

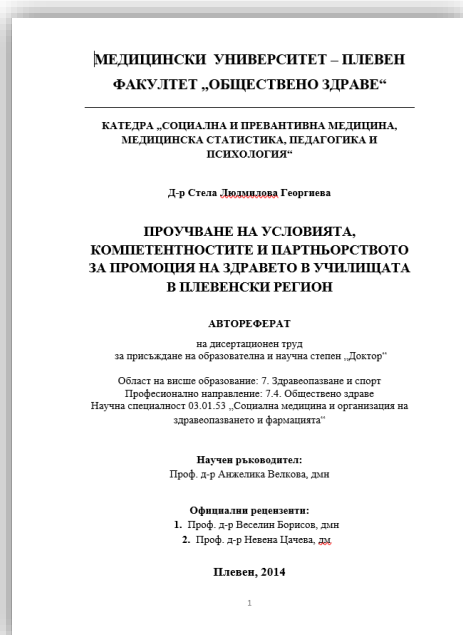
# РЕЗЮМЕТА

на отпечатаните в пълен текст научни трудове  
на доц. д-р Стела Георгиева, д.м.

## Показатели А:

Дисертационен труд за присъждане на образователна и научна степен "доктор"

Георгиева С. *Проучване на условията, компетентностите и партньорството за промоция на здравето в училищата в Плевенски регион*



**Background:** WHO's concept of Health-Promoting School is based on the holistic vision of health. "Health Promoting School" seems to be one of the most effective and cost-effective approaches for Public health improvement that activates the full organizational potential of schools to be healthy places to live, learn and work in. The international experience shows both success and difficulties to put this concept in practice.

**Aim:** The aim of this study is to investigate the conditions for health promotion at Bulgarian school, professional competencies of people and institutions in charge of this activities and their interaction to reach better health for children.

**Material and methods:** A comprehensive medico-social survey over representative sample of schools

in Plevan district was conducted from September 2012 to May 2013. Data were collected by self-administered questionnaire among 1280 people in five target groups including 78 school nurses, 30 health promotion experts, 279 teachers, 519 students, 374 parents; interview with school principals and documental review. Data analysis and interpretation were consistent with the concept of Health Promoting School.

**Results:** The study found safety school environment with strict control over its physical components. About 60% of buildings have had no free access to school environment for disabled people. There is a necessity of better opportunities for sports and nutrition services in about of two thirds of schools. Over 90% of school staff and about two thirds of students report high level of stress which require attention to the emotional and social well-being at school. School nurses have good self-assessment for their health-promotion competencies. At the same time over 95% of them admit that they have to improve their knowledge and skills in the field. Teacher's health promotion competencies must be improved because they have not studied health promotion during their basic education and about one of three of them don't realize

enough their health promoting role. Over 80% of health education at school is carried out by traditional and unattractive ways or don't correspond with information needs of students. Behavioral risk factors are widely distributed among students (48,2% tobacco smoking; 36,6% physical inactivity) and start at early age. There is positive attitude of the family for partnership with school but there are some difficulties to fulfill it. The health promotion expert's assessment about health promotion at school is generally "good" but there are not clear criteria for evaluation. Based on the study results an educational program was developed to be applied for improving health promotion competencies of school nurses and teachers.

**Conclusion:** The Health promotion concept in Bulgaria have to become more popular both among health professionals and the society so that its potential for improving public health could be used.

**Key words:** health promotion, health-promoting school, health promotion competencies, health education, partnership for health

### Списък на публикации в пълен текст, свързани с дисертационния труд

1. Георгиева, С. *Промоция на здравето в училище – цели, ресурси, насоки на развитие.* – В: Годишник на Съюз на учените – Благоевград „Науката, образованието и изкуството през 21 век“, (6), част 2, под ред. на Н. Огненска, 297-302; ISBN: 978-954-680-529-4

*The Science, the Education and Art in 21<sup>st</sup> Century*

#### **ПРОМОЦИЯТА НА ЗДРАВЕ В УЧИЛИЩЕ – ЦЕЛИ, РЕСУРСИ И НАСОКИ ЗА ОСЪЩЕСТВЯВАНЕ**

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**Abstract:** According to holistic conception health is a state of complete physical, mental and social well-being but not merely absence of disease or infirmity. Health is formed under influence of biological, medical, economic and psycho-social factors that are in complex interrelations. The majority of them manifest their impact in childhood.

**Aim:** The aim of this paper is to present the aims, directions for action and resources for health promotion at school as a precondition for public health improving.

**Material and methods:** National and international databases and sources were analyzed.

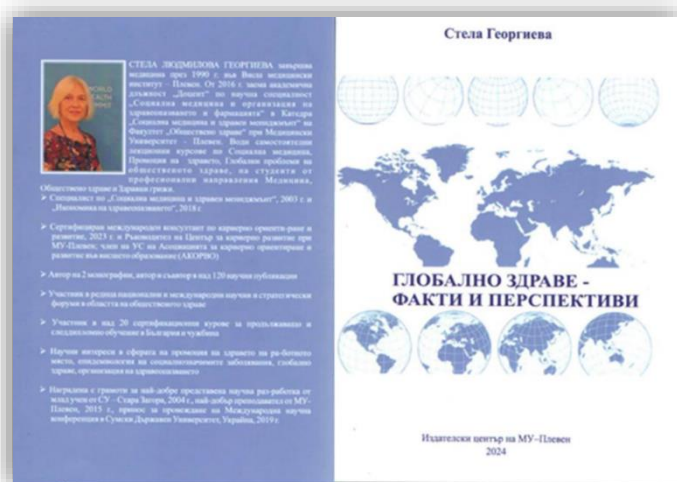
**Results:** The Global initiative for School Health promotion, started at 90-es of XX century, continue to be active. The school more and more get characteristics of a place with healthy conditions for studying, living and working. Health promotion at school be realized in partnership of all members of school community – health workers, teachers, pupils, parents. Instead of some difficulties and restrictions in our country, the health promoting school initiative is extended.

**Conclusion:** School health promotion is a tool for mass formation of healthy lifestyle, display full health potential of each person and improvement of public health.

**Key words:** promotion, health, school, partnership

## Показатели В

### Хабилитационен труд - монография, представена във връзка с процедурата за хабилиране



#### Въведение

От най-дълбока древност човекът е полагал грижи за собственото си здраве според наличните към дадения момент знания, умения и практики. В хилядолетната история на човечеството представите за здраве са еволюирали, преминавайки през идеята за „здравето като индивидуална грижа“ до „здравето като социална цел, политически приоритет и без-

условно важен ресурс за личното и обществено развитие“.

Медицината, като наука за човешкото здраве, изучава неговите характеристики на различни нива, формирайки клонове с различен фокус на научния интерес: биомедицина – наука за здравето на организмено ниво, изучаваща анатомичните и физиологични характеристики на биологичния вид *homo sapiens*; клиника, насочена към здравето на отделния индивид (личност, пациент) и социомедицина с предмет на изучаване на индивидуалното (групово, обществено) здраве.

Общественото здравеопазване като теория и практика се базира на разбирането, че социалните фактори имат доминиращо значение при формиране на здравето. От друга страна, развитието на човешкото общество в последните десетилетия е съпътствано от редица феномени с безспорни, но все още недобре проучени ефекти върху здравето:

- Глобализация
- Урбанизация
- Бързи темпове на нарастване на световното население
- Популационно стареене
- Еволюция и реформи в здравните системи и др.

Всички тези процеси довеждат до изразена динамика в профила на болестността, здравните потребности на населението, организацията и функционирането на системите за здравеопазване, управлението на ресурсите за здраве, етичните и законодателни аспекти на взаимоотношенията в здравния сектор. Възникват нови концепции, както и необходимост от задълбочаване на анализа на използвани понятия като „обществено здраве“, „международно здраве“, „глобално здраве“.

Неоспорим факт е, че светът осъществява значителен напредък в подобряване на човешкото здраве. От средата на миналия век до днес е постигнато отчетливо подобряване на показателите за майчино и детско здраве, повишаване на средната продължителност на предстоящия живот, ограничаване и елиминирание на определени заболявания. Въпреки безспорните успехи обаче все още съществуват глобални здравни

предизвикателства и изразени неравенства в здравето между отделните региони, страни и групи с различен социално-икономически статус, което поставя на дневен ред необходимостта от изучаване на глобалното здраве.

Целесъобразността на издаването на тази монография е свързана с необходимостта от задълбочен поглед върху актуалните проблеми и перспективи на общественото здраве в глобален аспект, изучаване на детерминантите на здравето, изясняване и сравнителен анализ на ключови понятия в социалната медицина и общественото здравеопазване. Тя може да бъде полезно учебно помагало за студентите от различни медицински специалности, изучаващи учебната дисциплина „Глобални проблеми на общественото здраве“. В допълнение, представените концепции и резултати от глобални, регионални и национални проучвания, международни здравни сайтове и бази данни, са в сферата на професионалните интереси на лекари, здравни мениджъри и политици, специалисти от системата за опазване и контрол на общественото здраве и други.

## Показатели Г

### **Г7: Публикации и доклади, публикувани в научни издания, реферирани и индексирани в световноизвестни бази данни с научна информация**

1. Камбурова, М., **С. Георгиева**, Н. Велева. *Анализ на болничната помощ в България за периода 2000 – 2014 г.* Медицински преглед, 2016, 3(ЛП): 63-67; ISSN: 1312-2193; Web of Science (CABI) - 20 т.

