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## Conference Abstract

### **Barriers to care coordination in market-based and decentralised public health systems: a qualitative study in healthcare networks of Colombia and Brazil**

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## Abstract

**Objective:** To analyze care coordination from the perspective of the actors in healthcare networks of Colombia, which has a social security system based on managed competition and Brazil, which has a decentralized national health system.

**Methods:** A qualitative, exploratory and descriptive-interpretative study was conducted, based on a case study of networks in four municipalities of Colombia and Brazil. Individual semi-structured interviews were conducted to a theoretical sample of a) health and administrative professionals (178), and b) managers of providers and insurers (56). Thematic content analysis.

**Results:** The informants perceived poor clinical information transfer between levels in all the networks and, in Brazil, also difficulties in the coordination of access and clinical management across care levels. The obstacles which emerged are related to the organization of the health system - economic incentives to compete (exacerbated in Brazil by partisan political interests); weak planning and regulation; fragmentation and instability of the networks in Colombia;— and, of the networks - inadequate working conditions and inadequate training of professionals regarding the general practitioner's coordinator of the patient care.

**Conclusion:** To improve coordination across care, several reforms are needed in these health systems and networks to modify incentives, planning, working conditions and professional skills.

## **Keywords**

**care coordination, qualitative research, Colombia, Brazil, delivery of health care**

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## **PowerPoint presentation:**

<http://www.integratedcarefoundation.org/content/problems-and-solutions-integrated-care-policy-level>

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