

EDITORIAL

Health economics and community-oriented practice in Vietnam

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Health science is an emerging field in today's society. This discipline's involvement in scientific research has reached such an influential extent that advancements in the field are instrumental in evaluating the health safety of both developing and developed nations. Health science is also a multidisciplinary domain aimed at disseminating information, enhancing practice and enabling investigations into the health status and quality of care for individuals, families and communities. It encompasses branches of knowledge that include health outcomes, public health and health economics. Health economics, in particular, is distinguished from other subject areas in terms of extensive government intervention, intractable uncertainty in several dimensions, asymmetric information, barriers to entry, externalities and the presence of third-party agents.¹

Pharmacoeconomics, which is a sub-discipline of health economics, refers to the scientific discipline that compares the value of one pharmaceutical drug or drug therapy to another. A pharmacoeconomic study involves evaluating the costs (expressed in monetary terms) and effects (expressed in terms of monetary value, efficacy or enhanced quality of life) of a pharmaceutical product. Pharmacoeconomic research serves to guide optimal healthcare resource allocation in a standardised and scientifically grounded manner.^{2,3} As part of health economics, public health requires evidence-based advocacy, communication and social mobilisation (ACSM) interventions. Evidence-based programming underlines the importance of collecting baseline and follow-up data in the design and assessment of ACSM activities that cater to populations or specific sub-groups. In planning ACSM activities for disease control, a helpful component is a well-designed and rigorously conducted knowledge, attitudes and practices survey, which derives informative, insightful and broadly useful data.⁴ These activities are what constitute community-oriented practice.

In the context of Vietnam, the issues of health economics and community-oriented practice are underexplored matters in spite of their crucial contributions to society. The objective of this special issue is to bring together research on the design, specification and implementation of architectures, protocols and algorithms for current and future healthcare training systems to ensure effective education using technologically advanced facilities and programmes. This issue also provides a collection of high-quality examinations in the health field with a view to improving the health planning, management and policymaking processes directed towards enhancing the healthcare system in Vietnam.

References

1. Phelps CE. Health economics. 3rd ed. Boston: Addison Wesley; 2003.
2. Mueller C, Schur, C, O'Connell J. Prescription drug spending: the impact of age and chronic disease status. *Am J Public Health.* 1997; 87: 1626-9.
3. Arnold RJ, Ekins S. Time for cooperation in health economics among the modelling community. *Pharmacoeconomics.* 2010; 28:609-13.
4. World Health Organization. Advocacy, communication and social mobilization for TB control: a guide to developing knowledge, attitude and practice surveys. Switzerland: WHO Press; 2008.