МЕДИЦИНСКИ ПРЕГЛЕД, 52, 2016, № 3

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#### **МЕНИДЖМЪНТ В ЗДРАВЕОПАЗВАНЕТО MANAGEMENT IN HEALTHCARE**

##### **АНАЛИЗ НА БОЛНИЧНАТА ПОМОЩ В БЪЛГАРИЯ ЗА ПЕРИОДА 2000-2014 Г.**

М. Камбурова, С. Георгиева и Н. Велева  
Медицински университет – Плевен

##### **ANALYSIS OF HOSPITAL CARE IN BULGARIA FOR THE PERIOD 2000-2014 YEARS**

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<b>Резюме:</b>	Цел на проучването е анализ на дейността на лечебните заведения за болнична помощ в България за периода 2000-2014 г. Използвани са данни от Националния център по обществено здраве и анализи (НЦОЗА) и European Health for All Database (HFA-DB). Наблюдава се постепенно нарастване на броя на лечебните заведения за болнична помощ в страната и оптимизиране на броя на болничните легла. В структурата на болниците по вид за 2014 г. преобладават многопрофилните болници – всичките за активно лечение (113, или 34.9%). Броят на преминалите болни през лечебните заведения непрекъснато се увеличава и се формира показател за хоспитализация – 29.75%, значително по-висок от средните стойности за ЕС – 17.59%. Използваемостта на леглата в страната е по-ниска от тази в ЕС – 76.61%. България достига по-кратък среден престой от този в страните – членки на Европейския съюз – 8.08 дни. Едни и същи класове болести, независимо от тяхното ранжиране, обуславят 2/3 от хоспитализациите.
<b>Ключови думи:</b> <b>Адрес за кореспонденция:</b>	болнична помощ, използваемост на леглата, среден престой, класове болести Д-р Мариела Стефанова Камбурова, дм, Факултет „Обществено здраве“, Медицински университет, ул. „Св. Климент Охридски“ № 1, 5800 Плевен, e-mail: mariela_kamburova@yahoo.com
<b>Summary:</b>	Aim of the study is to analyze the utilization of hospital care in Bulgaria for the period 2000-2014 years. Data from the National Center for Public Health and Analysis and European Health for All Database (HFA-DB) was carried out. It was found an increase in the number of hospitals in the country and an optimized number of hospital beds. In the structure of hospitals for 2014 general hospitals were 34.9% – all for active treatment. The number of patients passed through hospitals steadily increased and the indicator of hospitalization (29.75%) is significantly higher than the European Union (17.59%). Beds occupancy in the country is lower than in the EU – 76.61%. Bulgaria reached a shorter average of stay than in the member states of the EU – 8.08 days. The same diseases, regardless of their ranking, determine two third of hospitalizations.
<b>Key words:</b> <b>Address for correspondence:</b>	hospital care, utilization of beds, average stay classes of diseases Mariela Kamburova, M. D., Faculty of Public Health, Medical University, 1, Sv. Kl. Ohridski St., Bg – 5800 Pleven, e-mail: mariela_kamburova@yahoo.com



2. **Georgieva S.,** Kamburova M., Aleksandrova-Yankulovska S. *Applying the health promotion principles to workplaces*. General Medicine, 2018, 20(1): 25-29; ISSN: 1311-1817, SJR2018=0.101; Web of Science (CABI), Scopus - 20 Т.

## ПРИЛАГАНЕ ПРИНЦИПИТЕ НА ПРОМОЦИЯ НА ЗДРАВЕТО НА РАБОТНОТО МЯСТО

С. Георгиева, М. Камбурова и С. Александрова-Янкуловска

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## APPLYING THE HEALTH PROMOTION PRINCIPLES TO WORKPLACES

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**Резюме.** Целта на настоящата разработка е да се проучи прилагането на принципите на промоция на здравето в контекста на работната среда. Данните са събрани чрез анкетно проучване сред 250 работещи и полуструктурирано интервю с 9 ръководители на фирми. Установява се, че на работното място се провеждат здравнопромотивни дейности, но целенасочена политика имат само големите фирми с международно участие. Работещите участват в разработването на тази политика чрез комитети и групи по условия на труд, но 55,5% определят участието като фиктивно. Над 90% от фирмите контролират факторите на физическата среда и използването на лични предпазни средства. Промоция на здравословното хранене осъществяват около 50% от проучените обекти, 33% предлагат възможности за спорт. Промоцията на здравето на работното място разширява своята популярност в България, но тя най-често се свежда до законово изискуемите дейности и няма разработена цялостна политика за осъществяването ѝ.

**Ключови думи:** принципи на промоция на здравето, здравнопромотивни дейности в работна среда

**Abstract.** The aim is to examine the principles of health promotion in the context of working environment. Data were collected by direct individual self-administered questionnaire among 250 employees and semi-structured interview with 9 company managers. About 3/4 of respondents estimate that health promotion activities are carried out at their workplace but targeted policy have only major international companies. Workers are involved in the development of this policy through committees and groups on working conditions, but 55.5% define it as fictitious. Over 90% of companies implement strict control on physical environment factors and control the use of personal protective equipment. Promotion of healthy eating is carried out in 50% of observed companies and 33% offer sport facilities for employees. Health promotion expands its popularity in Bulgaria, but in majority of companies it is often limited to legally required activities without fully developed policy directed to implementation of health promotion principles.

**Key words:** health promotion principles, workplace health promotion

3. Tsanova, D., Kamburova, M., **Georgieva, S.**, Mineva, E. *Stillbirths and maternal health care in Bulgaria*. General Medicine, 2019, 21(5): 28-32; ISSN: 1311-1817, SJR2019=0.113; Web of Science (CABI), Scopus - 15 Т.

## МЪРТВОРАЖДАЕМОСТ И МАЙЧИНО ЗДРАВЕОПАЗВАНЕ В БЪЛГАРИЯ

Д. Цанова, М. Камбурова, С. Георгиева, Е. Минева

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## STILLBIRTHS AND MATERNAL HEALTH CARE IN BULGARIA

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**Резюме.** Мъртвораждаемостта е един от най-значимите общественоздравни проблеми. Дори за Европа намаляването на този индикатор е много бавно – от 8.46‰ за 1980 г. до 5.95‰ за 2015 г. За България показателят е 6.32‰ (2017). Наблюдават се съществени различия между областите в страната. Целта на настоящото проучване е да се анализира връзката между мъртвораждаемостта и майчино здравеопазване в България. Проведено е корелационно епидемиологично проучване въз основа на данни от Националния статистически институт. Данните са обработени с IBM SPSS v.24. За установяване на корелационна връзка е използван коефициентът на Pearson. Резултатите от анализа показват, че нивото на показателя в България остава почти непроменено – 8.15‰ за 2003 г. и 6.32‰ за 2017 г. Един от факторите, свързани с увеличаване на риска за раждане на мъртво дете, е осигуреността с медицинска помощ – брой акушерки и акушер-гинеколози на 100 000 души от населението. Областите с по-висока стойност на индикатора са в групата на тези с ниска осигуреност с медицинска помощ – под средното ниво за страната. Установена е слаба обратна корелация между анализирания променлив.

**Ключови думи:** мъртвораждаемост, майчино здравеопазване, осигуреност с медицинска помощ, България

**Abstract.** Stillbirths are one of the most significant public health problem. Even in Europe, the decreasing of this indicator is very slow – from 8.46‰ in 1980 to 5.95‰ for 2015. For Bulgaria, this indicator is 6.32‰ (2017). There are very big variations between different regions in our country. The aim of the study is to analyse the relationship between stillbirth rate and availability of maternal health care in Bulgaria. Correlational epidemiologic study design has been used to analyse the stillbirth rate in Bulgaria based on the data available from the National Statistical Institute. The data were processed with IBM SPSS v.24. To establish the relationship between stillbirth rates and availability of health care the correlation coefficient of Pearson has been used. The results show that the level of stillbirths in Bulgaria remains almost unchanged – 8.15 % for 2003 and 6.32‰ for 2017. One of the factors that can increase the risk for stillbirth is the availability of health care – number of midwives and obstetricians per 100 000 population. The districts with higher stillbirth rate are in the group of lower availability of health care, below the country average level. It was determined a weak negative correlation between stillbirth rate and availability of health care.

**Key words:** stillbirth rate, maternal health care, availability of health care, Bulgaria.

**Key words:** stillbirth rate, maternal health care, availability of health care, Bulgaria



4. Tsanova, D., Vekov, T., Kamburova, M., **Georgieva, S.**, Seizov, A. *Global burden of diseases in Bulgaria*. General Medicine, 2021, 23(3): 26-33; ISSN: 1311-1817, SJR2021=0.102; Web of Science (CABI), Scopus - 12 T.

## ГЛОБАЛНА ТЕЖЕСТ НА ЗАБОЛЯВАНИЯТА В БЪЛГАРИЯ

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## GLOBAL BURDEN OF DISEASES IN BULGARIA

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<sup>2</sup>Faculty of Pharmacy, Medical University – Pleven

**Резюме.** Проучванията за глобалната тежест на заболяванията събират и анализират данни за повече от 195 страни, отразяващи преждевременна смърт и инвалидност от повече от 350 заболявания и наранявания, по възраст и пол, от 1990 г. до наши дни. Профилът на България в проучванията съдържа сравнителни данни за 2007 и 2019 г. Целта на настоящото проучване е анализ на динамиката на водещите рискови фактори и причини за глобална тежест на заболяванията в България. Водещите причини за години изгубен живот поради инвалидност са основно хронични неинфекциозни заболявания, като на водещите позиции са болки в кръста, падания, главоболие, диабет и т.н. Обобщаващият показател за загубени години живот поради преждевременна смърт и инвалидност DALYs за 2019 г. показва отново водещата роля на исхемичната болест на сърцето и инсулта. Предотвратимата смъртност в България остава много висока. Голяма част от общата тежест на заболяванията в България може да се отнася до поведенчески рискови фактори, включително тютюнопушене, консумация на алкохол, рискове, свързани с хранителния режим и ниска физическа активност.

**Ключови думи:** глобална тежест на заболяванията, България, загубени години живот

**Abstract.** The global burden of diseases studies collected and analyzed data for more than 195 countries, reflecting premature death and disability related to more than 350 diseases and injuries, by age and sex, since 1990 to the present. The profile of Bulgaria in the studies contains comparative data for 2007 and 2019. The purpose of this study was to analyze the dynamics of the leading risk factors and causes of global burden of diseases in Bulgaria. The leading causes of years of life lost due to disability are mainly chronic non-communicable diseases, with the leading positions being low back pain, falls, headaches, diabetes, etc. The summary indicator for lost years of life due to premature death and disability DALYs for 2019 again shows the leading role of ischemic heart disease and stroke. Preventable mortality in Bulgaria remains very high. Much of the overall burden of disease in Bulgaria can be attributed to behavioral risk factors, including smoking, alcohol consumption, dietary risks and low physical activity.

**Key words:** global burden of diseases, Bulgaria, years of life lost



5. **Georgieva, S.** *Effectiveness of health promotion on the control of Covid-19.* General Medicine, 2021, 23(5): 26-33; ISSN: 1311-1817, SJR2018=0.102; Web of Science (CABI), Scopus - 60 т.

## ЕФЕКТИВНОСТ НА ПРОМОЦИЯТА НА ЗДРАВЕТО В КОНТРОЛА НА COVID-19 ПАНДЕМИЯТА

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## EFFECTIVENESS OF HEALTH PROMOTION ON THE CONTROL OF COVID-19 PANDEMIC

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**Резюме.** Тридесет и пет годишната история на промоцията на здравето, от Отавската харта (1986) до наши дни, потвърждава нейната ефективност за подобряване на общественото здраве. Моделът на Tannahill (1992) я определя като широк спектър от дейности в сферите на здравното възпитание, профилактиката и здравната защита. Целта на настоящата статия е да се анализира приложимостта и ефективността на този модел за контрол върху разпространението и тежестта на COVID-19. Направени са преглед на литературата и анализ на съдържанието на публикации по темата. В литературните източници се потвърждава значението на здравното възпитание и информацията в случай на нов или малко известен здравен проблем. Подчертава се ролята на имунопрофилактиката за ограничаването на епидемичното и пандемичното разпространение на инфекциозните заболявания. Въпреки трудностите при разработването и логистиката на ваксини срещу COVID-19 в кратки срокове, това се счита за най-ефективната мярка за намаляване на инфекцията в световен мащаб. Здравната защита, изразена чрез съставяне на стандарти за поведение от здравните власти и тяхното нормативно регламентиране, също води до намаляване на заболяемостта и смъртността. Налага се изводът, че промоция на здравето е приложима и ефективна в ситуацията на здравната криза поради пандемията от COVID-19 и има потенциал за намаляване тежестта на заболяването върху националните здравни системи и върху обществото.

