

# Romania

The OECD Patient-Reported Indicator Surveys (PaRIS) is a groundbreaking initiative that fills a critical gap in health data by measuring the health outcomes and care experiences of people. This is an essential piece of information still lacking: the views of those directly concerned by health services – the patients – about their experience with the healthcare system and the outcomes as reported by them. By capturing the perspectives of over 107 000 people across 1 800 primary care practices in 19 countries, PaRIS provides an internationally comparable assessment of how outcomes and experiences of primary care users aged 45 years and older vary across countries and how healthcare systems deliver the care people with chronic conditions need.

As the global population of people living with chronic conditions continues to grow, the need for healthcare systems to adapt to their needs has never been more urgent. PaRIS plays a crucial role in informing this shift by offering data that supports the reorganisation of healthcare around the care experiences and health outcomes that matter most to people. Unlike disease-specific assessments, PaRIS takes a broader approach, measuring how healthcare impacts people's lives across various dimensions. This comprehensive perspective has the potential to revolutionise the way we assess the performance of healthcare systems on a global scale.

PaRIS findings emphasise the need for more people-centred and co-ordinated care, especially for the 80% of primary care users aged 45 years and older that live with at least one chronic condition and the 50% that live with multiple (two or more) chronic conditions. Targeted policies are essential to address inequalities, enhance care co-ordination, and build trust in healthcare systems. Encouraging patient involvement in care decisions and fostering strong relationships with healthcare professionals can lead to better health outcomes, greater trust in the system, and increased confidence in managing their own health. At the same time, a well-staffed healthcare workforce and primary care practices organised around people's needs are key to achieving improved patient outcomes and experiences.

This country note leverages the main findings of the publication, *Does Healthcare Deliver: Results from the Patient-Reported Indicator Surveys (PaRIS)*, to provide a focused assessment for Romania. Drawing on the analysis of the ten key patient-reported outcome and experience measures used in the survey (Table 1), it explores findings in the Romanian context and compares them to the OECD PaRIS average. The OECD PaRIS average is the simple average of the 17 OECD member countries participating in PaRIS.

### Box 1. Key findings – Romania

- **Less than half (43%) of people with chronic conditions in Romania report good general health**, which is below the OECD PaRIS average of 66% and 50 percentage points lower than the highest-performing country (93%).
- **Nearly half (52%) of people with chronic conditions in Romania report good physical health**, as measured by physical function, pain, and fatigue. This is below the OECD PaRIS average of 70%.
- In Romania, **78% of people with chronic conditions report good care co-ordination** and **93% report good person-centred care**. These results place Romania among the top-performing countries in these areas.
- **About two out of five (42%) people with chronic conditions in Romania feel confident managing their own health**, which is below the OECD PaRIS average of 59% and 50 percentage points lower than the highest-performing country (92%).
- **Relatively few (7%) of people with chronic conditions in Romania are confident in using health information from the internet**, compared to the OECD PaRIS average of 19% (range of 5-34%).
- **Less than one out of five people (15%) with two or more chronic conditions in Romania are managed in primary care practices that schedule follow-up and regular consultations of more than 15 minutes**; this is more than 32 percentage points lower compared to the OECD PaRIS average of 47%.
- **Only 5% of people with chronic conditions are managed in practices that can exchange medical records electronically**, which is low compared to the OECD PaRIS average of 57%.
- **Half (52%) of people with chronic conditions in Romania trust their healthcare system**, which is below the OECD PaRIS average of 62%.

### How well does Romania deliver care to people with chronic conditions?

In Romania, people with chronic conditions have better experiences of care co-ordination compared to the OECD PaRIS average. Experiences of person-centred care, care focusing on patient's needs, and experienced good quality of care are around the OECD PaRIS average. People in Romania have poorer health outcomes in general compared to the OECD PaRIS average, except for well-being, which is comparable to the OECD PaRIS average (Chapter 2). This assessment is based on the 10 key patient-reported outcome measures (PROMs) – *physical health, mental health, social functioning, well-being and general health* and patient-reported experience measures (PREMs) – *confidence to self-manage, experienced co-ordination of care, experienced person-centred care, experienced quality of care and trust in healthcare system* (Figure 1).

