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**PROACTIVITY AND ACCESSIBILITY OF MEDICAL CARE: THE
VIEW OF YOUNG PEOPLE**

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Abstract

The right to health protection and medical care is constitutionally guaranteed in Russia, and activities that promote human health are highly encouraged. Proactivity of patients, their relatives, and medical personnel is one of the factors that ensure accessibility, increase efficiency, and satisfaction with medical services. Domestic and foreign studies expose that proactivity is increasingly seen as an important factor that improves the quality of health care and human well-being. The research group conducted a study among young people aged 18 to 30 (N=498) living in the Chelyabinsk region of the Russian Federation based on an online survey. The aim was to identify whether there is a link between a young person's proactive attitude, his proactive activity in relation to health and his attitude to the availability of medical services. The investigation has revealed a link between proactive attitude, involvement in disease prevention, and the absence of such connection in assessing the availability of medical services, with the exception of services, the implementation of which partly depends on the addressing person himself.

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1. Introduction

In accordance with part 1 of article 41 of the Constitution of the Russian Federation, everyone has the right to health protection and medical care. Part two of the above-mentioned article establishes the principle of encouraging the activities that promote human health, physical culture and sports.

In the course of examination the availability of medical services, it was obvious that enough attention is paid to the demographic, institutional, economic, and legal factors (Fadeyeva, 2019; Gafiatulina & Kosinov, 2018; Kolesova, 2017). Meanwhile, the assessment of the personal factor, the potential for proactivity is definitely out of focus.

Domestic and foreign studies expose that proactivity is increasingly seen as an important factor that improves the quality of health care and human well-being.

Personal activity acts as a protective factor that prevents conflicts and lessens the number of adverse mental health symptoms (Mazzetti et al., 2019). It was found that proactivity is at a low-level during depression (Dey et al., 2019). A decrease in proactivity can be considered as a symptom that hinders treatment, while the restoration of proactivity serves as a factor in increasing its effectiveness. Proactivity acts as a psychological resource for the health of medical workers (Anishimov et al., 2020), so does coaching of proactive behavior helps to overcome professional burnout (Slabinskiy et al., 2019).

The proactivity of doctors contributes to the patients' inclusion in rehabilitation activities (Bergholdt et al., 2013), moreover, the active position and orientation of medical teams make the patients generate their own ideas (Henrike & Schultz, 2014). Proactivity is one of the foundations of electronic communication between patients and doctors (Mesko et al., 2019). In addition, proactivity is considered as one of the basic competencies for evaluating the work of staff in a medical organization (Komissarov, 2019).

Researchers note that encouragement of patients' proactivity through access to information and active listening, patients' participation in decision-making (Del Rio-Lanza et al., 2016), the telehealth program (Riu et al., 2018), improve the use of health resources and patient engagement in treatment. The ability to "confirm a sense of proactivity" is considered as a new indicator in the treatment of patients (Saigal et al., 2017).

Researches among older adults show the impact of proactive health promotion behavior on longevity (Kahana et al., 2002), and equally, the influence of proactive adaptation on quality of life (Kahana et al., 2012).

According to research data (Taylor-Gooby, 2011), ensuring access to rights is associated with supporting the individual's activity in employing opportunities. In general, proactivity represents a factor in the restructuring of social protection in European countries.

However, what is the impact of youth proactivity on the availability of health services?

2. Problem Statement

Considering youth proactivity as a health resource, it is essential to be perfectly aware of its strengths and limits in order to ensure effective implementation. Youth proactivity is selective, it is aimed at solving problems that are significant from the perspective of a young person; and this proactivity should

contribute to the desired future. Therefore, it may or may not include health and health care in the focus area of young people, so this issue is left for further investigation.

3. Research Questions

Proactivity is considered as "independent and future-oriented actions to change oneself or the situation" (Parker et al., 2019, p. 20). This term includes different criteria according to researchers. Abramova and Kostyuk (2013) apply the following empirical indicators for diagnosing a proactive personality:

- 1) active life position,
- 2) positive attitude to other people;
- 3) internal locus control;
- 4) self-preservation (the ability to distract from the emotional environment).

Erzin (2014) uses a number of scales for proactive behavior research: awareness of actions, prediction of behavioral consequences, internal locus control, spontaneity, autonomy in decision-making, metamotivation, internal behavioral determination.