**Ключови думи:** COVID-19, промоция на здравето, модел на Танахил, здравно възпитание

**Abstract.** The thirty-five-year history of Health promotion, from the Ottawa Charter (1986) to the present, confirms its effectiveness for public health improvement. The Tannahill model (1992), defines it as a wide range of activities in the areas of health education, disease prevention and health protection. The aim of this paper is to analyze the relevance and effectiveness of health promotion model to the control of distribution and burden of COVID-19. Literature review and content analysis of publications on the topic were made. Results confirm the importance of health education and information in case of a new or little-known health problem. The special role of immunoprophylaxis in the fight against infectious diseases and the limitation of their epidemic or pandemic spread was emphasized. Despite the difficulties in development and logistics of COVID-19 vaccines at short notice, this is considered the most effective measure to reduce infection worldwide. Health protection, expressed through the establishing minimum standards by health authorities and their regulation, also leads to a reduction in morbidity and mortality. It has to be concluded that health promotion is applicable and effective in a health crisis situation due to the COVID-19 pandemic and has the potential to reduce the burden of the disease on national health systems and the society.

**Key words:** COVID-19, health promotion, Tannahill model, health education

6. М. Камбурова, **С. Георгиева**. *Делът на ромското население като фактор за честотата на ражданията и абортите при юноши в Европейския съюз*. Медицински преглед, 2021, 57, №6, 53-58; ISSN: 1312-2193; Web of Science (CABI) - 30 т.

# ДЕЛЪТ НА РОМСКОТО НАСЕЛЕНИЕ КАТО ФАКТОР ЗА ЧЕСТОТАТА НА РАЖДАНИЯТА И АБОРТИТЕ ПРИ ЮНОШИТЕ В ЕВРОПЕЙСКИЯ СЪЮЗ

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## ROMA ORIGIN AS A FACTOR FOR HIGH LEVEL OF ADOLESCENT FERTILITY AND ABORTION RATE IN EUROPEAN UNION

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### Резюме:

Подрастващите момичета от ромски произход са особено уязвими, защото са изправени пред рисковете от преждевременна бременност и раждане. Изследването има за цел да анализира връзката между дела на ромското население, високата плодовитост във възрастта 15-19 години и абортите в страните – членки на ЕС. Проведено е корелационно проучване, базирано на актуална информация в европейската база данни „Health for all“ на СЗО за плодовитостта при подрастващите и абортите. Обработката на данни е извършена със статистическа програма SPSS v.24. Относителният дял на ромското население е най-висок в България (4,7%) и Румъния (2,5%). Най-висок дял на живородените деца на майки на възраст 15-19 години е установен в Румъния (9,8%) и България (9,5%). Установява се положителна корелация между дела на ромското население в страните – членки на ЕС, и честотата на ражданията във възрастта 15-19 г. ( $r = 0,804$ ,  $p = 0,000$ ). Налице е обратна и незначителна корелация между абортите и дела на населението с ромски произход. Високата честота на бременност и раждания във възрастта 15-19 г. е значим здравен проблем в нашата страна. За решаването му са необходими комплексни усилия за разработване и прилагане на стратегии и програми за здравно и сексуално образование с цел промоция и профилактика на ражданията в младя възраст, особено сред ромския етнос.

### Ключови думи:

ромски произход, плодовитост във възрастта 15-19 години, аборти

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### Abstract:

Adolescent girls of Roma origin, especially younger girls, are particularly vulnerable because they face the risks of premature pregnancy and childbirth. The study aims to analyze the association between Roma origin of mothers and prevalence of adolescent fertility and abortion rate in the EU member states. A correlational study was conducted and data on prevalence of adolescent fertility and abortion among adolescent girls (per 1000 live births) were extracted from European database "Health for all". Data processing was performed by SPSS v.24. The proportion of Roma population is highest in Bulgaria (4.7%) and Romania (2.5%). At the same time, the highest level of proportion of live births to mothers aged less than 20 years was found in Romania (9.8%) and Bulgaria (9.5%). The relation of adolescent fertility rate with share of Roma population shows significant positive correlation ( $r = 0.804$ , with 2-tailed significance  $p = 0.000$ ). As far as the correlation of abortion among adolescent girls of Roma origin is concerned, it is inverse and not significant. The high frequency of pregnancies and births between the ages of 15 and 19 is a significant health problem in our country. To address it, comprehensive efforts are needed to develop and implement strategies and programs for health and sexual education in order to promote and prevent adolescents' births, especially among Roma girls.

### Key words:

Roma origin, fertility age 15-19, abortion

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7. **S. Georgieva.** *Workplace health promotion in the context of aging workforce in Europe.* Journal of IMAB, 2022, Jan-Mar, 28(1): 4217-4222; ISSN:1312-773X; IF2022=0.2; Web of Science – 60 т.





8. **S. Georgieva.** *Training of Employers and Employees in Workplace Health Promotion in Bulgaria: 7-year Experience.* Journal of IMAB, 2022; vol.28(Supplement 12 SEEC & 32 IMAB), Section Varia, pp. 13-16; ISSN: 1312-773X; IF2022=0.2 Web of Science - 60 т.

**Training of Employers and Employees in Workplace Health Promotion in Bulgaria:  
7-year Experience**

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**Abstract:**

**Introduction:** Workplace Health Promotion (WHP) become increasingly relevant field of action for public health improvement. According to the Bulgarian legislation annual trainings on health and safety at work are obligatory for employers and employees. The **aim** of this paper is to share 7-year experience in training of employers and employees in WHP.

**Materials and Methods:** Generally, 9 employers/organizations and 120 employees in three focus groups were included in the training, organized by Occupational Health Service in collaboration with health promotion experts of Medical University – Pleven.

**Results:** At the beginning (2014), about 2/3 of the participants distrust of the proposed approaches. To adapt the training to needs of the audience, a study on the barriers and difficulties in carrying out health promotion activities at workplace was made. Participants were also asked about aspects of WHP that they interested in. During the following meetings (every year from 2014 until now), interest to the WHP and approaches of its implementation have been increasing. Participants improved their activity in discussions, interactive teaching and training approaches get preferable.

**Conclusion:** Lack of knowledge about health promotion concept and its principles predispose to distrust of its potential for public health improvement. Positive attitude to the concept could be established by increasing knowledge and skills in this area and by examples of good practices and results.

**Key words:** health and safety at work, workplace health promotion

9. P. Gergova, **S. Georgieva**, E. Mineva-Dimitrova. *Establishment of a therapeutic relationship nurse – patient at patients with oncology diseases*. Journal of IMAB, 2022; vol.28 (Supplement 12 SEEC & 32 IMAB), Section Varia, pp. 17-21; ISSN 1312-773X; IF2022=0.2 Web of Science - 20 T.

**Establishment of a therapeutic relationship nurse – patient at patients with oncology diseases**

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**Abstract:**

**Introduction:** Care for patients with oncology diseases is a specific area of competence in nursing. The nurse, as part of an interdisciplinary team, has an essential role in organizing, planning, implementing and evaluating the results of patient clinical care. The **aim** of the study was to investigate patients' and nurses' opinion on the role of nurse - patient relationship for improving quality of care.

**Material and methods:** Data were collected by direct individual self-administered questionnaire among 49 nurses and a “face to face” semi-structured interview with 67 patients in five departments. Data were processed with statistical program Microsoft Office Excel 2015 и SPSS v.21.

**Results:** The idea about the therapeutic relationship “nurse-patient” was examined from a view point of both patients and nurses. More than a half of the patients (53,7%) arrange as particularly important nurse' skills to relieve physical pain, followed by 40,3% to inspire confidence and hope and 35,8% - the ability to listen and give advices. One of 10 patients expect to be included as decision-making partner in planning care, every fifth patient expect information by the nurse according to her competence. Professional ethics and relationship “nurse-patient” was evaluated by 55,2% patients as excellent. All nurses (100%) underlies principles of the therapeutic relationship regardless of the length of the contact are respect, genuineness, empathy, active listening, trust, and confidentiality.

**Conclusion:** The nurse-patient relationship is a common responsibility of both: nurses and patients. Both groups evaluated the importance of its components for mutual satisfaction in such communication.

**Keywords:** nurse-patient relationship, nursing oncology care

10. Гергова П., С. Георгиева, Е. Минева-Димитрова. *Необходимост от продължаващо обучение на медицинските сестри по онкологични грижи*. Сестринско дело, 2024, 1(56): 3-9; ISSN: 1310-7496; Web of Science (CABI) - 20 т.

## НЕОБХОДИМОСТ ОТ ПРОДЪЛЖАВАЩО ОБУЧЕНИЕ НА МЕДИЦИНСКИТЕ СЕСТРИ ПО ОНКОЛОГИЧНИ ГРИЖИ

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## NECESSITY OF CONTINUING EDUCATION OF NURSES IN ONCOLOGY CARE

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**Резюме.** През последните две десетилетия ролята на онкологичната медицинска сестра се трансформира от грижи за комфорта и хигиената на пациента към високоспециализирани практики с повече отговорности и роли. **Целта** на настоящото проучване е да се установи необходимостта от повишаване на сестринските компетенции в съответствие със стандартите за онкологични грижи. **Материал и методи:** Нуждата от повишаване на професионалните компетенции е проучена от гледна точка на студенти от специалност „Медицинска сестра“, медицински сестри, работещи в онкологични звена, и експерти в областта на онкологичното лечение и грижи (старши медицински сестри от онкологични отделения и лекари онколози). Данните са събрани чрез пряка индивидуална анкета сред 199 студенти, 49 медицински сестри и 19 експерти и са обработени с Microsoft Office Excel 2019 и SPSS v.26. **Резултати:** Делът на медицинските сестри с придобита специалност по онкологични грижи е едва 12,2%. Сестрите отговарят утвърдително за необходимостта от повишаване на техните компетентности чрез продължаващо обучение (59,2%), участие в научни конференции (28,6%) и включване в квалификационни курсове (16,3%). Една от 10 сестри желае да започне специализация по онкологични грижи. Редовното участие в болничен колегиум е важен източник на професионална информация за 6,1% от работещите сестри. По-малко от половината от студентите медицински сестри (47,2%) имат много добра и отлична самооценка за специфичните си компетентности по онкологични грижи, според 3% те са незадоволителни; 83,4% от студентите споделят за необходимост от продължаващо обучение в тази насока. Нуждата от подобряване на компетентностите по онкологични грижи се потвърждава от 100% от експертите. **Заключение:** Необходимостта от продължаващо обучение и повишаване на компетентностите по онкологични грижи е потвърдена от трите групи респонденти.

