

The Global Burden of Disease Study Knowledge Translation in Poland

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In 2018 Poland has joined the group of countries with subnational burden of disease study

- **Key outcomes:**

- Produce the subnational-level analysis in two stages:
 - at the level of the 16 voivoidships
 - at the level of 380 poviats (**ongoing proces**) – detailed analysis of health needs at poviat level will allow to identify the resources needed for covering unmet health needs of different population groups;
- Expand the GBD Collaborator Network in Poland;
- Introduce GBD methodology and its applications in policymaking to key decision-makers in Poland;
- Inform the development of the new Maps of Healthcare Needs for Poland through the subnational GBD results;
- Reduce inequalities in health by identification the size of unmet needs and planning effective actions.

Health system reorganization

The policy paper and legislation process

- **Map of Health Needs** - new perspective on shaping the national and local policy using GBD study results to inform resource allocation and health policy priorities + (the data visualization app – BASIW);
- **Healthy Future Strategic Framework for the Development of the Health System for 2021-2027, with an Outlook to 2030** - It is a continuation of the "Policy Paper for Health Care 2014-2020: National Strategic Framework,,":
 - The DALY indicator data provided by AOTMiT – IHME is used as a basis for inferring the health status of the Polish population and **defining its health needs**, and consequently for determining recommended system and organizational changes in the Polish health care system in the most important areas.

Analyses – Maps of health needs – Ministry of Health (mz.gov.pl)



Epidemiology (GBD)



Outpatient specialist care



Waiting times



Drug programmes



Psychiatric care and addiction treatment



Emergency medical services



Medical Staff



Beds and bed occupancy rate



Medical equipment



Sickness absences

Main barriers for knowledge translation:

- Very good climate for GBD study implementation in Poland.
- In general: drawbacks of the global and national burden of disease methodology:
 - ✓ severity distributions
 - ✓ garbage codes of causes of death redistribution
 - ✓ change in all estimates for previous years after releasing the new round of estimates. This makes nearly impossible to use DALY as an impact indicator of health programmes.
- insufficient dissemination of the GBD methods and tools

Main opportunities:

- Increase educational efforts on GBD methods and tools!