Belwalkar and Tobacyk (2018) offer a three-aspect model of proactive personality consisting of 3 dimensions: perception, implementation, and perseverance.

We are aware of the versatile character of proactivity and have the aim to study the correlation between proactive attitude, proactive actions and the perception of accessibility of medical services by young people.

4. Purpose of the Study

To identify the links between the proactive attitude of young people, their involvement in proactive activities (disease prevention) and their attitude to the availability of medical services.

Research Questions:

1. How common is the proactive attitude among young people?
2. What is the extent of youth involvement in proactive actions regarding their health (disease prevention)?
3. Is there any connection between the proactive attitude and involvement in proactive health related activities?
4. Is there any difference in the assessment of the availability of health services among young people with proactive attitude and non-proactive attitude?

5. Research Methods

The research group conducted an online survey of 498 young people aged 14 to 30 years living in the Chelyabinsk region of the Russian Federation. The questionnaire included:

- 1) questions to identify a proactive attitude: "I believe that young people can contribute to social problem solving"; "I see positive changes as a result of my actions"; "I believe that it is difficult for one young person to change anything";
- 2) the question of inclusion in prevention "I take actions to prevent various diseases";
- 3) questions about the availability of medical services "I can call an ambulance and it will arrive within half an hour", "I can make an appointment in a clinic within two days", "I can get hospital treatment promptly, in case of emergency", "I can carry out planned treatment".

We used Kramer's V-criterion for mathematical data processing.

6. Findings

The study illustrated that the majority of respondents share the statement "I believe that young people can contribute to social problem solving". To be more exact, the responds are the following: completely disagree with the statement - 5.6% of respondents; rather disagree with the statement - 5.2%; not sure - 13.7%; rather agree with the statement - 28.5%; completely agree with the statement - 47.0% (Table 1).

Significantly fewer respondents agreed with the statement: "I see positive changes as a result of my actions": completely disagree – 27.7%; rather disagree – 14.9%; not sure – 27.5%; rather agree – 17.5%; completely agree – 12.4%.

Along with that, more than a half of respondents agreed with the following statement: "I believe that it is difficult for one young person to change anything": completely disagree – 11.8%; rather disagree – 13.5%; not sure – 21.8%; rather agree – 21.1%; completely agree – 33.5%.

Consequently, three-quarters of the young people surveyed believe that youth can contribute to the solution of social problems, but more than a half of the respondents hold the opinion that it is difficult for one young person to change the present state of things, and only a third of the respondents demonstrate a proactive attitude, noting that they are already making positive changes with their actions.

Table 01. The survey results of young people attitude

Answer option	I believe that young people can contribute to social problem solving	I see positive changes as a result of my actions	I believe that it is difficult for one young person to change anything
Completely disagree	5.6%	27.7%	11.8%
Rather disagree	5.2%	14.9%	13.5%
Not sure	13.7%	27.5%	21.8%
Rather agree	28.5%	17.5%	21.1%
Completely agree	47.0%	12.4%	33.1%

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The question about proactive actions in relation to their health ("I take actions to prevent various diseases") had the following responses:

- positive answer: 38.8%;
- negative answer: 31.1%;
- not sure: 30.1 %.

Having compared the answers, we have proved the existing connection between the choice of a proactive attitude and the young people involvement in the disease prevention ($V = 0.181$; $p = 0.0001$), (data from table 2). Young people who hold a proactive position are more often engaged in the prevention of various diseases.

As one can observe in the study (Kahana et al., 2012) that states the interconnection between a proactive strategy and social action, we similarly note the correlation between a proactive attitude and an action aimed at preventing diseases.

Table 02. The survey results of the young people attitude and their involvement in disease prevention

The answer to question 1*	The answer to question2**				Cramér's V	p-value
	Disagree n=155	Not sure n=150	Agree n=193	Total n=498		
Completely disagree	40.6%	25.3%	19.2%	27.7%	0.181	0.001
Rather disagree	16.1%	16.0%	13.0%	14.9%		
Not sure	24.5%	30.7%	27.5%	27.5%		
Rather agree	12.3%	18.0%	21.2%	17.5%		
Completely agree	6.5%	10.0%	19.2%	12.4%		
Total	31.1%	30.1%	38.8%	100%		

