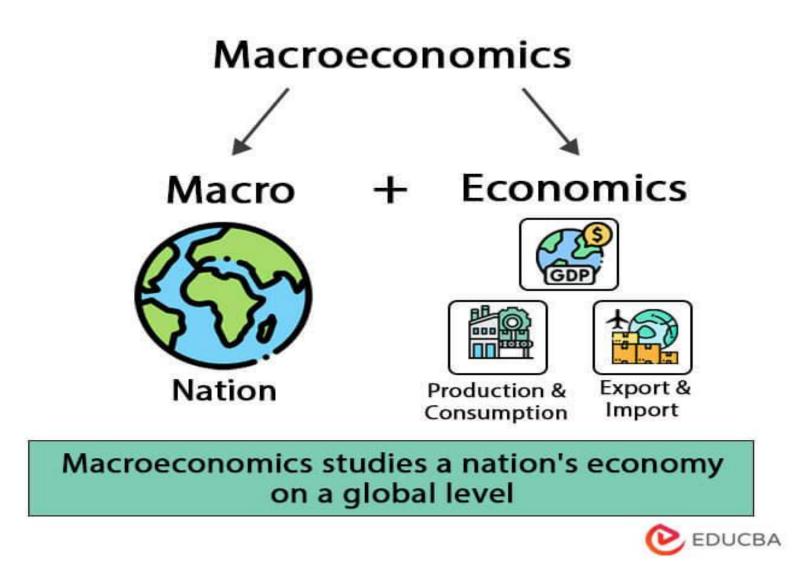




Healthcare Economic Terms: 2- NEED, WANT and DEMAND







The major Macroeconomic variables including:

- National <u>income</u>, الدخل القومي
- National <u>expenditure</u>, الإنفاق القومي
- <u>GDP</u> (Gross Domestic Product)
- General level of prices (inflation),
- <u>Unemployment</u> rates,
- Budget <u>deficits</u>, العجز في الموازنة
- الديون الخارجية Foreign <u>debt</u>



Macroeconomics

['ma-krō-,e-kə-'nä-miks]

A branch of economics that studies how an overall economy behaves. •In healthcare, the macroeconomic market is the <u>entire country's</u> <u>health care system</u> including the way that it performs in terms of <u>profit, loss and efficiency</u>.

•<u>Macroeconomics of health</u> is concerned with parallel sets of large – scale system issues concerning:

•Spending for <u>employment</u> and other <u>aspects of health</u> as part of the economy.

•**Biological health status**: life expectancy/ fertility/ productivity

- Microeconomics studies the decisions of individuals and firms to allocate resources of production, exchange, and consumption.
- Microeconomics deals with <u>prices and production in single</u> <u>markets</u> and the <u>interaction between different markets</u> but leaves the study of economy-wide aggregates to macroeconomics.

Microeconomics is the study of individual and business economic activity. Two examples are:

- An individual creating a budget to put themselves in a better financial position; and
- A business cutting costs تخفيض التكاليف in order to <u>maximize</u> <u>profit</u>

MICROECONOMICS

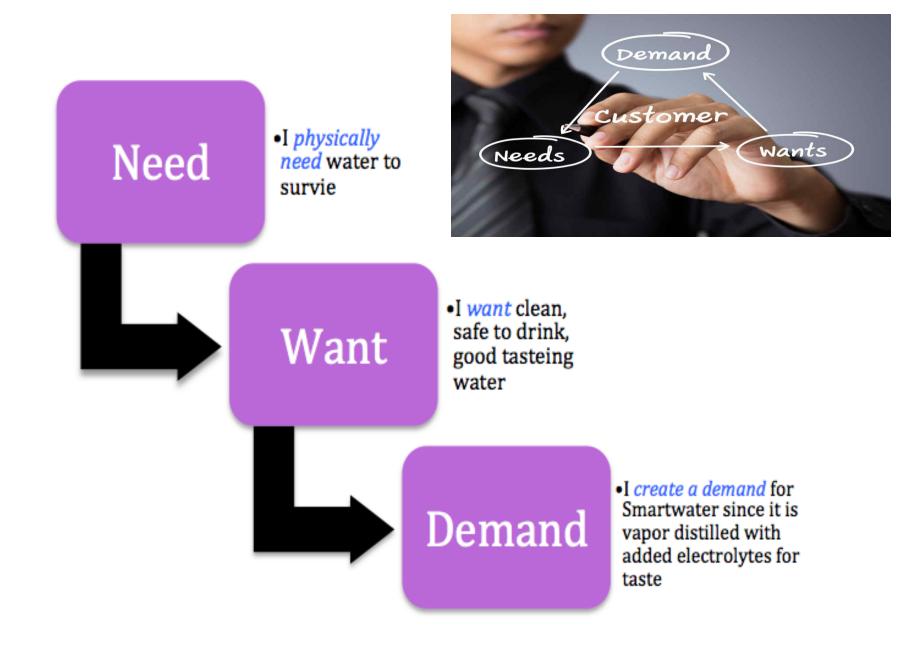
A study concluded that health care quality to an important degree depends on four institutional factors at the **microlevel** that strongly impact on health workers: 1. Performance, 2. career choice, 3. Which deserve **more** attention in applied research, and 4. Policy reform. اصلاح السياسات