**Ключови думи:** сестрински компетенции, онкологични грижи, стандарти за онкологични грижи

**Abstract.** During the last two decades the role of the oncology nurse has been transforming from leading comfort and hygiene care to advanced practice with more responsibilities and roles. **The aim** of the study was to investigate nursing students', nurses' and experts' opinion on the necessity of updating oncology nurses' competencies related to the nurse complex role and standards in oncology care. **Material and methods:** The need of professional growth was examined from a view point of nursing students, nurses in oncology departments and experts. Data were collected by direct individual self-administered questionnaire among 199 students, 49 nurses and 19 experts in the field of oncology care. Data processing was performed with Microsoft Office Excel 2019 and SPSS v.26. **Results:** Proportion of nurses with acquired specialty "oncology care" is low (12.2%). In this relation, nurses respond affirmatively to the need of actualization competencies through continuing education (59.2%), participation to scientific conferences (28.6%) and involvement to

qualification courses (16.3%). One of 10 nurses want to start specialization in oncology nursing care. Regular participation to a hospital collegium is an important source of professional information for 6.1% of oncology nurses. Less than a half of nurse students (47.2%) have very good and excellent self-assessment on their specific competencies in oncology care, for 3% it was insufficient; 83.4% of students assess the necessity of continuing education after graduation. Need of enhancing of oncology competencies was confirmed by 100% of experts. **Conclusion:** The opinion of students, nurses and experts about the importance of continuing education shows a significant similarity. At the same time, relatively few proportion of nurses report an actual participation in continuing education which must be improved.

**Key words:** oncology care, oncology nursing, nurse competencies in oncology care, standards in oncology care



11. P. Gergova, S. Georgieva, E. Mineva-Dimitrova. *Establishment of a therapeutic relationship nurse-patient at patients with oncology diseases.* Journal of IMAB, 2024, Apr-Jun, 30(2): 5538-5541; ISSN:1312-773X; IF2024=0.2; Web of Science – 20 т.

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## ESTABLISHMENT OF A THERAPEUTIC RELATIONSHIP NURSE-PATIENT AT PATIENTS WITH ONCOLOGY DISEASES

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### ABSTRACT:

**Introduction:** Care for patients with oncology diseases is a specific area of competence in nursing. The nurse, as part of an interdisciplinary team, has an essential role in organizing, planning, implementing and evaluating the results of patient clinical care.

The study aimed to investigate patients' and nurses' opinions on the role of the nurse-patient relationship in improving the quality of care.

**Material and methods:** Data were collected by direct individual self-administered questionnaire among 49 nurses and a "face to face" semi-structured interview with 67 patients in five departments. Data were processed with the statistical program Microsoft Office Excel 2015 è SPSS v.21.

**Results:** The idea of the therapeutic relationship "nurse-patient" was examined from the view point of both patients and nurses. More than half of the patients (53,7%) arrange as particularly important nurse skills to relieve physical pain, followed by 40,3% to inspire confidence and hope and 35,8% - the ability to listen and give advice. One in 10 patients expects to be included as a decision-making partner in planning care; every fifth patient expects information from the nurse according to her competence. Professional ethics and the relationship "nurse-patient" was evaluated by 55,2% of patients as excellent. All nurses (100%) underlie the principles of the therapeutic relationship, regardless of the length of the contact are respect, genuineness, empathy, active listening, trust, and confidentiality.

**Conclusion:** The nurse-patient relationship is a common responsibility of both: nurses and patients. Both groups evaluated the importance of its components for mutual satisfaction in such communication.

**Keywords:** nurse-patient relationship, nursing oncology care, oncology patient,

### INTRODUCTION

Oncology diseases are among the leading causes of death worldwide [1]. Cancer is a chronic disease, and patients need constant, timely and continuous care [2, 3, 4]. Care for patients with oncology diseases is a specific area of nursing competence, and the oncology nurse's role quickly transforms from leading comfort and hygiene care to advanced practice oncology nurses with more responsibilities and roles [5, 6, 7]. The nurse, as part of an interdisciplinary team, has an essential role in organizing, planning, implementing and evaluating the results of patient clinical care [8, 9]. Good communication skills play a key role in the establishment of a therapeutic relationship between the nurse and oncology patients throughout the spectrum of health, illness, recovery and along the cancer continuum [10, 11]. In this professional relationship, the nurse must know ways to show respect, genuineness, empathy facilitating trust, confidentiality [12]. Nurses caring for these patients must possess not only excellent professional skills but also exhibit purely human qualities - compassion, commiseration, patience and tact, empathic attitude towards patient and moral support [13]. Communicating with wards patient and moral support [13]. Communicating with patients is one of the most important skills that nurses must have to be effective nursing care [14].

The aim of the study was to investigate the opinion of patients with oncology diseases and nurses caring for them at Hospital UMBAL "D-r G. Stransky" - Pleven on the role of the nurse-patient relationship for improving quality of care.

### MATERIAL AND METHODS

Data were collected in the period from 01.06 - 01.09.2022 by direct individual self-administered questionnaire among 49 nurses and a "face to face" semi-structured interview with 67 patients in five departments. Data were processed with the statistical program Microsoft Office Excel 2015 and SPSS v.21.

12. Stoilova I., S. Georgieva, P. Kostadinova. *Production risk factors and spine injuries in garment workers*. Journal of IMAB. 2024 Apr-Jun;30(2): 5883-5886; ISSN:1312-773X; IF2024=0.2; Web of Science – 20 т.

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Original article

## PRODUCTION RISK FACTORS AND SPINE INJURIES IN GARMENT WORKERS

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### ABSTRACT:

Garment workers are exposed to various factors in the work environment, classified as physical and ergonomic. Occupational injuries of the spine develop as a result of the action of harmful production factors, the most important of which are overstrain, vibrations and an unfavorable production microclimate. The aim of the study is to improve the health and prevention of spine injuries among garment workers. The subject of the study is 75 cases of spine injuries in garment workers. The persons were hospitalized in University Hospital - Pleven during the period 2019-2023. Clinical, laboratory, functional, imaging and statistical research methods were used. Treatment with medication and physical factors was carried out. In 93% of the patients, an improvement in clinical syndromes and the performance of activities of daily living was found. 7% of the examined persons required surgical treatment. Conclusions: Spinal injuries are a current health problem among garment workers. Combined medication and physical therapy is an effective and practically applicable therapeutic approach for the investigated disabilities.

**Keywords:** occupational diseases, spine, garment industry,

### BACKGROUND

A number of factors can lead to the development of health problems in garment workers [1]. The work environment factors in garment production are mainly of two types - physical and ergonomic. Physical includes: broad-spectrum, mostly high-frequency noise (above 800 Hz); production dust - of vegetable (cotton, linen), animal (wool, silk) and synthetic (artificial fibers) origin; whole body vibrations, most intense for low frequencies (up to 35 Hz); unfavorable production microclimate [2]. The ergonomic factors of the work environment are the performance of repetitive movements, application of force, speed of work, forced work posture, etc. [3, 4]. Ergonomic factors influence the psycho-social aspects of work, the satisfaction of employees, their health and well-being [5].

Individual factors include physical abilities, age of the worker, past illnesses, harmful habits (smoking, alcohol use), obesity.

The noted risk factors can create conditions for the occurrence of different types of damage to the locomotor system [6]. The spinal column is the main part of the locomotor system, consisting of vertebrae connected to each other through ligaments and intervertebral. Damage to the spine is accompanied by disorders of the functions of the spinal cord and its roots [7].

The aim of the study is to improve the health and prevention of spine injuries among garment workers.

### MATERIAL AND METHODS

The subject of the study is 75 cases of spine injuries in garment workers. The persons were hospitalized in the Department of Occupational Diseases and Clinic of Physiotherapy and Rehabilitation, UMBAL - Pleven, during the period 2019-2023. Clinical, laboratory, functional,

## **Г8: Публикации в чужди и български нереферирани списания с научно рецензиране или в редактирани сборници с публикации в пълен текст**

1. **Георгиева С., С. Александрова-Янкуловска.** *Промоция на здравето – 30 годишна практика и акценти за бъдещо развитие.* Социална медицина, 2016, 24(3): 16-18; ISSN: 1310-1757 – **15 т.**

СОЦИАЛНА МЕДИЦИНА

### **ПРОМОЦИЯ НА ЗДРАВЕТО – 30-ГОДИШНА ПРАКТИКА И АКЦЕНТИ ЗА БЪДЕЩО РАЗВИТИЕ**

*С. Георгиева, С. Александрова-Янкуловска*

### **HEALTH PROMOTION – 30-YEARS PRACTICE AND POINTS OF FUTURE DEVELOPMENT**

*S. Georgieva, S. Aleksandrova-Yankulovska*

**Резюме.** Целта на настоящата публикация е да анализира ефекта от утвърдените дейности и принципи на промоцията на здравето и новите насоки и приоритети, възникващи във връзка с променящата се социална действителност. Проведените наскоро форуми – IX Европейска конференция по общественото здраве във Виена и IX международна конференция по промоция на здравето в Шанхай потвърждават своята съпричастност към утвърдените в Отавската харта принципи и изтъкват значението им за подобряване на общественото здраве. Интензифицирането в последните години на явления като миграция, урбанизация, развитие на технологиите и информационния обмен, глобализация на търговията и пазара на труда, изостряне на военни конфликти и други, изискват адаптирането им към новите социални условия.

**Summary.** The aim of this publication is to analyse the effect of the health promotion activities and principles and the new perspectives and priorities arising from the social changes. Recent scientific events – 9th European Public Health Conference in Vienna and 9th International Conference on health promotion in Shanghai – reiterate commitment to the principles of Ottawa Charter and emphasize their significance for improvement of public health. Intensified processes of migration, urbanization, technological development and informational exchange, globalization of workforce, aggravated military conflicts require adaptation of principles of health promotion to the new social conditions.

