tereshchenko, Dudina, 2016) consider SWOT-analysis as the most successful way of systematic analysis of factors of external and internal environment of an object of research, a convenient tool for diagnosing the initial conditions of strategy development, reform, development and improvement.

Therefore, in order to provide a more complete analysis and assessment of public administration of the health care system of Ukraine and the prospects for its further development, a SWOT-analysis was conducted.

Since independence, a country has been in the process of reform. This partly served as a basis for the neglect, imbalance and distortion of the entire vertical of the health care system.

But, for further development and construction of a stable platform, a reliable foundation of a country, it is necessary to determine relationships between the constituent elements of the mechanisms of joint interaction of all verticals of health care management in Ukraine.

Any transformation and reform of the health care system is primarily due to the high level of interconnectedness of other important systems and structures of public administration. The medical field is a multilevel functionally controlled system with many constituent elements that interact with each other and with the external environment. This system was created and used by society to implement a full range of social and medical measures aimed at protecting and promoting the health of everyone and the population as a whole. There are four types of hierarchies in the health care system: the hierarchy of public administration of the health care system at the territorial (local) level – rural area, city; at the regional level – the region, at the state level – the Ministry of Health; technological hierarchy (hierarchy of medical care): primary health care, secondary – specialized care, tertiary - highly specialized care; hierarchy of management staff in the organization. (Mosiichuk, 2016).

Given that health of population is affected not only by the quality and accessibility of health services, but also the effectiveness of socio-economic policy, it is clear the desire of developed countries to improve and maintain their competitiveness in the international arena by improving,

strengthening and maintaining the highest possible level of health of its population.

According to the European Regional Office of the World Health Organization (WHO), the current state of health of population of Ukraine is characterized by extremely high morbidity and mortality rates, low life expectancy, lack of access to adequate medical care.

Thus, the average life expectancy in Ukraine is 3 to 5 years lower than in the European region, and 9 years lower than in EU countries. According to the State Statistics Committee of Ukraine, only 15% of the total number of our citizens are over 65 years old. (World Health Statistics, 2013). This distribution of population by age groups with a tendency to “aging” is an additional and significant burden on economic development of a country, which is already characterized by unsatisfactory indicators. Compared to European countries, the mortality rate in Ukraine is almost 1.5 times higher (in 2015–14.9, in 2016 – 14.7 and in 2017 – 14.53 in 2018 –14.85 cases per 1000 population against 10.9 in 2015, 10.7 in 2016 in the member states of the European Union (Hlobalnaia observatoriya zdra-vookhraneniya, 2017) The structure of causes of death remains stable for the period 2015-2019, with mortality from cardiovascular diseases being one from the highest in the world and is 67.6-70% in the structure of total mortality, and mortality from cancer – 13.6%, the third place is occupied by external causes of death (data from the official bulletin of the Ministry of Health of Ukraine for 2016 and 2018 years) (Statystychnyi biuletyn, 2019) In fact, these two classes of diseases account for 81.2% of the annual losses of the country’s population.

The infant mortality rate is twice as high as in EU, which is considered to be one of the main indicators of the quality of the health care system. At the same time, the natural population growth rate in Ukraine remains negative, and the total birth rate is only 1.5 (2015), 1.46 (2016), 1.37 (2017) and 1.30 (2018) children per woman at a time when to achieve the level of simple reproduction of the population it should be 2.03 – 2.08.

It should be noted that the indicators of the state of health of the population not only reflect the effectiveness of the health care system itself, but also to some extent reflect intersectoral cooperation. To assess the performance of the health care system in general, which is aimed at main-

taining and improving the health of the population worldwide, one of the effective ways is to conduct a comparative characterization of countries on some defined and established indicators at the global level (Khudoba, 2014).

Therefore, the effectiveness of the public health management system depends on the ratio of complexity of the information managed and control subsystems (Fig. 1). The modern organizational structure of health care facilities functions without any sequence.