**Figure 1. PaRIS 10 key indicators**

Percentage of people with one or more chronic conditions reporting positive outcomes or experiences



Note: For all indicators, percentage values are shown, measuring the percentage of people reporting a positive outcome or experience (for example, patients reporting being in good, very good or excellent general health). See Table 1, for more information on the cutoffs for positive responses and the scales used. Highest (lowest) represents the highest (lowest) values found for each indicator among 17 PaRIS countries  
Source: OECD PaRIS 2024 Database.

In Romania, people living with chronic conditions are less likely to have good health outcomes compared to the OECD PaRIS average (Figure 1):

- Nearly half (52%) of people with chronic conditions in Romania report good **physical health**, as measured by physical function, pain, and fatigue. This is below the OECD PaRIS average of 70%. It is also 30 percentage points lower than the highest-performing country (82%).
- Three-quarters (75%) of people with chronic conditions in Romania report good **mental health**, which refers to quality of life, emotional distress, and social health. The same percentage of people (75%) in Romania report good **social functioning**, which measures how well people carry out their usual social activities and roles. These measures are below the OECD PaRIS average of 83% and 18 percentage points lower than the highest-performing country for both indicators (93%).
- Nearly two-thirds (65%) of people with chronic conditions in Romania report positive **well-being**, which reflects mood, vitality, and fulfilment. This is below the OECD PaRIS average of 71% and 15 percentage points lower than the highest-performing country (80%).
- Slightly more than four out of ten (43%) people with chronic conditions in Romania report good **general health**, which is significantly below the OECD PaRIS average of 66% and 50 percentage points lower than the highest-performing country (93%), placing Romania among the lowest-performing countries.

Romania performs well on care co-ordination and person-centred care, care focusing on patient's needs, while experienced good quality of care is comparable to the OECD PaRIS average (Figure 1). However, levels of confidence in self-management, and trust in the healthcare system are relatively low:

- About two out of five (42%) people with chronic conditions in Romania feel **confident managing their own health**, which is below the OECD PaRIS average of 59% and 50 percentage points lower than the highest-performing country (92%).
- Nearly four out of five (78%) people with chronic conditions in Romania report good **care co-ordination**, which is above the OECD PaRIS average of 59% and just 3 percentage points lower than the highest-performing country (81%).
- More than nine out of ten (93%) people with chronic conditions in Romania report good **person-centred care**, care focusing on patient's needs, which is above the OECD PaRIS average of 85% and only 4 percentage points lower than the highest-performing country (97%).
- Four out of five (80%) people with chronic conditions in Romania report **experiencing good quality of care**, which is below the OECD PaRIS average of 87% and 17 percentage points lower than the highest-performing country (97%).
- Just over half (52%) of people with chronic conditions in Romania **trust their healthcare system**, which is below the OECD PaRIS average of 62%.