Microeconomics

[mī-krō-,e-kə-'nä-miks]

The study of how individual actors make choices in response to changes in incentives, prices, resources, and/or methods of production.



Difference Between Needs, Wants & Demands



NEED

The basic requirements for human beings to survive.

Ex: Food, Shelter, etc.



WANT

Need when shaped by culture and individual personality becomes want.

Ex: Owning a basic car or a two-wheeler



DEMAND

When backed by buying power, want becomes a demand.

Ex: Owning a BMW or Audi



<u>Need</u> : This is often thought of as a **physiological or biological** requirement for <u>maintaining life</u>, such as the need for air, water, food, shelter, and sleep.

Physiological needs should be contrasted with psychological wants that make life more enjoyable but are not necessary to stay alive.

Examples of a "need":

Include basic medical service, educational programs, assistance in obtaining food, shelter, clothing, transportation, heat and job training. Needs are distinguished from <u>wants</u> because a deficiency would

cause a clear negative outcome, such as dysfunction or death.

How are such needs satisfied?

There are broad categories **basic needs**":



1.Adequate nutritional food and water 2. Adequate protective **housing** 3.A safe environment for working 4.A supply of **clothing** 5.A safe physical environment 6.Appropriate health care 7.Security in childhood 8.<u>Economic</u> security 9.Safe **birth control** and child-bearing 10.Appropriate basic education

NEEDS VS WANTS

NEEDS

Basic needs refer to the requirements that are essential for an individual to survive and function optimally. Without satisfying these needs, an individual's health, safety, or well-being may be compromised.

WANTS

Wants are desires or aspirations that individuals seek to attain or possess, often driven by personal preferences or societal influences. Unlike needs, wants are not crucial

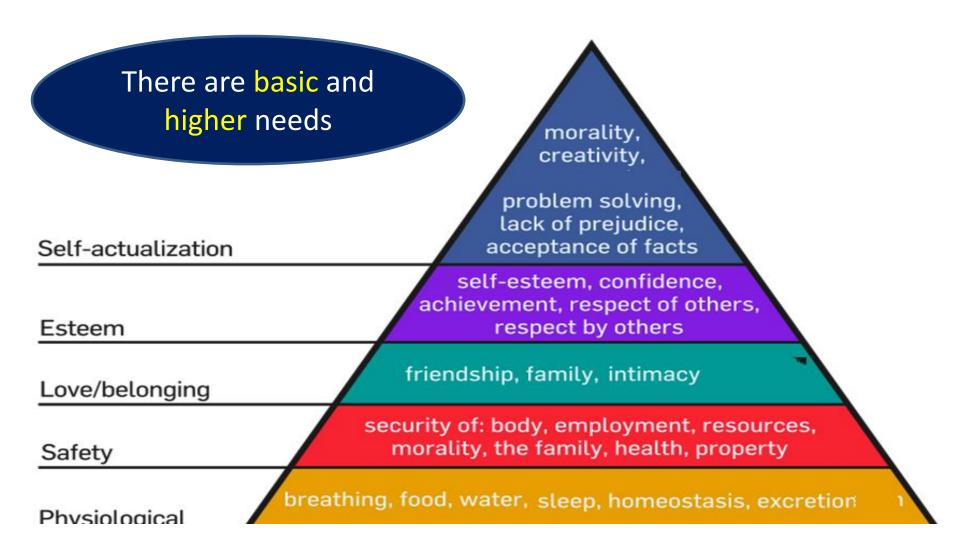
for achieving our goals but add comfort, pleasure, or luxury to one's

life. They are often influenced by cultural, social, or individual tastes and can change over time.

Maslow's hierarchy of needs:

He proposed that people have a hierarchy of psychological needs,

which range from security to self-actualization



Demand is the **ability and desire to pay** for goods and services. If there is a high demand, the for-profit sector, governments will supply those wants .