**Key words:** Health promotion, Ottawa Charter, Shanghai Declaration, Vienna Declaration

2. **Georgieva S.L., Kambourova M.S.** *Population aging – a present day public health problem in Bulgaria.* В: Proceedings EIIC: 5th Electronic International Interdisciplinary conference; Slovakia, 2016, 1(5): 231-235; ISBN: 978-80-554-1248-1 – **15 т.**



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## **POPULATION AGING – A PRESENT DAY PUBLIC HEALTH PROBLEM IN BULGARIA**

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**Abstract**—Population aging, as a result of decreasing fertility and mortality related indicators and increasing life expectancy, is taking place in almost all countries over the world. At the same time aging process manifests considerable differences between regions and countries. The aim of this paper is to do a comparative analysis of the process of population aging between Bulgarian, European and World population and to emphasize on its' socioeconomic consequences.

**Methods:** A literature review and internet databases of the World Health Organization, International Labor Organization, European Agency for Safety and Health at Work, National statistic of Bulgaria etc. were used. Different approaches for assessment of population aging and their informative value have been discussed.

**Results:** From 1989 Bulgarian population enters on the fifth stage of demographic cycle. Forecast till 2050 is for about 35% decreasing of population size due to negative natural growth and migration. Medium age of population is increasing from 39.9 (2000) to 42.6 (2015). One of fifth people is at age over 65. Along with decreasing relative share of 0-14 age group the magnitude of Aging index reaches to 144/100.

**Conclusion:** Bulgaria is a country with one of the most intensive process of population aging in the world.

**Keywords**— age pyramid, Bulgaria, demographic cycle, population aging

people over 65 years of age as a border line between active age and retirement. According to the scale of assessment, less than 5% of people 65 and above years of age in population indicate young age structure; 5-10 % - population can be defined as "at the beginning of aging" and more than 10% is a criteria for aging population [1].

2. **Age dependency ratios.** Depending on their socioeconomic activity, people in population can be characterized as "active" and "dependent" groups. Age (demographic) dependency ratio is a simple indicator of the relationship between dependent people - younger than 15 or older than 64 to the working-age population (those ages 15-64). Data are shown as the proportion of dependents per 100 of working-age population [1, 2, 4].
3. **Coefficient of demographic replacement.** This indicator characterizes the reproduction of labor resources. It represents the average number of persons of the junior age group of the working population (15-19), which replace a person of the most senior working-age group (60-64). Informative value is important regionally, as reproduction and structure of labor resources are different [5].



3. Kamburova M.S, **Georgieva S.L.** *Health status of Roma population*. B: Proceedings EIIC: 5th Electronic International Interdisciplinary conference; Slovakia. 2016, 1(5): 236-239; ISBN: 978-80-554-1248-1 – **15 T.**

*Abstract*—The health of marginalized groups is a significant public health issue.

The study aims to analyze the health status of Roma older than 18 years of age and living in two small towns in Bulgaria (Kneja and Kotel).

In March and April of 2016, a cross-sectional study among 18 Roma families was conducted. The data were collected by face to face interview taken by Roma medical students. The average number of people living in Roma families is 2.72. The distribution by gender is: 59.5% females compared to 40.5% males. The study established that 54% of women and 82% of men use tobacco every day and 93.8% of them do not use diet products at all. More than 60% of the adult Roma population does not have health insurance. Around 89% of participants reported the presence of chronic diseases and 46.2% of the women and 20% of the men suffered from at least three diseases.

The findings confirmed the worse health status among Roma compared to other ethnic groups and health inequalities between Roma and non-Roma living in Bulgaria.

*Keywords*- public health, health status, Roma population, self-rated health, risk factors

4. Kamburova M., **Georgieva, S.**, M. Un. *A Marital Status and Health of the Mother as Risk Factors for Premature Birth in Pleven, Bulgaria*. Sanitas Magistrium, 2016, 1(2): 53-62; ISSN:2149-4738 – **10 T.**

#### Abstract

Premature birth is associated with increased infant mortality, short and long-term negative effects on health and additional costs for care. It is a major public health problem worldwide. Because marital status and the health of the mother directly effect the incidence of birth, it is an important area of research. The aim of study was to explore the impact of these factors in premature births in Pleven, Bulgaria.

#### Keywords

Premature Birth • Marital Status • Mothers' Health • Risk Factors

5. Kamburova M., **S. Georgieva**, M. Un. *Association between Applied Health Policies and Probability of Premature Death in Bulgaria*. Sanitas Magistrium, 2017, 3(1): 47-52; ISSN: 2149-4738 – **10 т.**

#### Abstract

Non-communicable diseases (NCDs) are estimated to account for 94% of all deaths in Bulgaria. The duty of a national health system is to implement health policies for reducing the negative consequences of premature death (between the ages of 30-70) due to NCDs for public health. Analyzing the association between the number of health policies applied in response to NCDs and the likelihood of premature death in Bulgaria involved assessing the situation in Bulgaria compared with other member states of the European Union (EU). Between October and December 2015, a comprehensive search of the literature on the subject of the study was conducted. Data were processed statistically and illustrated with tables and graphs. For 2014, the probability of premature death from NCDs (cardiovascular diseases, cancer, chronic lung diseases, or diabetes) in Bulgaria was 24%; this was the highest level of any EU country. Bulgaria has the lowest number of applied health policies (two) in comparison with other EU member states (i.e., nine in Lithuania). They are only related to evidence-based national guidelines, protocols, and standards for managing major NCDs using a primary care approach and a national, population-based cancer registry. Implementing effective health policies in Bulgaria is essential for improving public health and reducing the probability of premature death in the country.

#### Keywords

Premature death • Non-communicable diseases • Health policy • Public health • Risk factors

6. **Georgieva S.**, Kamburova M., M.Un. *Analysis of the partnership for Health Promotion in Schools in Bulgaria*. Sanitas Magistrium, 2017, 3 (1), 5-14; ISSN: 2149-4738 – **10 т.**

#### Abstract

According to the concept of health promotion, health is a shared responsibility of individuals, the community, the state, and non-governmental organizations. Partnership offers great potential for addressing problems and achieving goals, but it is also associated with certain difficulties. Establishing a successful partnership requires common purpose, shared responsibilities, complementary competencies, collaboration, and mutual respect. The aim of this paper is to analyze whether partnership as a main principle of health promotion has been put into practice in the observed school community. A comprehensive medico-social survey on school health promotion was conducted from September 2012 to May 2013 over a representative sample of schools in the Pleven region of Bulgaria. Data were collected through a self-administered questionnaire among 1,280 members of the school community, interviews with school principals, and a review of the documents. Questions are directed toward the elements of the coordinated school health model. Data analysis of the presented part of the study, which examined the partnership for health promotion at school, was consistent with the methodology of the partnerships analysis tool using a specially designed checklist for evaluation. Over 90% of the investigated subjects and organizations realize the necessity of partnership. They have a clear goal to improve the well-being of the school community and a shared understanding that the benefits from partnership outweigh the exertions and costs. On the other hand, not all potential partners are included in the process of planning priorities for action. Almost half do not always have a clear idea about their responsibilities for fulfilling the goals. Both the positive and weak points of the partnership were able to be considered. The necessity for partnerships in promoting school health is recognized but difficult to transform into real action due to limited competencies and collaborations.



7. Г. Грънчарова, М. Камбурова, **С. Георгиева**, С. Александрова-Янкуловска, Д. Цанова. *Динамика на причините и рисковите фактори за глобалната тежест на заболяванията (1990-2015)*. Социална медицина, 2017, XXV, 1, 7-9. ISSN: 1310-1757 – **6 т.**

**Резюме.** Най-надеждният измерител на глобалната тежест на заболяванията е индикаторът „Години живот, съобразени с инвалидността“ (DALYs). Целта на настоящето проучване е анализ на динамиката на водещите рискови фактори и причини за DALYs в глобален план за периода 1990–2015 г. по данни от проведените в този период мащабни проучвания на Глобалната тежест на заболяванията (GBD). Установява се, че броят на DALYs не е променен значително въпреки нарастването на глобалното население. Значими промени обаче са настъпили в ранжирането на водещите причини и рискови фактори за DALYs. Сигнификантно нарастват хроничните неинфекциозни заболявания като причина за DALYs при намаляване на глобалната тежест на инфекциозните заболявания. Затвърждава се необходимостта от провеждането на адекватни обществено здравни политики за намаляване на DALYs поради предотвратими причини за смърт и инвалидизация.

**Summary.** The most reliable indicator for Global Burden of Diseases is Disability-adjusted life years (DALYs). This study aims to analyze the global trends in risk factors and leading causes of DALYs over the period 1990–2015 based on the large-scale studies of Global burden of diseases (GBD) carried out during this period. The number of DALYs remained almost unchanged even the increase of global population. Significant changes in ranking of leading risk factors for DALYs and increasing of non-communicable diseases and declining of infection diseases as a cause of DALYs has been occurred. The implementing of adequate public health policies to reduce the DALYs due to preventable causes of death and disability is necessary.

**Key words:** global health, global burden of disease, DALYs, non-communicable diseases, risk factors

8. **Георгиева, С.**, П. Стефанова, Н. Велева, М. Камбурова. *Анализ на разходите за здравнопромотивни и профилактични дейности на районната здравноосигурителна каса – Плевен*. Социална медицина, 2018, XXVI, №2, 24-27; ISSN: 1310-1757 – **7,5 т.**

**Резюме:** Националната здравна стратегия и планът за нейното реализиране подчертават, че ключ към подобряване на общественото здраве в България е промоцията на здравето, профилактика на болестите и активизиране на дейностите по едноименната политика. Целта на настоящата разработка е да анализира динамиката на разходите по политиката „Промоция, профилактика и контрол на общественото здраве“ в област Плевен за периода 2010-2017 година. Проведено е документално проучване и анализ на годишните отчети на Районната здравноосигурителна каса (РЗОК) – Плевен за обхванатия период. Област Плевен има най-висока в страната задоволеност с лечебни заведения и персонал в Плевен за обхванатия период. Област Плевен има отчетени по-ниски от средните за страната дейности по първичната здравна помощ (ПЗП). Въпреки това са отчетени по-ниски от средните за страната дейности по профилактични програми. Разходите на РЗОК – Плевен за ПЗП през изучавания период нарастват и се променя структурата им по видове дейности. Делът за капитационни плащания е намалял от 62% на 42.9%, а делът за диспансерно наблюдение е нараснал от 12.7% на 26.7%. Увеличили са се плащанията за профилактични прегледи на лица над 18 г., но леко е намалял делът на средствата по програмата „Детско здравеопазване“. Повишаването на паричните потоци за превантивни дейности в голяма част от случаите е свързано с увеличаване на единичната цена на прегледите и консумативите, а не на броя на извършените дейности.