**Table 1. PROMs and PREMs in PaRIS**

<b>Patient-Reported Outcome Measures (PROMs)</b>	
Physical health	Response to four questions measuring physical function, pain and fatigue, response options scale of 1-5. Average score of patients. Raw scale 4-20 converted to T-score metric in which 50 is the mean and 10 the standard deviation of the PROMIS reference population. T-score range of 16.2-67.7. Percentage of patients reporting positive outcome (T-score of 42 or more, equivalent to being in “good” physical health or better, as compared to “fair” or “poor” health, based on PROMIS reference population) shown in Figure 1. Data instrument: PROMIS® Scale v1.2 – Global Health scale.
Mental health	Response to four questions on quality of life, emotional distress and social health, response options scale of 1-5. Average score of patients. Raw scale 4-20 converted to T-score metric in which 50 is the mean and 10 the standard deviation of the PROMIS reference population. T-score range of 21.2-67.6. Percentage of patients reporting positive outcome (T-score of 40 or more, equivalent to being in “good” mental health or better, as compared to “fair” or “poor” health, based on PROMIS reference population) shown in Figure 1. Data instrument: PROMIS® Scale v1.2 – Global Health scale.
Social functioning	Response to question: “In general, please rate how well you carry out your usual social activities and roles [further specified in questionnaire]”, response options range from poor (1) to excellent (5). Percentage of patients that responded good, very good or excellent (compared to fair or poor). Data instrument: PROMIS® Scale v1.2 – Global Health scale.
Well-being	Response to five questions measuring well-being (have felt cheerful and in good spirits, calm and relaxed, active and vigorous, fulfilled in daily life, fresh and rested), response options scale of 0-5. Average score of patients (raw scale 0-25 converted to 0-100 scale) Percentage of patients reporting positive outcome (score >=50, indicating not at risk of clinical depression) shown in Figure 1. Data instrument: WHO-5 Well-being Index.
General health	Response to question: “In general, would you say your health is ...” where response options range from poor (1) to excellent (5). Percentage of patients that responded good, very good or excellent (as compared to fair or poor) Data instrument: PROMIS® Scale v1.2 – Global Health scale.
<b>Patient-Reported Experience Measures (PREMs)</b>	
Confidence to self-manage	Response to question: “How confident are you that you can manage your own health and well-being?”, response options range from not confident at all (0) to very confident (3). Percentage of patients that are confident or very confident (compared to somewhat confident or not confident at all). Data instrument: P3CEQ Questionnaire.
Experienced co-ordination	Response to five questions measuring care co-ordination (care joined up, single named contact, overall care plan, support to self-manage, information to self-manage). Response options scale of 0-3. Average score of patients (on a scale of 0-15). Percentage of patients reporting positive experience (scored 50% or more across 5 questions, i.e. scale score >=7.5) shown in Figure 1. Data instrument: P3CEQ Questionnaire, data available only for people with chronic condition/s.
Person-centred care	Response to eight questions measuring if care is person-centred (discussed what is important, involved in decisions, considered “whole person”, no need to repeat information, care joined up, support to self-manage, information to self-manage, confidence to self-manage). Response options scale of 0-3. Average score of patients (on a scale of 0-24). Percentage of patients reporting positive experience (scored 50% or more across 8 questions, i.e. scale score >=12) shown in Figure 1. Data instrument: P3CEQ Questionnaire, data available only for people with chronic condition/s.
Experienced quality	Response to question: “When taking all things into consideration in relation to the care you have received, overall, how do you rate the medical care that you have received in the past 12 months from your primary care centre?”, response options scale of range from poor (1) to excellent (5). Percentage of patients that responded good, very good or excellent (compared to fair, poor, and not sure). Data instrument: Adapted from Commonwealth Fund International Health Policy Survey.
Trust in healthcare system	Response to question: “How strongly do you agree or disagree that the healthcare system can be trusted?”, response options range from strongly disagree (1) to strongly agree (5). Percentage of patients that agree or strongly agree (compared to neither agree nor disagree, disagree, strongly disagree). Data instrument: Based on OECD Guidelines on Measuring Trust and similar to questions in selected national surveys.

Source: See Chapter 2 for more details.

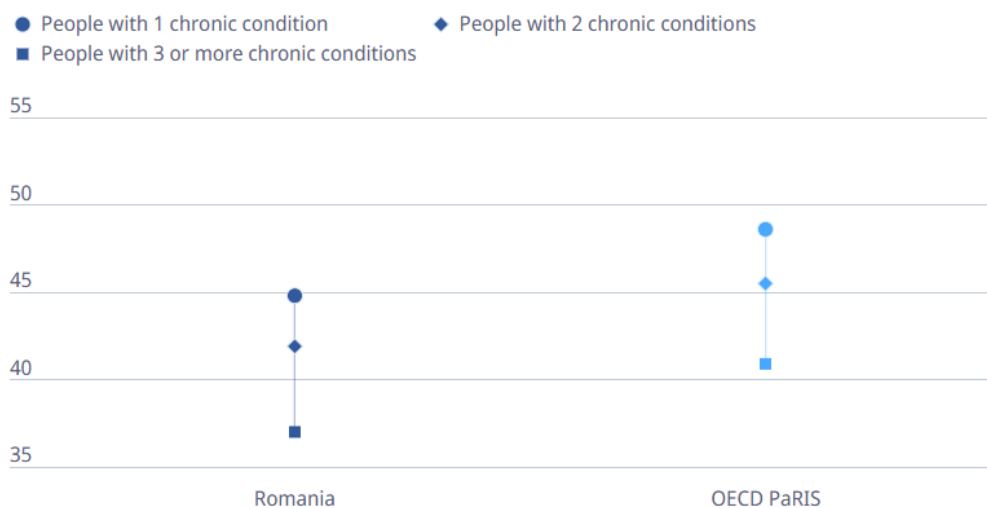
### **People with multiple chronic conditions report below-average health outcomes**