Demand refers to how much (<u>quantity</u>) of a product or service is desired by buyers or consumers.

The quantity demanded is the amount of a product people are willing to buy at a certain price; the relationship between <u>price</u> and <u>quantity</u> demanded is known as the <u>demand relationship</u>

In general, demand reflects :

- Population health needs,
- Their ability to pay for service utilization
- Availability of services to be used.

Demand

Objectively observable as behavior in the market. Money is a key factor. "Demand" is also called "effective demand," because it's expressed only by spending money.

- Health is treated as a store which <u>degrades</u> يتدهور over time in the absence of "<u>investments</u>" in health, so that health is viewed as a sort of wealth.
- Investment in health is <u>costly</u>

Need versus demand...

- Health plans that focus on need and ignore demand will face under- or overutilization of service capacity
- If one believes quantity demanded is too little or too much (e.g. under-use or overuse of emergency room) relative to need, then quantity demanded must be manipulated by changing,
 - price or other costs to buyer, or
 - demand through marketing or de-marketing

A model of demand for medical care...

- According to Michel Grossman, consumers have a demand for health for two reasons:
 - سلعة استهلاكية – Health is a **consumption** commodity—it makes the consumer **feel better**

سلعة استثمارية

 Health is an investment commodity—a state of health will determine the amount of time available to the consumer for productivity

Grossman's demand model...

- According to this model every one inherits a stock of health when born
- Health depreciated overtime, however an investment is required to sustain health
- As peoples' age advances there is an increase in rate of illness and in the utilization of health services.
- The stock of health can be sustained by investment to maintain health., such as use of health services and health promoting activities

Grossman's demand model...

- A view of medical care demand being derived from the demand for health implies the following:
 - increase in age result in an increase in the rate at which the person's stock of health depreciates
 - Over the life cycle people will attempt to offset part of the increased rate of depreciation in their stock of health by increasing their expenditure on health

التعويض عن طريق زيادة الانفاق الصحي

 the demand for medical care will increase with increases in person's income Quantity demanded is negatively related to price. This implies that the demand curve is downward sloping (holding ALL other variables constant)

قانون الطلب Law of Demand

—The *law of demand* states that, the <u>quantity (q)</u> demanded of a good falls when the <u>price (p)</u> of the good rises

Demand Schedule

The *demand schedule* is a <u>table</u> that shows the relationship between the <u>price</u> of the good and the quantity <u>demanded</u>.

Market Demand Schedule	
Price (\$)	Quantity Demanded (units)
5.00	610
10.00	460
15.00	350
20.00	270
25.00	220
30.00	180
35.00	150

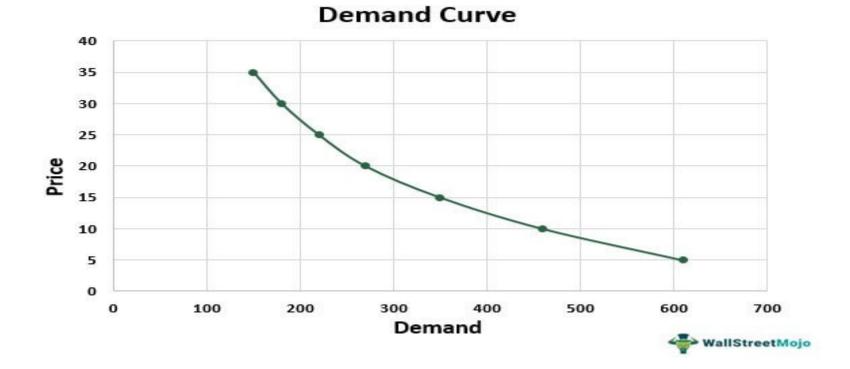
Market Demand		
Schedule		
Price of a	Number	
Small	demanded	
Soda	per day	
\$0.25	890	
\$0.50	500	
\$0.75	480	
\$1.00	470	
\$1.25	410	
\$1.50	350	
\$1.75	280	
\$2.00	240	
\$2.25	200	
\$2.50	150	
\$2.75	100	

