Bjegovic-Mikanovic, Marinkovic-Eric. Misunderstanding should be avoided by precise formulation: Comment on Jerliu et al. "Public Health in Kosovo after five difficult years of independence" (Letter to editors). SEEJPH 2014, posted: 19 April 2014. DOI 10.12908/SEEJPH-2014-21.

## **LETTER TO EDITORS**

## Misunderstanding should be avoided by precise formulation: Comment on Jerliu et al. "Public Health in Kosovo after five difficult years of independence"

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In this review paper, Jerliu and co-authors describe the recent steps to reorganize the system of Health Care in Kosovo<sup>1</sup> (1-3). Only at the end of the abstract and the conclusions the authors speak of five years since the (unilateral) Kosovar declaration of independence (not cited among the references) or elsewhere in the text of "transformation to an independent state", whereas in the title, unfortunately, they speak only of independence. Also, the authors state that Kosovo currently has been recognized by 105 countries, however, the UN family consists of 193 countries, and – as they indicate correctly – Kosovo is not yet a member of the World Health Organization. The precisely formulated expression in international documents is as follows: "The designation of Kosovo is without prejudice to positions of status, and in line with the United Nations Security Council Resolution 1244/99 and the International Court of Justice opinion on the Kosovo declaration of independence". The imprecise wording in this paper can lead to misunderstanding which should be avoided (4). Beyond the difficult definition of the status of Kosovo in the current transition phase, a more important deficit of this paper is the lack of historical reference with regard to the development after World War II. In 1950, infant mortality in that part of Serbia was 141/1000 live births (5), down to 24 in 1995 (6). Likewise, maternal mortality has been reduced due to improved health status in general, based on mother and child programmes, healthy community interventions, increased standards of living, and other interventions. Health services in Kosovo were the same as in the entire Yugoslavia including the network of health institutions [796 inhabitants per physician (5)], particularly primary health care centres [a network of 22 "dom zdravlja's" and 379 general practitioner units (5)], staffed with committed health professionals as is cited by the authors from the Health Sector Strategy (HSS) of Kosovo. Also, the State Health Insurance System of Serbia, based on solidarity, included the population of Kosovo as any other people in the former republics of Yugoslavia. Therefore, today, Kosovo can build on the historical achievements during that period which should have been acknowledged in a more pronounced way. However, as the authors write, "...the nineties left Kosovo with a very inefficient health system characterized by a lack of trained personnel, disparities in health force distribution, leading to variations in access to primary care, corruption and informal payments as well as deteriorated child and adult health indicators". This statement seems to be somewhat contradictory to the HSS, cited above from this paper.

Hopefully, one day, an unprejudiced analysis of the development of the health system in Kosovo before and after World War II will become possible.

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