People living with multiple chronic conditions report lower levels of physical and mental health, well-being and social functioning compared to those who live with one chronic condition (Chapter 3). This pattern is consistent with other countries. Specifically:

- In Romania, people with three or more chronic conditions are less likely to report good levels of health compared to those with two chronic conditions. This pattern is consistent with other countries' results.
- People living with multiple chronic conditions in Romania have poorer physical health compared to those living with one chronic condition with an eight-point difference, a pattern consistent with the OECD PaRIS average. However, the physical health scores for people with one, two, or three or more chronic conditions are lower than the OECD PaRIS average (Figure 2). For example, the average physical health scores of people in Romania with two and three or more chronic conditions are below the good-fair cut-off point (42), while the OECD PaRIS average for people with two chronic conditions is above this cutoff.

**Figure 2. Physical health for people with one, two and three or more chronic conditions**

Average PROMIS physical health T-score



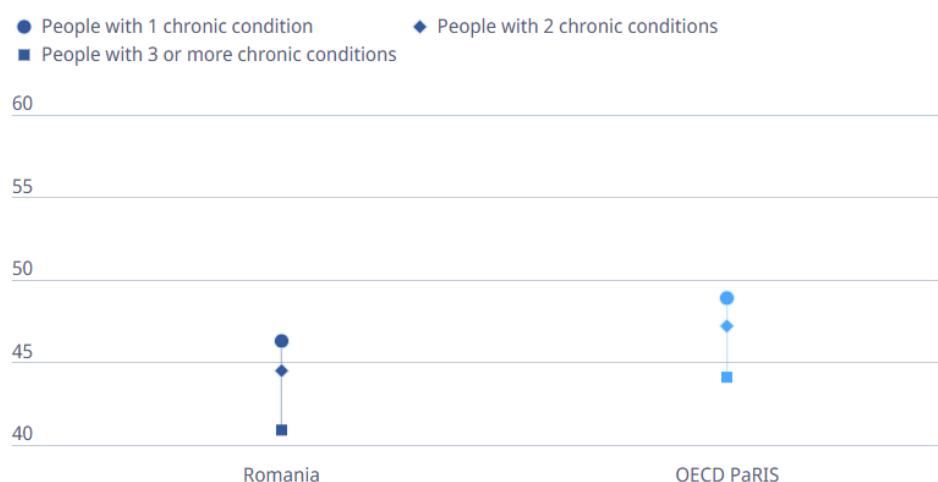
Note: OECD PaRIS average is calculated based on the data from participating OECD member countries. PROMIS® Scale v1.2 – Global Health component for physical health is a T-score metric with a range of 16-68, and a good-fair cutoff of 42, higher values represent better physical health.

Source: OECD PaRIS 2024 Database.

Similarly, Romania performs below the OECD PaRIS average regarding the mental health of people living with one, two, and three or more chronic conditions. People with three or more chronic conditions in Romania report poorer mental health than those with one chronic condition with a five-point difference, and it remains below the OECD PaRIS average (Figure 3).