**Summary:** The National Health Strategy and its implementation plan underline that the key to public health improvement in Bulgaria is the health promotion and disease prevention. The aim of the present study is to analyze the dynamics of expenditures on the policy “Promotion, prevention and control of public health” in Plevan region for the period 2010–2017. A documents review and analysis of the annual reports of the Regional Health Insurance Fund (RHIF) – Plevan was carried out. Plevan District has the highest coverage in the country with medical institutions and staff in primary health care (PHC). Nevertheless, lower than average for the country preventive activities were reported. The expenses of RHIF – Plevan for PHC during the observed period have increased. The structure of expenses by types of activities has changed. The share of capitation has decreased from 62% to 42.9%, dispensary monitoring increased from 12.7% to 26.7%. Payments for regular checkups of insured persons over 18 have increased, but the share of funds for the Child Health Program has slightly decreased. The increase in cash flows for prevention in most cases is related to an increase in the unit price of examinations and an increase in the cost of consumables rather than the number of activities.

**Key words:** disease prevention, health promotion, Regional Health Insurance Fund – Plevan



9. **Georgieva, S.,** M. Kamburova. *Comparative analysis between school health promotion model and characteristics of school health promotion in Bulgaria*. Management in Health, 2018, 22(4):10-13; ISSN: 2067-7561 – **15 т.**

**BACKGROUND:**

*Health promotion is a modern concept for public health improvement applied in different fields of community life. By the international network of Health promoting schools the school community acquires a main role to reach the potential of this concept.*

*The aim of this paper is to draw a parallel between the main principles of the concept and its actual fulfilment in Bulgarian school.*

**MATERIAL AND METHOD:**

*A comprehensive medico-social survey over representative sample of schools in Pleven district has been conducted. Data were collected by self-administered questionnaire among 78 school nurses, 30 health promotion experts, 279 teachers, 519 students, 374 parents; interview with school principals and documental review. Data analysis and interpretation were consistent with the concept of Health Promoting School.*

**RESULTS:**

*The study found safety school environment with strict control over its physical components. There is a necessity of better opportunities for sports and nutrition services in about of two thirds of schools. Over 90% of school staff and about two thirds of students report high level of stress which requires attention to the emotional and social well-being at school. A correlation between higher satisfaction of staff with their career and occupational settings and evaluation of school environment as safety has been established ( $p < 0.005$ ). School health education doesn't correspond with information needs of students according to 80% of the respondents. Behavior risk factors are widely distributed among students (48,2% tobacco smoking; 36,6% physical inactivity) and start at early age. There is positive attitude for family-school partnership but there are some difficulties to fulfill it.*

**CONCLUSION:**

*The study results like the international experience show both success and difficulties to put this concept into practice.*

*Keywords: behavior risk factors, health education, health promotion, school health promotion model*

10. **С. Георгиева.** *Промоция на здравето – иновативен подход за подобряване на общественото здраве*. Наука, 2019, XXIX, №2, 67-70; ISSN: 0861-3362 – **30 т.**

**HEALTH PROMOTION – AN INNOVATIVE  
APPROACH FOR PUBLIC HEALTH IMPROVEMENT**

**Stela Georgieva**

*Abstract*

*Health promotion is a concept and strategy which gives a new view point on dimensions and determinants of human health. The aim of this article is to discuss the essence and scope of Health promotion, its main principles and areas of practical application as an innovative approach for Public Health improvement.*

*Key words: health promotion, public health, Tannahil model for health promotion*

11. Георгиева, С., М. Камбурова, Д. Цанова. *Критични точки при достигане на целите за устойчиво развитие в България*. В: Нови подходи в общественото здраве и здравната политика – Плевен: Медицински университет - Плевен, 2020, стр. 133-137; ISBN: 978-954-756-254-7 – **10 т.**

### **Summary**

**Introduction:** United Nations Sustainable Development Goals (SDGs) for the period 2015-2030 set out a vision for a world free from poverty, hunger and disease. Health has a central place in SDG 3 “Ensure healthy lives and promote well-being for all at all ages”. All of the other goals however are also related to health or their achievement will contribute to health indirectly. The aim of this study is to emphasize on health-related indicators with the most unfavourable values or trends in our country for the study period.

**Material and Methods:** A descriptive study of health related indicators for the period 2015 – 2030 have been conducted using a statistical database of the Institute for Health Metrix and Evaluation, USA.

**Results:** Achievement of the sustainable development goals moves in a wide range - from 12 to 85%. With an overall index of 61% for 2020, Bulgaria ranks one of the last places among the European Union countries, as well as among the Balkan countries. Critical indicators that reduce the index of our country in achieving the sustainable development goals are widespread smoking (34.5%), increasing prevalence of alcohol consumption, high relative share of overweight children up to 4 years (30.1%) and high mortality due to circulatory diseases, cancer, diabetes and chronic pulmonary diseases in persons aged 30-70 years (517.4 / 100,000).

**Conclusion:** Bulgaria’s delay in achieving the sustainable development goals is the widespread prevalence of behavioural risk factors and the associated high morbidity and mortality from chronic non-communicable diseases.

**Key words:** sustainable development goals, Bulgaria, Health-related index



12. **Georgieva, S.,** M. Kamburova. *Workplace health promotion – risk groups and new challenges*. The Black sea journal of Medicine and Public health, 2021, Vol.2, p. 53-60; ISSN: 2738-8654 – **15 т.**

Black Sea Journal of Medicine and Public Health, ISSN: 2738-8654  
Vol. 2, 2021, 53-60

#### **ПРОМОЦИЯ НА ЗДРАВЕТО НА РАБОТНОТО МЯСТО – РИСКОВИ ГРУПИ И НОВИ ПРЕДИЗВИКАТЕЛСТВА**

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**Резюме:** Динамичните процеси при формиране на пазара на труда и работната сила в последните десетилетия пораждат нови предизвикателства в сферата на промоция на здравето на работното място. Целта на настоящата статия е да акцентира върху специфичните рискове и потребности на определени категории лица при осъществяването на професионална работа. Анализирани са статистически данни и литературни източници по проблема. Рискови групи, изискващи адаптиране на здравнопромотивните дейности на работното място с техните специфични потребности, са възрастните работници, поради ограничаване на физическите и функционалните възможности на организма; младите работници, поради липса на зрялост и професионален опит; жените, поради сложното съчетаване на репродуктивна и професионална роля; работници-мигранти и лицата с увреждания, поради дискриминиране при конкуренция за работни места, заплащане и др.

**Ключови думи:** промоция на здравето на работното място, рискови групи в работната среда, възрастни работници, работници-мигранти

#### **WORKPLACE HEALTH PROMOTION – RISK GROUPS AND NEW CHALLENGES**

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**Abstract:** Dynamic processes in formation of the labour market and labour force in recent decades give rise to new challenges in the field of workplace health promotion. The purpose of this article is to focus on specific risks and needs of certain categories of persons in carrying out professional work. Analysis of statistical data and literature sources on the problem was made. Main risk groups that require priority attention and adaptation of health promotion activities to the specific risks are as follow: older workers because of limitation of the physical and functional capabilities of the body; young workers because of lack of physical and mental maturity and professional experience; women because of complex combination of reproductive, professional and social functions; migrants, engaged in less skilled and unattractive work and people with disabilities because of discrimination in competition for jobs and pay, social exclusion, unadapted to their needs occupational environment etc.

**Keywords:** workplace health promotion, risk groups at workplace, older workers, migrant workers



13. Vasileva V., **S. Georgieva**. *Social significance of chronic kidney failure*. Black sea journal of Medicine and Public health. 2022, Vol. 2, pp. 262-267; ISSN: 2738-8654 – **15 т.**

Black Sea Journal of Medicine and Public Health, Vol. 1, 2021, No. 1, XX-XX

#### СОЦИАЛНА ЗНАЧИМОСТ НА ХРОНИЧНАТА БЪБРЕЧНА НЕДОСТАТЪЧНОСТ

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**Резюме:** Целта на настоящата статия е да проучи и анализира социалната значимост на хроничната бъбречна недостатъчност (ХБН) и факторите за нейното нарастване в световен мащаб и в България. Проучени са национални и международни бази данни и литературни източници по проблема. Данните сочат, че 9.1% (697.5 млн. души) от световната популация страда от ХБН, а България е една от най-засегнатите страни в Европа. Заболяването бележи нарастваща честота и се очаква до 2040 година да се превърне в петата най-честа причина в глобалната тежест на заболяванията. Потенциалните рискови фактори за развитие на ХБН - захарен диабет, високото артериално налягане, тютюнопушене и други са типични за рисковата констелация на съвременното общество. Популационното стареене и удължаването на живота на заболялите лица чрез метода на хемодиализа също благоприятстват тенденцията на нарастване. Това натоварва обществените фондове за здраве, поради високата цена на лечението и ограничаване на професионалната и социална роля на заболялите лица.

**Ключови думи:** социалнозначими заболявания, хронична бъбречна недостатъчност (ХБН), глобална тежест на заболяванията

#### SOCIAL SIGNIFICANCE OF CHRONIC KIDNEY FAILURE

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**Abstract:** The purpose of this paper is to explore and analyse the social significance of chronic kidney disease at their end stage (ESRD) and the factors for its increasing worldwide and in Bulgaria. National and international databases and literature sources on the problem have been studied. Data shows that 9.1% (697.5 million people) of the world's population suffers from ESRD. Bulgaria is one of the most affected countries in Europe. The disease has been rising and is expected to become the fifth most common cause of global burden of

disease by the year 2040. Potential risk factors of ESRD – diabetes, high blood pressure, smoking etc., are typical for modern society. Population aging, as well as prolonging patients' life through the method of haemodialysis, also favour the upward trend. This loads the public health funds because of high treatment cost and limiting professional and social role of affected persons.

**Keywords:** socially significant diseases, end stage of renal disease (ESRD), global burden of

14. Мирчев, С., С. Георгиева, М. Камбурова, А. Вълков, Г. Николов, А. Анов, А. Сеизов. *Проучване на студентско мнение относно полезността на симулационен 3Д модел на средното ухо за активно обучение на студенти*. В: Сборник доклади, Двадесетата юбилейна национална научна сесия за студенти и преподаватели, 2022, ИЦ на МУ-Плевен, стр. 260-269; ISBN: 978-954-756-301-8 – **4,29 т.**

**ABSTRACT:** According to experts in the field of education, it can be passive and active. Up to 50% of the information is absorbed through passive learning, which includes reading, listening and observation. Active learning, which adds verbal reproduction and builds a brain-hand connection, increases the information learned by up to 90%.

In the ENT clinic of MU-Pleven a conceptual design for a simulation 3D model for studying the difficult to learn anatomical structures of the middle ear has been created. Its prototype was demonstrated to the students and instructed and trained to work with it.

The aim of the present study is to analyze the opinion of students about the usefulness of the 3D model in the training of otorhinolaryngology and other clinical specialties. A direct group survey was conducted among 4th year students, AEO. The data was processed with the statistical program SPSS v.24. over 80% of the respondents believe that the 3D simulation model facilitates the study of the anatomy of the middle ear, contributes to the acquisition of lasting knowledge and spatial orientation in the anatomical structures.