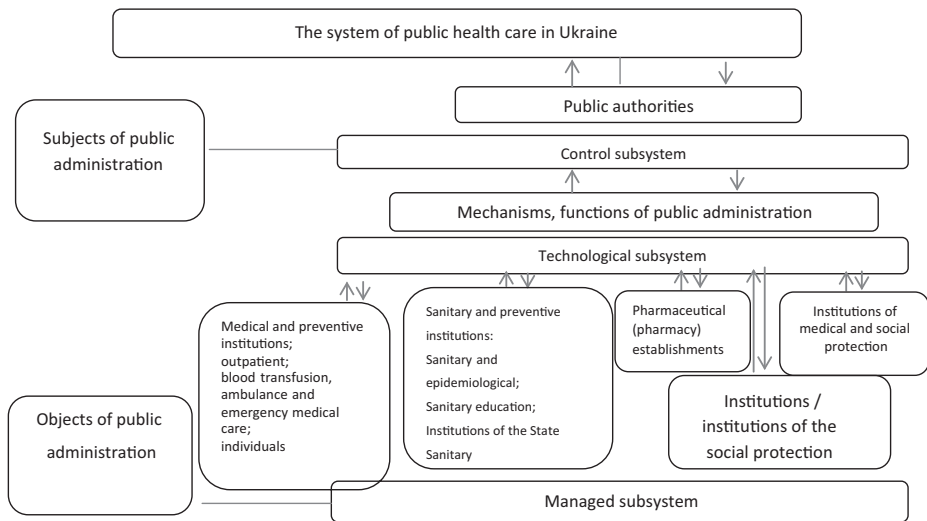


Fig. 1. The structure of the system of public health management in Ukraine

Source: Mosiichuk I.V., 2016; Shevtsov V.H., 2007; Nakaz MOZ vid 28.10.2002, No. 385, 2017.

In order to determine further prospects and strategic guidelines for the development of mechanisms of public administration of health care in Ukraine, using international standards, it is possible to implement the SWOT method, which consists in dividing factors and phenomena into four categories (abbreviation consists of the first letters of English words: Strengths and Weaknesses, Opportunities (Threats) and Threats associated with its implementation. Since the 1960-th. and to nowadays, SWOT analysis has been widely used in the process of strategic planning of the

financing mechanism and environmental assessment. The founders of the method, K. Andrews, Heinz Weihrich, Igor Ansoff, Henry Mintzberg, Terry Hill, and Adam J. Koch, proposed a matrix that simplified the comparison of external threats and opportunities with internal weaknesses and strengths of organization.

In the continuum of the most significant models, SWOT ranks first and is based on an exhaustive list of factors combined by a certain logic. This model reflects the efforts of researchers to cover the widest possible range of indicators, the current or future value of which depends on the strategic choice of the state, system, organization or enterprise or institution. (Strategor. Politique generale de l'entreprise. Dunod. Paris, 1997).

The SWOT methodology involves identifying a list of strengths and weaknesses, as well as threats and opportunities of the organization, taking into account the current situation. The SWOT matrix is built in two levels: a state of the internal environment and a state of the external environment. Each level is divided into two parts: the strength and weakness of the potential of the object under study, opportunities and threats identified in the external environment (Fig. 2). A. Thompson and A. Strickland have formed a focused set of characteristics, on the one hand, help to identify and assess their own strengths and weaknesses, on the other hand, to draw a conclusion that allows you to make a list of opportunities

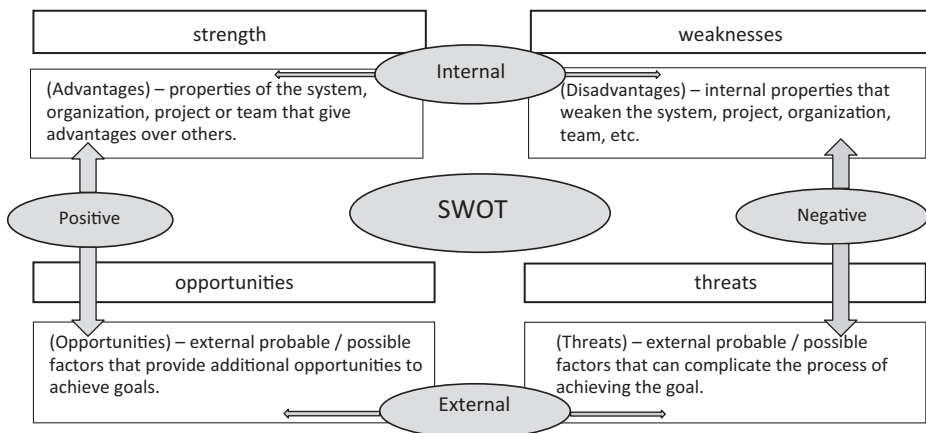


Fig. 2. The matrix SWOT

and threats to the state, system, organization or enterprise or institution emanating from the external environment. (Tompson, Strickland, 1998).