### Figure 3. Mental health for people with one, two and three or more chronic conditions

Average PROMIS mental health T-score

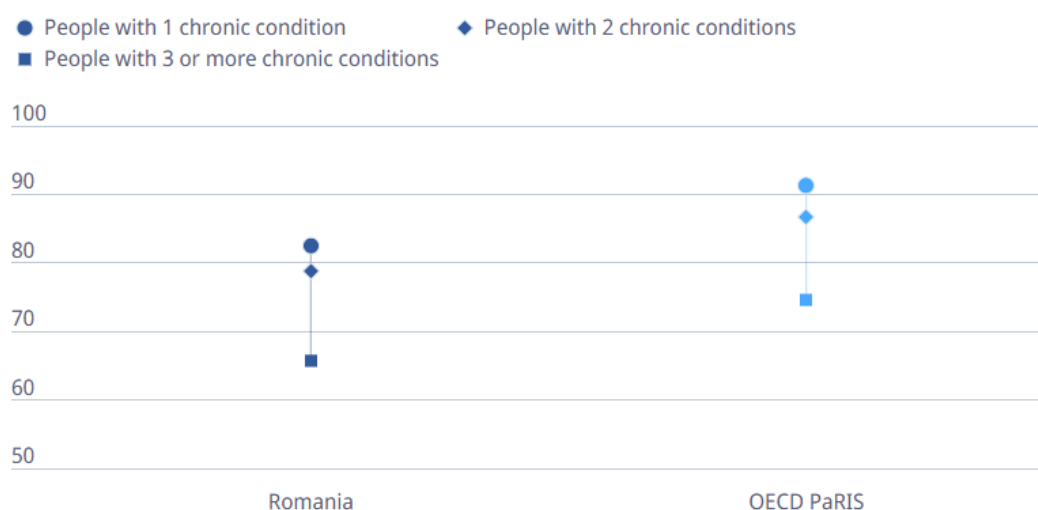


Note: OECD PaRIS average is calculated based on the data from participating OECD member countries. PROMIS® Scale v1.2 – Global Health component for mental health is a T-score metric with a range of 21-68, and a good-fair cutoff of 40, higher values represent better mental health. Source: OECD PaRIS 2024 Database.

As in other countries, in Romania, people with multiple chronic conditions less often report good social functioning than people with one chronic condition (Figure 4). While 83% of people with one chronic condition in Romania have good social functioning, this goes down to 66% of people with three or more chronic conditions, which is below the OECD PaRIS average.

### Figure 4. Social functioning for people with one, two and three or more chronic conditions

Percentage of people reporting good, very good, or excellent social functioning



Note: OECD PaRIS average is calculated based on the data from participating OECD member countries. PROMIS® Scale v1.2 – Global Health item on social functioning. Percentage of patients that responded good, very good or excellent (as compared to fair or poor) to the question: “In general, please rate how well you carry out your usual social activities and roles [further specified in questionnaire]”. Source: OECD PaRIS 2024 Database.

### **Romania performs close to the average in primary care features, except for scheduled time for consultation**

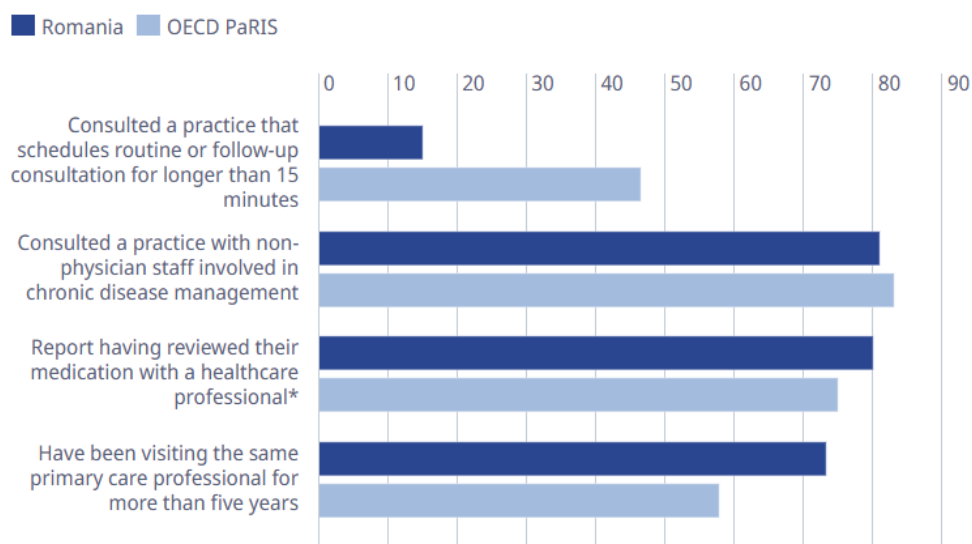
Primary care consultation features associated with higher levels of experienced quality care are related to time, both time-scheduled for regular, follow-up consultations, and length of relationship with the same primary care professional (Chapter 3). The role of staff other than physicians supporting the management of people with chronic conditions also plays a role in improving healthcare delivery for people with multiple chronic conditions (Chapter 3). Systematic medication reviews for people with multiple chronic conditions can enhance medication safety, efficacy and care co-ordination.

Romania performs close to the average in primary care features, except for scheduled time for consultation (Figure 5):

- Less than one out of five people (15%) with two or more chronic conditions in Romania are managed in primary care practices that offer follow-up and regular consultations of more than 15 minutes; this is low compared to the OECD PaRIS average of 47%.
- In Romania, more than four out of five people (81%) with two or more chronic conditions are managed in primary care practices where non-physician staff is involved in chronic disease management; this is similar to the OECD PaRIS average of 83%.
- Four out of five people (80%) with three or more chronic conditions in Romania report that their medication was reviewed by a healthcare professional over the past 12 months; this is about 5 percentage points higher than the OECD PaRIS average of 75%.
- About three out of five people with two or more chronic conditions (73%) in Romania report being with the same primary care professional for more than five years; this is 16 percentage points above the OECD PaRIS average.