**Key words:** 3D, Temporal bone, model

15. Камбурова, М., Р. Георгиева, С. Георгиева, Е. Минева-Димитрова. *Тежест на онкологичните заболявания в България и Европейския съюз – сравнителен анализ*. В: Сборник доклади, Шеста научна конференция на БНДОЗ „Общественото здраве: предизвикателства пред здравната система“, 2023, ИЦ на МУ-Плевен, стр. 131-137; ISBN: 978-954-756-335-3 – **7,5 т.**

**Introduction:** The Global Burden of Disease studies analyse data on premature death and disability from diseases and injuries. The profile of Bulgaria in studies on the Global Burden of Diseases contains comparative data for 2007 and 2019.

**The aim** of the study is a comparative analysis of the burden of the leading risk factors for/and oncological diseases in Bulgaria and the EU.

**Material and methods:** Secondary data from national and international sources were used: National Centre for Public Health and Analysis, Country Cancer Profile 2023, Eurostat.

**Results and discussion:** A higher prevalence of cancer risk factors such as smoking, alcohol consumption, overweight and obesity in Bulgaria, compared to the other EU member states, is found. Bulgaria is among the EU countries with the lowest coverage of screening programs for breast, cervical and colorectal cancer. The high differences in the participation levels of different socio-economic groups of the population being established.

Bulgaria has the lowest age-standardized incidence of oncological diseases in the EU – 458 per 100,000 people, and the death rate from oncological diseases is slightly below the EU average.

Bulgaria is the only EU country to report an increase in cancer mortality from 229/100,000 people in 2011 to 242/100,000 in 2019. The increase is higher for men (+8%) than for women (+5 %).

**Conclusion:** An urgent priority for the country is the adoption of a national cancer strategy, revealing existing trends and inequalities, and offering a comprehensive and sustainable approach to monitoring the quality of care.

**Keywords:** global burden of disease, cancer, strategy



16. Василева В., **С. Георгиева**. *Здравни грижи за пациенти с хронична бъбречна недостатъчност – исторически преглед*. В: Сборник доклади, Шеста научна конференция на БНДОЗ „Общественото здраве: предизвикателства пред здравната система“, 2023, Изд. център на МУ-Плевен, стр. 168-174; ISBN: 978-954-756-335-3 – **15 т.**

## ЗДРАВНИ ГРИЖИ ЗА БОЛНИ С ХРОНИЧНА БЪБРЕЧНА НЕДОСТАТЪЧНОСТ – ИСТОРИЧЕСКИ ПРЕГЛЕД

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### Резюме

**Въведение:** Социалната значимост на хроничните заболявания, и в частност на хроничната бъбречна недостатъчност (ХБН), нараства. Проучвания на глобалната тежест на заболяванията за последните три десетилетия показват преместването им от 14-то на 8-мо място, с тенденция до 2040 година те да се превърнат в петата най-честа причина за загуба на години продуктивен

живот поради преждевременна смърт и инвалидизация. Това поставя въпросът за оптимизиране на здравните грижи.

**Целта** на настоящото съобщение е исторически преглед на развитието на методите за лечение и здравни грижи за пациенти с ХБН.

**Материал и методи:** Направен е преглед и сравнителен анализ на литературни източници по проблема.

**Резултати:** Лечението и здравните грижи на пациенти с бъбречна недостатъчност може да бъде разгледано в два основни етапа – преди и след въвеждане на хемодиализата. Въпросът за очистване на кръвта от токсични вещества при ограничена функционалност на отделителната система възниква още в античността. Писмени данни за съществуването и лечението на нефрологичните заболявания се откриват в папируса на Ebers, съставен от около 1550 г. пр. Хр. Състоянието на пациентите се е облекчавало с прием на чайове и запарки от лечебни растения, горещи вани, процедури с изпотяване, диета, форсирана диуреза и клизми. С изобретяване и внедряване на диализата, лечението и грижите за пациентите с ХБН преминава на ново ниво и поставя нарастващи изисквания към задълженията на специалистите по здравни грижи за осъществяване на комплексна грижа със специфични отговорности и роли.

**Заклучение:** Методите за лечение и здравни грижи на ХБН са претърпяли революционно развитие от древността до днес и продължават да се усъвършенстват.

**Ключови думи:** здравни грижи, хемодиализа, хронична бъбречна недостатъчност

## HEALTH CARE FOR PATIENTS WITH CHRONIC KIDNEY FAILURE – A HISTORICAL REVIEW

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### Abstract

**Introduction:** Social significance of chronic renal diseases and particularly chronic kidney failure (CKF) have been increasing. Global Burden of Disease Survey over the last three decades shows they have moved from 14th to 8th place, with a trend to become the 5th most common cause of DALYs by the year 2040. This raises the question of optimizing health care.

The **aim** of this paper is to provide a historical overview of the development of treatment methods and health care for patients with CKF.

**Material and methods:** A review and comparative analysis of literary sources on the problem was made.



**Results:** The treatment and health care of patients with CKF can be considered in two main stages - before and after the implementation of haemodialysis. The question how to clean blood of toxic substances in case of limited functionality of the excretory system in the antiquity. Record of the treatment of renal diseases was found in the Ebers' Papyrus, compiled at about 1550 BC. Patients' condition was alleviated by taking tea and medical plants infusion, hot baths, sweating procedures, diet, forced diuresis and clysters [5]. With the implementation of dialysis, the treatment and care of patients with CKF moved to a new level and placed increasing demands on the health professional duties to implement complex care with specific responsibilities and roles [12, 13].

**Conclusion:** Treatment and health care methods of patients with CKF have undergone revolutionary development from antiquity to the present day and continue to be improved.



**Key words:** *chronic kidney failure, haemodialysis, health care*

17. **Стела Л. Георгиева.** *Работна среда и здраве – нови и нарастващи рискове, свързани с работата.* Eastern Academic Journal, 2023, Issue 2, pp. 1-10; ISSN: 2367-7384 – **30 т.**

*Eastern Academic Journal*

ISSN: 2367-7384  
Issue 2, pp. 1-10, August, 2023

## РАБОТНА СРЕДА И ЗДРАВЕ – НОВИ И НАРАСТВАЩИ РИСКОВЕ, СВЪРЗАНИ С РАБОТАТА

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**РЕЗЮМЕ:** В последните десетилетия настъпват интензивни промени във възрастовите, квалификационни и здравни характеристики на работещите, както и в условията на работната среда, организацията на работа и асоциираните с нея рискове. Това прави въпроса за опазване здравето на трудово активното население от първостепенна значимост за здравната и социалната политика във всяка една страна. Цел на разработката е анализиране на актуални проблеми и перспективи при формиране на професионалните рискове и представяне на обобщена картина на факторите и условията за техния контрол. Направен е преглед на литературни източници по темата и стратегически документи на Европейската агенция по здраве и безопасност при работа, Международна организация по труда, Световната здравна организация и други. Промяната на условията на живот и труд довежда до промяна на рисковете в работната среда и налага систематичното им наблюдение, събиране на информация и научни становища. В литературни източници и нормативни документи все по-често се срещат понятията „нови рискове“ и „нарастващи рискове“. Новите рискове са предизвикани от нови процеси, технологии, видове работни места, социални или организационни проблеми, които преди това не са съществували.

Съществуващи условия също може да се разглеждат като нови рискове, поради промени в общественото мнение или натрупване на нови научни знания. Нарастващите рискове са свързани с повишаване на вероятността за излагане на този риск поради увеличаващо се ниво на експозиция, нарастващ брой на експонираните лица, засилване въздействието на риска поради комбинация с други фактори, занижен контрол и др. Променящите се условия предполагат адаптиране на подходите за профилактика и промоция на здравето в професионални условия.

**Ключови думи:** нови и нарастващи рискове при работа, промоция на здравето на работното място, психо-социален стрес, работна среда и здраве

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ISSN: 2367-7384  
Issue 2, pp. 1-10, August, 2023

## **WORKING ENVIRONMENT AND HEALTH – NEW AND INCREASING RISKS ASSOCIATED WITH WORK**

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**ABSTRACT:** In recent decades, intensive changes in the age, qualification and health characteristics of workers have occurred, as well as in the conditions of the working environment, work organization and the risks associated with it. This makes the issue of protecting the working population health of primary importance for health and social policy in every country. The purpose of this paper is to analyze current problems and perspectives of occupational risks and to present a general picture of factors and conditions for their control. Literature sources on the subject and strategic documents of the European Agency for Health and Safety at Work, International Labor Organization, World Health Organization and others were reviewed. The change in living and working conditions leads to a change in the risks in the working environment and necessitates their systematic monitoring, collection of information and scientific opinions. The terms "new risks" and "increasing risks" are increasingly common in literary sources and regulatory documents. New risks are caused by new processes, technologies, types of jobs, social or organizational problems that did not exist before. Existing conditions may also be seen as new risks, due to changes in public opinion or the accumulation of new scientific knowledge. Increasing risks are associated with increasing probability of exposure, an increasing number of exposed persons, an increase in the impact of the risk due to a combination with other factors, lack of control etc. Changing conditions suggest adapting approaches to prevention and health promotion in occupational settings.

**Key words:** health at work, new and increasing risks at work, psychosocial stress, working environment, workplace health promotion

18. **Георгиева С., Б. Асенова, Л. Филипова.** *Ефекти на глобализацията върху здравето.* В: Сборник от доклади, Шеста научна конференция на БНДОЗ „Общественото здраве: предизвикателства пред здравната система“, 2023, Изд. център на МУ-Плевен, 124-130. ISBN 978-954-756-335-3 – **10 т.**

**ЕФЕКТИ НА ГЛОБАЛИЗАЦИЯТА ВЪРХУ ЗДРАВЕТО**

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**Резюме**

**Въведение:** Глобализацията представлява процес на нарастване на икономическите, социални, технически, политически и културни взаимовръзки и отношения между отделни страни, организации и хора. В зависимост от сферата, която засяга, глобализацията може да бъде икономическа, социална, културна, технологична. **Целта** на настоящия доклад е да анализира ефектите на глобализацията върху здравето и дейността на здравните системи.

**Материал и методи:** Контент анализ на литературни източници, бази данни, стратегии, документи от международни научни събития и срещи.