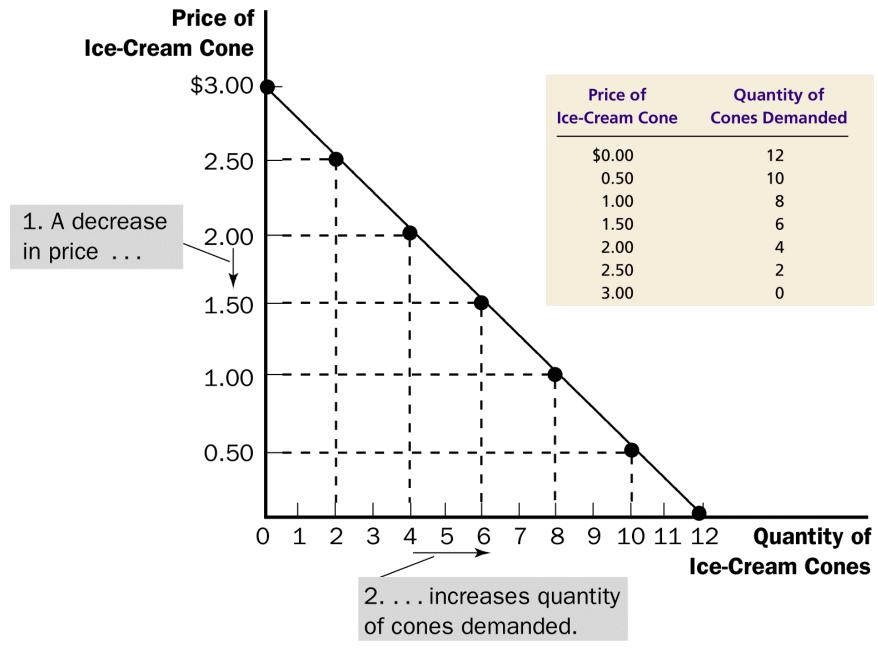
Dr. Omnia Elmahdy

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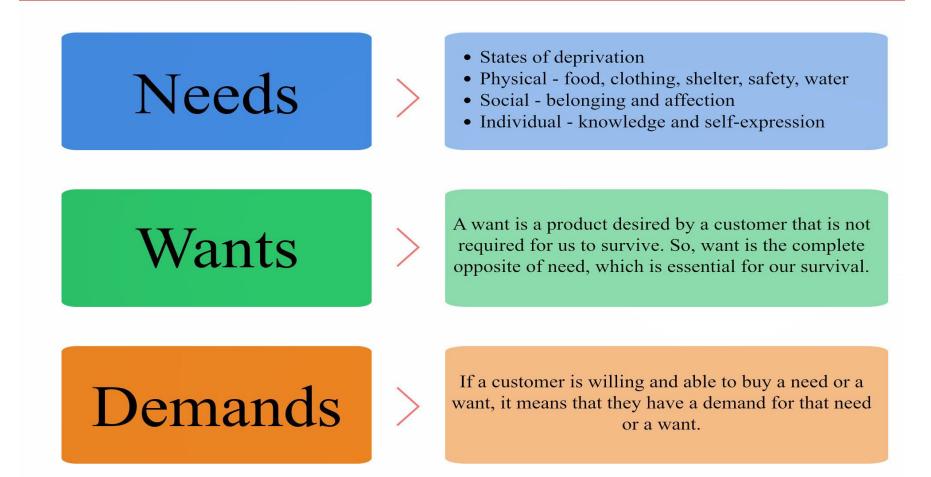
Demand Curve

 The *demand curve* is a <u>graph</u> of the <u>relationship</u> between the <u>price</u> of a good and the <u>quantity</u> demanded.





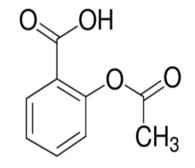
Understanding The Concept of Needs, Wants and Demands



بدائل Substitutes

- Other goods or services which satisfy the same wants or provide the same characteristics
- E.g;
 - Doctor versus general practitioner
 - Generic and brand name medications
 - Private and public hospitals
- If the generic medication decreases in price, demand for brand name will decreases





How can we reduce the quantity of smoking demanded in the population ?









Dr. Omnia Elmahdys Heart Isse

How can we reduce the quantity of smoking demanded

1. Public service <u>announcements</u>, mandatory health <u>warnings</u> <u>on cigarette packages</u>, and the <u>prohibition</u> of cigarette <u>advertising</u> on television are policies designed to <u>reduce the</u> <u>demand for cigarettes</u>.

 <u>Raising the price</u> of cigarettes (through tobacco taxes) lowers the quantity of cigarettes demanded

- 3. Studies have shown that a 10% increase in the price of cigarettes causes a 4% reduction in the quantity of cigarettes demanded. For teens a 10% increase in price leads to a 12% drop in quantity demanded.
- 4. Studies have also shown that a <u>decrease in the price</u> <u>of cigarettes</u> is associated with <u>greater use of</u> <u>marijuana</u>. Thus, it appears that tobacco and marijuana are <u>complements</u>.