### **Figure 5. Primary care delivery for people with multiple chronic conditions**

Percentage of people with two or more chronic conditions



Note: OECD PaRIS average is calculated based on the data from participating OECD member countries. \*Results for patients with three or more chronic conditions reporting their medication was reviewed by a healthcare professional over the past 12 months.

Source: OECD PaRIS 2024 Database.

### **Romania demonstrates strengths in patient support but significant challenges in co-ordination, digital health literacy, and electronic medical record exchange**

People-centred care, healthcare systems addressing the needs of people, is an essential indicator of the quality and performance of healthcare systems and primary care practices (Chapter 4). PaRIS data show that a people-centred approach that prioritise strong patient engagement and effective care co-ordination, is associated with enhanced health outcomes and patient experiences. This approach is particularly beneficial in managing chronic conditions, as it empowers patients to actively participate in decisions about their health.

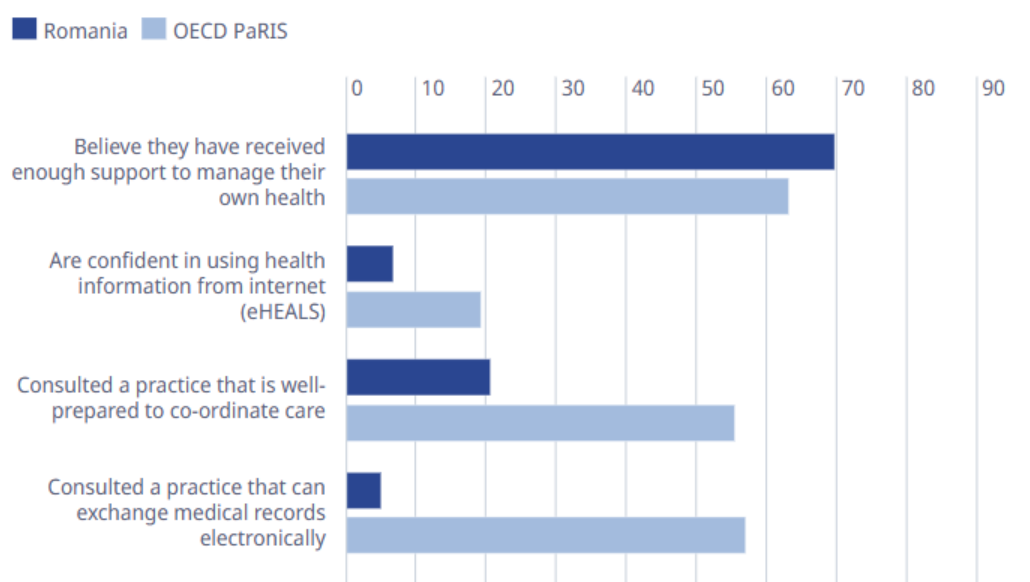
Romania demonstrates mixed performance compared to the OECD PaRIS average on several indicators of people-centred care, (Figure 6):

- Around 70% of people with chronic conditions in Romania receive enough support to manage their own health, above the OECD PaRIS average of 63%.
- Romania has low digital health literacy, with 7% of people with chronic conditions reporting confidence in using health information from the internet, compared to the OECD PaRIS average of 19% (range of 5-34%).
- Only 21% of people with chronic conditions are managed in primary care practices that report being well-prepared to co-ordinate care, which is below the OECD PaRIS average of 56%.
- A mere 5% of people with chronic conditions are managed in practices that can exchange medical records electronically, which is below the OECD PaRIS average of 57%.

These results highlight Romania's strengths in providing patient support but reveal challenges in care co-ordination, digital health literacy, and electronic medical record exchange in primary care settings.

**Figure 6. Co-production, co-ordination and use of digital tools in primary care**

Percentage of people with chronic conditions



Note: Results for people with one or more chronic conditions matched to a practice. Co-production: Patient receiving enough support and confidence in using health information from the internet (eHEALS) are reported by patients. Co-ordination: Patients managed in practices well prepared to co-ordinate care and that can exchange medical records electronically are reported by patients and participating primary care practices. OECD PaRIS average does not include the United States for practice-level indicators.

