

# INNOVATION AND REFORMS IN LENS OF COMPLEX DIFFUSION COMPARATIVE CASE-STUDIES FROM WESTERN BALKANS AND EASTERN EUROPE IN PRIMARY CARE REFORMS

Jonila Gabrani(Cyco)<sup>1,3</sup>, Adriatik Gabrani<sup>1</sup>, Susan Hamer<sup>4</sup>, Wendy Knibb<sup>6</sup>,  
Thomas Plocgh<sup>5</sup>

<sup>1</sup>Department of Public Health, Health Management, Faculty of Medicine, University of Tirana,  
Albania

<sup>3</sup>Albanian University, Finance Department, Albania

<sup>4</sup>National Institute for Health Research – Clinical Research Network, Leeds, UK

<sup>5</sup>Departments of Public Health, Academic Medical Center/University of Amsterdam, Amsterdam, the  
Netherlands

<sup>6</sup>Leeds University, UK, Health Economics

## Abstract

Innovation within healthcare can take many forms, ranging from drug therapies, surgical procedures, devices and tests, through to new forms of health professional training, patient education and management, financing and service delivery models (ref) Most transition countries in Central and Eastern Europe are engaged in health reform initiatives aimed at introducing primary health care (PHC) centered on family medicine to enhance performance of their health systems. This has been particularly challenging; opposing bitter hinders in diffusion or up scaling of the reform or striving to identify best drivers to facilitate the process (ref). Objective: We aim to explore the introduction and diffusion of family-medicine-centered PHC reforms in Western Balkans and Eastern European Countries, in lens of innovation. Methods: Case studies selection from Western Balkans and Eastern European Countries. We searched for peer-reviewed articles, searched the grey literature including web sites. Overall 6 case studies from Central and Eastern European Countries met the criteria, Albania, Bosnia and Herzegovina, Estonia, Romania, Poland, and Hungary.. Results: When developing our framework, we integrated the four dimensions of the diffusion process that influence the rate and pattern of adoption of an innovation: the nature of the innovation and its attributes; the adopters (or innovators) and their characteristics, both individuals and groups/organizations; the communication process; the context within which innovation diffusion takes place; and the interactions and interconnections between the innovation, adopters and the context (in terms of political, economic and cultural) see Fig1. Family-medicine-centered PHC reform is a complex innovation involving organizational, financial, clinical and relational changes—within a complex adaptive system. An important factor influencing the adoption of this complex innovation in our target sample was the perceived benefits of the innovation: benefits which accrue to the users, family physicians, nurses and policy makers.

**Key words:** *Innovation, Diffusion, Primary healthcare reforms, Systems in transition, and Eastern Europe*