**Резултати и обсъждане:** Глобализацията предполага свърхексплоатация на природните ресурси и размиване на отговорността и контрола за опазването им. Вследствие на това възникват глобални екологични проблеми (глобално затопляне, замърсяване, намаляване на водните запаси) с негативно влияние върху здравето на големи групи от хора. Свободната търговия и бързото придвижване на хора на големи разстояния и извън националните граници, създава условия за епидемично и пандемично разпространение на заболявания и рискови експозиции. Глобализираният пазар на труда създава предпоставки за безработица и експлоатация на евтина работна сила, което довежда до икономическо и социално неравенство, а от там и задълбочаване на здравните неравенства. Подлагането на националните здравни системи на тройната тежест на инфекциозните, хроничните неинфекциозни заболявания и здравни проблеми, свързани с глобализацията (пандемии, медицински туризъм), води до тяхното прекомерно натоварване и

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**ШЕСТА НАУЧНА КОНФЕРЕНЦИЯ НА БНДОЗ  
„ОБЩЕСТВЕННОТО ЗДРАВЕ: ПРЕДИЗВИКАТЕЛСТВА ПРЕД ЗДРАВНАТА СИСТЕМА“  
МЕДИЦИНСКИ УНИВЕРСИТЕТ – ПЛЕВЕН, 26 - 27 МАЙ 2023 Г.**

нарастване на разходите за здраве. От друга страна глобализацията създава възможност за обединяване усилията на страните за постигане на глобална здравна сигурност.

**Заклучение:** Процесът на глобализация има подчертан ефект върху здравето, което дава основание да се говори за глобални проблеми на общественото здраве и за глобално здраве.

**Ключови думи:** глобализация, глобално здраве, здравни разходи, здравна система, тройна тежест на заболяванията

**HEALTH EFFECTS OF GLOBALIZATION**

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**Abstract**

**Background:** Globalization is a process of increasing economic, social, technical, political and cultural interconnections and relations between countries, organizations and people. Depending on the sphere it affects, globalization can be economic, social, cultural, technological. The **aim** of this paper is to analyse the effects of globalization on health and the health systems performance.

**Material and methods:** Content analysis of literary sources, databases, strategies, documents from international scientific events and meetings.

**Results and discussion:** Globalization implies an overexploitation of natural resources and a dilution of responsibility and control on their protection. As a result, global environmental problems arise (global warming, pollution, reduction of water resources) with a negative impact on the health of large groups of people. Free trade and the rapid movement of people over long distances and beyond national borders creates conditions for epidemic and pandemic spread of diseases and risk exposures. The globalization of labour market creates conditions for unemployment and the exploitation of cheap labour, which leads to economic and social inequality, and to deepening of health inequalities. Subjecting national health systems to the triple burden of infectious, chronic non-infectious diseases and health problems associated with globalization (pandemics, medical tourism), leads to their excessive burden and an increase in health costs. On the other hand, globalization creates an opportunity to unite the efforts of countries to achieve global health security.

**Conclusion:** The process of globalization has a pronounced effect on health, which gives reason to talk about global public health problems and global health.

**Key words:** globalization, global health, health expenditure, health system, triple burden of diseases



19. Камбурова, М., С. Георгиева, Д. Цанова. *Социални и здравни неравенства при разпространението на SARS-COV-2 (COVID-19) в България*. В: Нови подходи в общественото здраве и здравната политика, Плевен, 2020, 20-25. ISBN: 978-954-756-254-7

#### **Summary**

**Introduction:** Health inequalities are influenced by: social, economic, environmental factors or the conditions under which a person is born, grows up, lives, works and ages.

**Purpose:** The purpose of this report is to analyse the impact of health inequalities on the prevalence of SARS-CoV-2 in Bulgaria.

**Methods:** A critical review of the available scientific literature in connection with the spread of SARS-CoV-2 in the world and Bulgaria was made to August 25, 2020.

**Results:** In August 25, 2020, 15,386 people are affected by SARS-CoV-2 in Bulgaria (morbidity 2,217 per million), 4,326 are active cases, and 563 have died since the beginning of the pandemic (mortality 81 per million).

Certain groups of the population can be defined as vulnerable.

- Among the medical staff the cases are 845 (5.5%).

- The second largest outbreak are centres for the elderly people (Oreshets station, Kula) and family-type accommodation centres for children and youth with disabilities (Vidin).

- Workers in the garment industry are also vulnerable to the spread of COVID-19.

- People from the Roma ethnic group, migrants and refugees stand out as more affected than majority population. On August 25, 2020 in the centre for temporary accommodation of foreigners in the town of Lyubimets out of 19 surveyed 5 have positive samples.

**Conclusion:** At a time of crisis due to COVID-19, equal quality of health care services for protection and treatment must be provided to all in society, with a special focus on the most vulnerable groups.

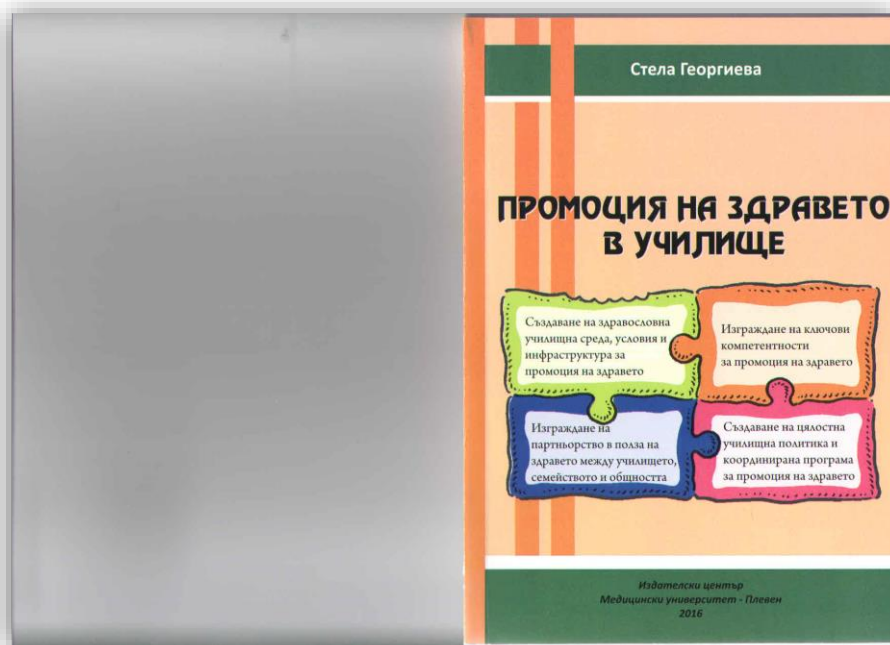
**Key words:** health inequalities, SARS-CoV-2, vulnerable groups

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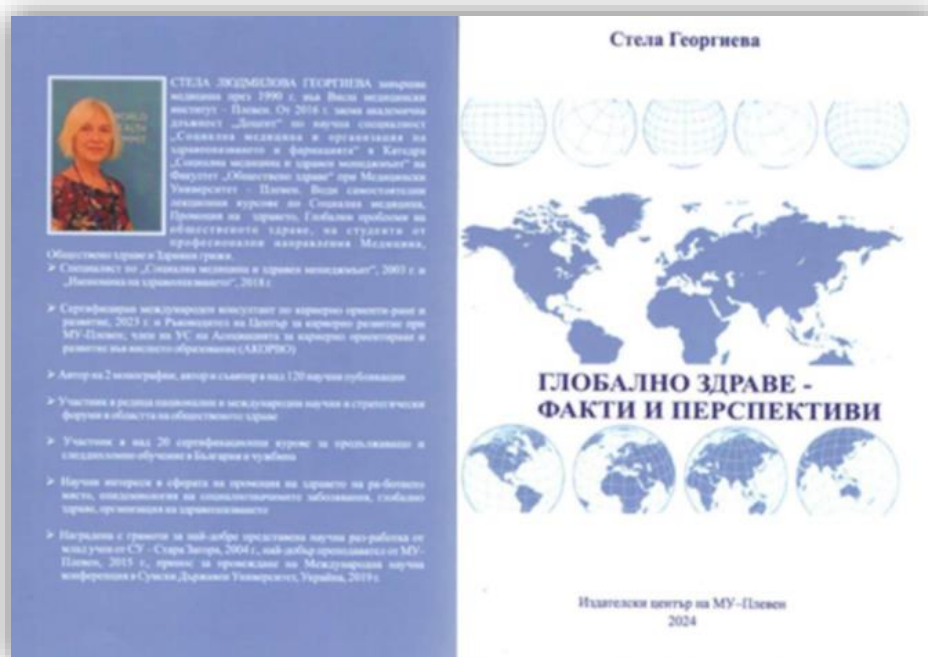
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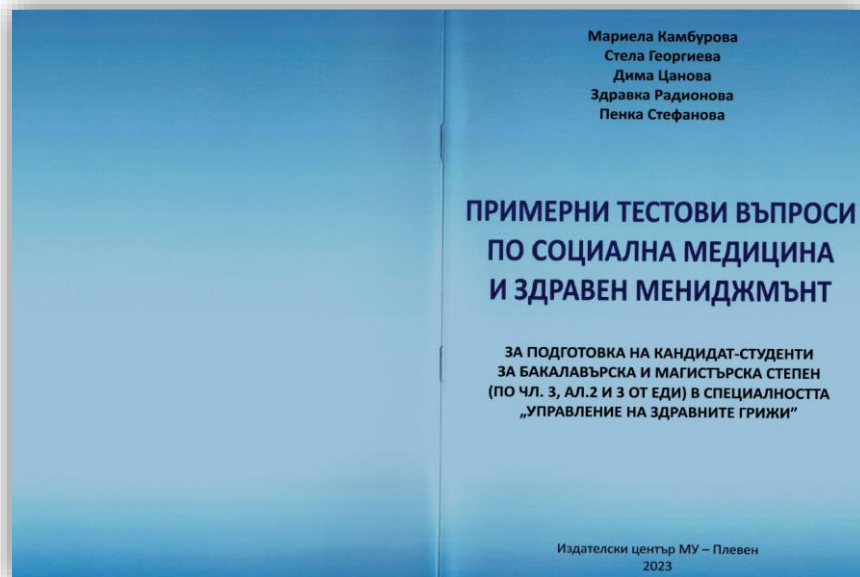
1. **Георгиева, С.** *Промоция на здравето в училище*. Плевен: Мед. унив., 2016, 127 с.; ISBN: 978-954-756-198-4



2. **Георгиева, С.** *Глобално здраве – факти и перспективи*. Издателски център на МУ-Плевен; Плевен, 2024; с. 201; ISBN: 978-954-756-338-4



3. Камбурова, М., **С. Георгиева**, Д. Цанова, З. Радионова, П. Стефанова. *Примерни тестови въпроси по социална медицина и здравен мениджмънт*. ИЦ на МУ-Плевен, Плевен, 2023, с. 41; ISBN:978-954-756-316-2



4. Камбурова, М., С. Георгиева, Д. Цанова, З. Радионова, П. Стефанова. *Учебно ръководство за практически занятия по социална медицина за студенти по медицина*. Издателски център на МУ-Плевен; Плевен, 2024, с. 165; ISBN 978-954-756-344-5