Source: OECD PaRIS 2024 Database.

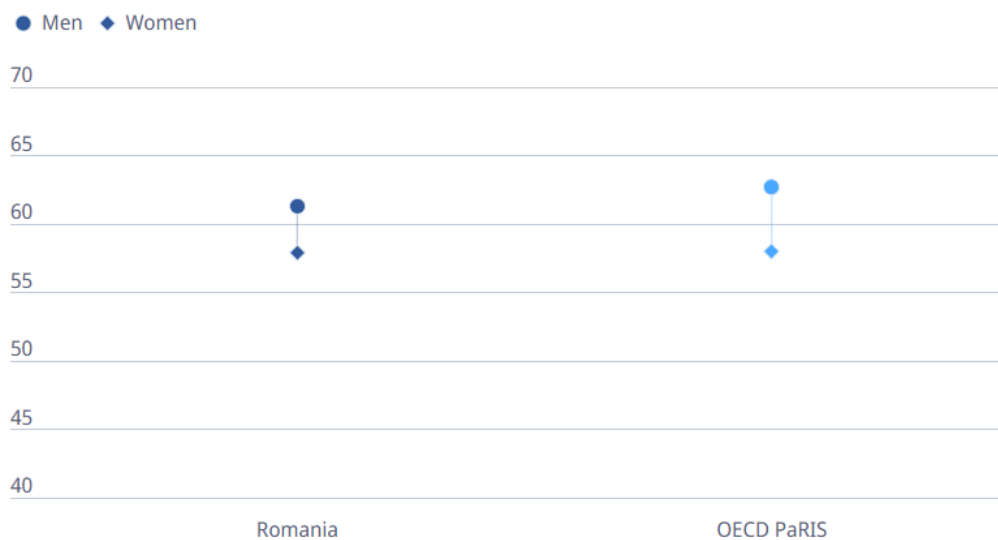
***There are inequalities in well-being between genders and income levels in Romania, while trust levels are almost equal***

Among people with chronic conditions, there are differences in well-being across genders in Romania, with lower levels for women, while differences in trust in the healthcare system are small (Figure 7 and Figure 8).

- The gender gap in well-being in Romania is comparable to the OECD PaRIS average (5 points). This gender gap mirrors results for other countries.
- While about 53% of men in Romania have trust in the healthcare system, 49% of women have trust in healthcare. These results for trust are lower than the OECD PaRIS average for men (67%) and women (58%).
- The gender gap in trust in Romania (4 percentage points) is the smallest among the OECD PaRIS countries and is not statistically significant.

**Figure 7. Well-being reported by men and women**

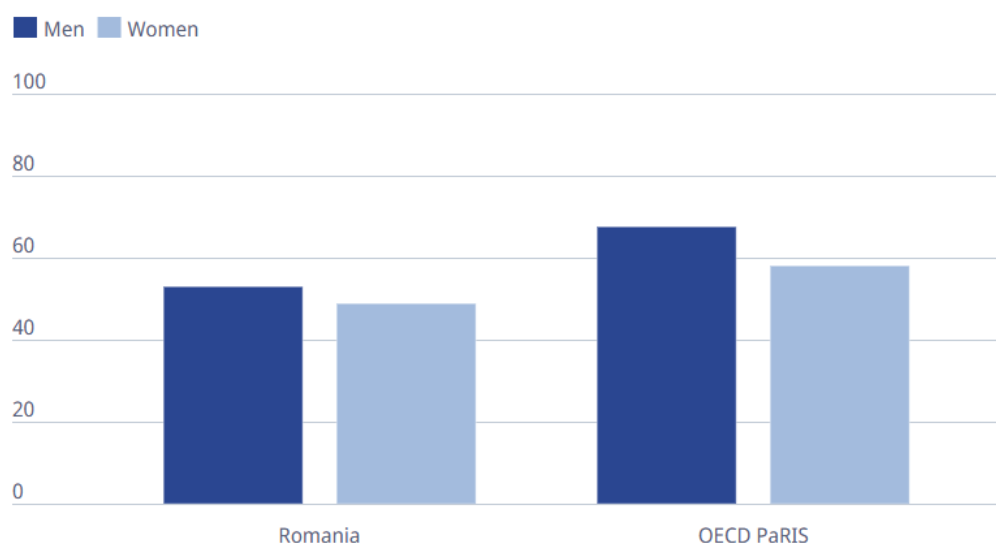
Average well-being index for people with chronic conditions



Note: OECD PaRIS average is calculated based on the data from participating OECD member countries. WHO-5 well-being index. Response to five questions measuring well-being. Raw scale 0-25 converted to 0-100 scale with 0 being the lowest possible well-being and 100 the highest. Source: OECD PaRIS 2024 Database.