When conducting a SWOT analysis of health care facilities, the potential internal strengths of a facility (S) include data on: competence and professionalism of staff; adequacy of financial sources; application of the latest medical technologies; application of international standards and protocols; quality of medical services; opportunities for distance learning and counseling. Potential internal weaknesses (W) – lack of finances; weak material and technical base of institutions; lack of motivation to increase the professional activity of medical staff, a clear strategy; lack of medical care standards; high cost of paid services provided; outdated medical technologies; loss of depth and flexibility of management. Potential external facilities (O) include: serving additional patient groups; favorable economic, political and social environment; availability of resources, etc. Potential external threats (T) – adverse demographic changes; loss of confidence in doctors; increase in types of medical services; embitterment of competition; the emergence of foreign competitors with low-cost technologies; strengthening legislation, etc. (Hudkov, Poliakov, Kamenskyi, Chyhrynets, 2012).

We explored a field of health management internal and external environment through SWOT analysis. The first stage identifies the main strengths (Strengths) and weaknesses (Weaknesses) of its internal environment, as well as opportunities (Opportunities) and threats (Threats) of the external environment of public administration. On this basis, the table is created. 1. (Mozhaieva, 2011).

Table 1. SWOT-analysis of mechanisms of state management of the health care system of Ukraine

Internal	<ul style="list-style-type: none"> – state (centralized) nature of health care; – decentralization of powers from the central level to the level of local authorities, service providers, delegation of responsibility for service provision, strategic planning, financing based on the results of the creation of multidisciplinary structures and other functions; 	<ul style="list-style-type: none"> – imperfection of the regulatory framework; – high level of concentration of the medical services market; – lack of financial instruments for investment; – low level of competitiveness of national insurers;
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Internal	<ul style="list-style-type: none"> - granting managerial autonomy to service providers; - reforming the regulatory functions of the public health system (accreditation, quality control of medical services, etc.); - differentiation of medical care between health care institutions according to levels; - dynamically growing market; - implementation of the Telemedicine project; - developed network of territorial centers for social protection; - availability of a system of advanced training of medical personnel; - development of innovation processes in the industry; - development of processes of structural restructuring of the industry; - professionalism of staff; - modern technological medical equipment. 	<ul style="list-style-type: none"> - insufficient level of institutional development; - information secrecy; - lack of development strategy; - private providers are not involved in the provision of medical services within the guaranteed amount of free medical care; - developed system of logistics of medical institutions; - weak hospital management; - weak technical methodological base of knowledge and skills for teaching the principles of management of medical organizations and services; - insufficient level of integration of medical science and health care practice; - lack of norms and standards for regulating the use of pharmaceuticals and medical supplies in accordance with international practices; - lack of network planning and equipment; - low rating of domestic health care for consumers of services; - insufficient level of qualified staff of medical institutions; - unsatisfactory condition of the material and technical base of health care institutions;
	External	Strengths
Opportunities		Threats
<p>creation of a system for investing insurance reserves;</p> <p>maintaining public confidence in national institutions that provide and organize medical and social health services;</p> <p>receipt of state and regional funding for the implementation of health care development projects;</p>		<ul style="list-style-type: none"> - low solvency of the population; - political and economic instability; - high inflation; - rising prices for paid services; - negative changes in health care legislation; - aging of the infrastructure of medical institutions; - growth in the incidence of alcoholism, drug addiction, tuberculosis, AIDS;

External	<p>implementation of the national project „Sustainable Development Goals 2016-2030”;</p> <p>expected increase in demand for paid medical services of high quality;</p> <p>use of experience of other regions and developed countries.</p> <p>partial growth of household incomes;</p> <p>partially developed remote form of receiving quality medical consultations.</p>	<ul style="list-style-type: none"> – growth in the number of people living with HIV and the incidence of AIDS; – population aging; – environmental degradation; – possible reduction of the state budget for the development of the health care system; – continued migration of highly educated people – medical professionals, especially middle level, to other EU countries.
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The next step is to establish relationships between the constituent elements and build a matrix of SWOT – analysis of the mechanisms of public administration of The health care system in Ukraine (Table 2).