*Note: Question 1 - I see positive changes as a result of my actions** Question 2 - I take actions to prevent various diseases

Table 03. The survey results of young people assessment of the medical service availability

The answer to question 1*	The answer to question 2**		Cramér's V	p-value	The answer to question 3***		Cramér's V	p-value
	No n=188	Yes n=310			No n=181	Yes n=317		
Completely disagree	28.2%	27.4%	0.083	0.490	28.2%	27.4%	0.146	0.031
Rather disagree	14.9%	14.8%			8.8%	18.3%		
Not sure	30.9%	25.5%			30.9%	25.6%		
Rather agree	16.5%	18.1%			21.0%	15.5%		
Completely agree	9.6%	14.2%			11.0%	13.2%		
Total	37.8%	62.2%			36.3%	63.7%		

Note: *Question 1 – I see positive changes as a result of my actions.** Question 2 – I can call an ambulance and it will arrive within half an hour.*** Question 3 – I can make an appointment in a clinic within two days

Table 04. The survey results of young people assessment of the medical service availability

The answer to question 1 *	The answer to question 2 **		Cramér's V	p-value	The answer to question 3 ***		Cramér's V	p-value
	yes n=331	no n=167			yes n=251	no n=247		
Completely disagree	27.2%	28.7%	0.084	0.476	28.7%	26.7%	0.100	0.294
Rather disagree	14.9%	14.8%			13.1%	16.6%		
Not sure	27.8%	26.9%			29.1%	25.9%		
Rather agree	19.0%	14.4%			19.1%	15.8%		
Completely agree	10.9%	15.6%			10.0%	15.0%		
Total	66.4%	33.6%			50.4%	49.6%		

Note: *Question 1 – I see positive changes as a result of my actions.** Question 2 – I can get hospital treatment promptly, in case of emergency.*** Question 3 – I can carry out planned treatment

The following responses were received to the question about the availability of medical services (table 3,4).

The percent of positive answers for "I can call an ambulance and it will arrive within half an hour" - 62.2%, "I can make an appointment in a clinic within two days" - 63.7%, "I can get hospital treatment promptly, in case of emergency" - 66.4 %, "I can carry out planned treatment" - 50.4%.

Some of the respondents (3.2%) used the opportunity to give a comment on their response. Young people noted that sometimes they couldn't get medical services, as it was difficult to make an appointment with a doctor ("to get to the children polyclinic resembles a hard-core QUEST", "no appointments"). Another comments pointed out time-consuming treatment ("a lot of queues, not promptly"), dissatisfaction with the correlation of service quality of and its price, so eventually some of the respondents preferred to go to private clinics.

We identified five groups of respondents based on their choosing the answer "I see positive changes as a result of my actions" and compared their responses when assessing the availability of medical services (table 3,4). The results demonstrate that this answer is correlated with only one statement: "I can make an appointment in a clinic within two days" (V=0.146; p=0.031).

The results of the study do not confirm the hypothesis of an interrelation between proactive attitude and attitude to the availability of medical services. However, one fact provokes discussion: there is a slight connection in the assessment of one service, depending on the actions of the subject applying for it ("I can make an appointment in a clinic within two days"). The interpretation of this fact can be based on a study (Dey et al., 2019), which notes that specific situation contributes to a proactive position. This implies the importance of specific instructions for ensuring the availability of medical services, which could be used by young people who choose a proactive position (for example: maximum publicity of the quality of the service provided by a particular organization). However, this assumption requires further research.

7. Conclusion

The proactivity of young people (both young professionals and recipients of medical services) stands as a crucial factor in ensuring access to health and medical care rights. Young people are perfectly aware

of their ability to influence the social problem solving, but they are convinced that it is difficult for one person to cause significant changes in the society. Young people with proactive attitude tend to practice the disease prevention, but they also need specific tools to realize their potential in ensuring the availability of medical services. Therefore, we come to a conclusion of a necessity to conduct a detailed study of the corresponding mechanism for legal interactive regulation between medical organizations and young patients. The goal of these studies is to achieve publicly open and visible correlation of the availability and quality of services provided in all information fields (media, Internet).

The youth proactivity potential and its real-life implementation may be in high demand in the whole spectrum of innovations in modern medicine: information medical systems, telemedicine, but the key benefit is in the approach to health organization as a constructive interaction between its participants who take responsibility for the future.

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