Table 2. Matrix of SWOT – mechanisms’ analysis of state management of The health care system in Ukraine

	<p>Features:</p> <ul style="list-style-type: none"> • creation of a system for investing insurance reserves; • maintaining public confidence in national institutions that provide and organize medical and social health services; • receipt of state and regional funding for the implementation of health care development projects; • implementation of the national project „Sustainable Development Goals 2016-2030”; • expected increase in demand for paid medical services of higher quality; • using the experience of other regions and developed countries; • partial growth of household incomes; 	<p>Threats:</p> <ul style="list-style-type: none"> • low solvency of the population; • political and economic instability; • high inflation; • rising prices for paid services; • negative changes in health care legislation; • aging of the infrastructure of medical institutions; • increase in the incidence of alcoholism, drug addiction, tuberculosis; • growth in the growth of HIV-infected people and the incidence of AIDS; • population aging; • deterioration of the environment; • possible reduction of state budget funds for the development of the health care system;
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	<ul style="list-style-type: none"> • partially developed remote form of receiving quality medical consultations. 	<ul style="list-style-type: none"> • continued migration of highly educated people • medical professionals, especially • middle level, to other EU countries.
<p>Strengths:</p> <ul style="list-style-type: none"> • state (centralized) nature of health care; • decentralization of powers from the central level to the level of local authorities, service providers, delegation of responsibility for service provision, strategic planning, financing based on the results of the creation of multidisciplinary structures and other functions; • granting managerial autonomy to service providers; • reforming the regulatory functions of the public health care system (accreditation, quality control of medical services, etc.); • implementation of international standards; • differentiation of medical care between health care institutions according to levels; • dynamically growing market; • implementation of the Telemedicine project; • developed network of territorial centers for social protection; • availability of a system of training of medical personnel; • development of innovation processes in the industry; • development of processes of structural restructuring of the industry; • professionalism of staff; • modern technological medical equipment. 	<p>Field „SO“:</p> <ul style="list-style-type: none"> • introduction of new financial instruments for placement of insurers' reserves; • implementation of health care development projects; • using the experience of other regions and developed countries; • application of international standards in the organization and management of the health care system; • strengthening the regulatory functions of the public health system (accreditation, quality control of medical services, etc.); • formation of a three-tier system of medical care; • building and strengthening public confidence in national institutions that provide and organize medical and social health services; • permanent training programs; • development of a remote form of providing quality medical consultations 	<p>Field „STh“:</p> <ul style="list-style-type: none"> • inflationary barriers to the long-term development of the health care system; • <i>reduction of state and district budget funds for the development of the health care system;</i> • lack of demand for paid medical services; • gradual ousting of state medical institutions and services from the market of services by private entities

<p>Weak sides:</p> <ul style="list-style-type: none"> • imperfection of the regulatory framework; • high level of concentration of the medical services market; • lack of financial instruments for investment; • low level of competitiveness of national insurers; • insufficient level of institutional development; • information secrecy; • lack of development strategy; • private providers are not involved in the provision of medical services within the guaranteed amount of free medical care; • developed system of logistics of medical institutions; • weak hospital management; • weak technical base (knowledge and skills) for teaching the principles of management of medical organizations and services; • Insufficient resources of the local budget to invest in health infrastructure; • insufficient range of medical, diagnostic and preventive services; • weak base of diagnostic equipment for effective and high-quality diagnosis of diseases; • growth of patients with AIDS, alcoholism, drug addiction; • lack of systematic work on disease prevention; • lack of an effective system of training, advanced training and retraining; 	<p>Field „WO”:</p> <ul style="list-style-type: none"> • improvement and development of the existing regulatory framework; • creation of a highly competitive market for the provision of medical services and medical care; • training in medical management, principles of management of medical organizations and services; • integration of medical science into healthcare practices; • implementation of international standards for patient routes and their treatment with the use of standardized pharmaceuticals and medical supplies; • raising the rating of domestic health care for consumers of services. 	<p>Field „WTh”:</p> <ul style="list-style-type: none"> • reducing the level of financial security of the population; • loss of effective demand from the population for paid services; • outflow of highly qualified medical personnel abroad; • lack of systematic work on disease prevention; • outdated material and technical base of health care institutions; • Insufficient resources of the local budget to invest in health infrastructure; • high prices for paid medical services; • low staffing of paramedics and outpatient clinics and AHMSD (autonomous primary (health) facilities).
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<ul style="list-style-type: none"> • lack of a sufficient number of trained family medicine doctors; • lack of resources needed to finance the program of state guarantees of regional targeted programs for the development of the industry; • limited capacity of treatment and prevention facilities; • significant asymmetry in the provision of medical services; • low level of staffing in the industry; • sale of services that bring income and go beyond health insurance; • insufficient material and technical base • Level I and II health care facilities • providing assistance (in particular, resuscitation, obstetrics and reception departments • hospitals); • high share of wage expenditures with accruals in the budget structure of primary and secondary health care facilities and, accordingly, reduction of expenditures directly on medical care. 		
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After analyzing the results, the strengths are a state (centralized) nature of health care; decentralization of powers from the central level to the level of local authorities, service providers, delegation of responsibility for service provision, strategic planning, financing based on the results of the creation of multidisciplinary structures and other functions; granting managerial autonomy to service providers; reforming the regulatory functions of the public health system (accreditation, quality control of medical

services, etc.); implementation of international standards; differentiation of medical care between health care institutions according to levels; dynamically growing market; implementation of the Telemedicine project; developed network of territorial centers for social protection; availability of a system of training of medical personnel; development of innovation processes in the industry; development of processes of structural restructuring of the industry; professionalism of staff; modern technological medical equipment. The strengths of public administration of the health care system are designed to ensure its accelerated progress towards the achievement of strategic goals, while its “weaknesses” cause inhibitions.

Instead, weaknesses are: imperfection of the regulatory framework, high level of concentration of the medical services market, lack of financial instruments for investment; low level of competitiveness of national insurers; insufficient level of institutional development, information secrecy; lack of development strategy; private providers are not involved in the provision of medical services within the guaranteed amount of free medical care; developed system of logistics of medical institutions; weak hospital management; weak technical base (knowledge and skills) for learning the principles of management of medical organizations and services; insufficient level of integration of medical science and health care practice; lack of norms and standards for regulating the use of pharmaceuticals and medical supplies in accordance with international practices; lack of network planning and equipment; low rating of domestic health care for consumers of services; insufficient level of qualified staff of medical institutions; unsatisfactory condition of the material and technical base of health care institutions; insufficient resources of the local budget to invest in health infrastructure; insufficient range of medical, diagnostic and preventive services; weak base of diagnostic equipment for effective and high-quality diagnosis of diseases; growth of patients with AIDS, alcoholism, drug addiction; lack of systematic work on disease prevention; lack of an effective system of training, advanced training and retraining; lack of a sufficient number of trained family medicine doctors; lack of resources needed to finance the program of state guarantees of regional targeted programs for the development of the industry; limited capacity of treatment and prevention facilities; significant asymmetry in

the provision of medical services; low level of staffing of the industry; sale of services that bring income and go beyond health insurance; Insufficient material and technical base of health care facilities of the I and II level of care (in particular, resuscitation, obstetrics and reception departments of hospitals); high share of wage expenditures with accruals in the budget structure of primary and secondary health care facilities and, accordingly, reduction of expenditures directly on medical care.

Assessment of the strengths and weaknesses of an enterprise in relation to the opportunities and threats of the external environment just characterizes the presence of strategic prospects for the enterprise and the possibility of their implementation and successful use.

Therefore, the SWOT analysis allows to make an inventory of the existing opportunities and bottlenecks of the health care system, which must be taken into account in the process of strategic planning, without which it is impossible to correctly determine the scenarios of the organization. The company's capabilities can be represented as: creating a system of investing insurance reserves; maintaining public confidence in national institutions that provide and organize medical and social health services; receipt of state and regional funding for the implementation of health care development projects; implementation of the national project "Sustainable Development Goals 2016–2030"; expected increase in demand for paid medical services of high quality; use of experience of other regions and developed countries; partial growth of household incomes; partially developed remote form of receiving quality medical consultations.

May come from the market environment, competitors, in connection with the introduction of new technology, the emergence of laws or the emergence of any other existing or possible problems that prevent the achievement of goals. Threats are: low solvency of the population; political and economic instability; high inflation; rising prices for paid services; negative changes in health care legislation; aging of the infrastructure of medical institutions; increase in the incidence of alcoholism, drug addiction, tuberculosis; growth in the number of people living with HIV and the incidence of AIDS; population aging; environmental degradation; possible reduction of the state budget for the development of the health care system; continued migration of highly educated medical professionals, especially

mid-level professionals, to other EU countries. Detection of threats allows to take the necessary protection measures in a timely manner.

It is also clear that there will be obstacles (threats) that need to be overcome. It follows "...reorientation of management methods of health care development based on the results already achieved, mastered the standards of medical care and technology used (internal factors) to study the constraints imposed by the external market environment (external factors)" table.1.

The application of the matrix helps to identify issues that are very important for the long-term development and management of the health care system when evaluating its performance. The answers to these questions allow us to formulate a list of strengths and directions for improving each of the components.

CONCLUSIONS

The SWOT analysis of the health care system can be considered as the optimal technology for the management and development of the quality system both in individual health care facilities and in general.

In turn, the use of the results of SWOT-analysis provides certainty and predictability of development, concentration and savings of public resources, reducing the turnover of highly qualified management staff and professionalization of management activities.

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