## Figure 8. Trust in healthcare system reported by men and women

Percentage of people with chronic conditions reporting trusting the healthcare system



Note: OECD PaRIS average is calculated based on the data from participating OECD member countries. Trust in healthcare system: Response to question: “How strongly do you agree or disagree that the healthcare system can be trusted?”, “strongly agree, agree” versus “neither agree nor disagree, disagree, strongly disagree”.

Source: OECD PaRIS 2024 Database.

As in other OECD countries, people with chronic conditions and higher incomes report higher levels of well-being, while trust levels are almost equal (Figure 9 and Figure 10):

- Across OECD PaRIS countries, people with higher incomes report about 13% better well-being than those with lower incomes. While people with higher and middle income levels report better well-being than the OECD PaRIS average, well-being of people with lower income levels are comparable to the OECD PaRIS average, resulting in a relatively wide gap between income groups in Romania.
- In Romania, almost six out of ten people with chronic conditions (56%) with higher incomes trust the healthcare system, compared to 54% of people with lower incomes. These trust levels are below the OECD PaRIS average for both high- and low-income groups.
- The gap in trust in healthcare systems between high- and low-income groups in Romania (3 percentage points) is the smallest difference among the OECD PaRIS countries and is not statistically significant.

**Figure 9. Well-being by income level**

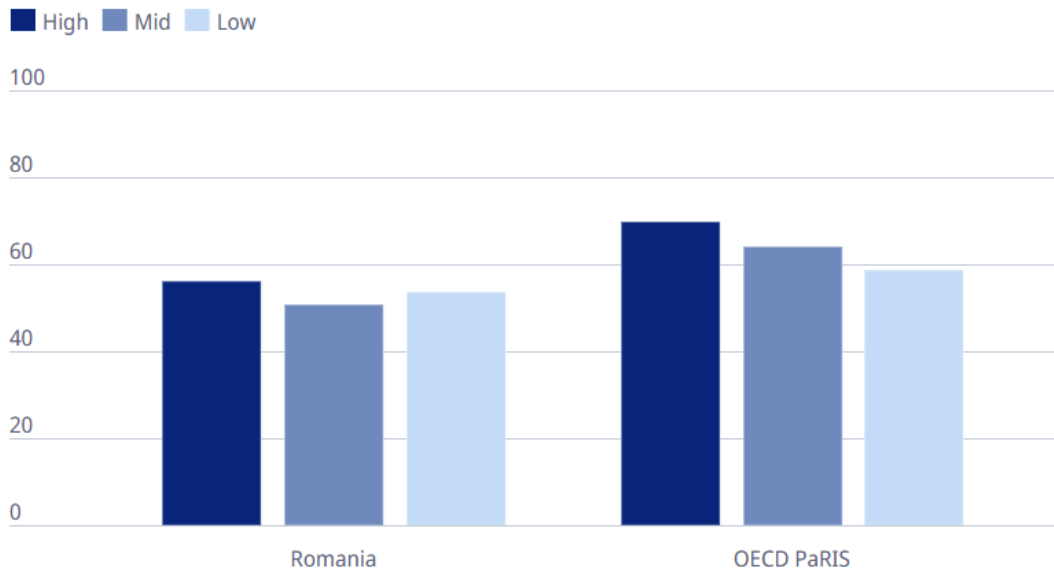
Average well-being index for people with chronic conditions



Note: OECD PaRIS average is calculated based on the data from participating OECD member countries. WHO-5 well-being index. Response to five questions measuring well-being. Raw scale 0-25 converted to 0-100 scale with 0 being the lowest possible well-being and 100 the highest. Source: OECD PaRIS 2024 Database.

**Figure 10. Trust in healthcare system reported by income level**

Percentage of people with chronic conditions trusting the healthcare system



Note: OECD PaRIS average is calculated based on the data from participating OECD member countries. Trust in healthcare system: Response to question: “How strongly do you agree or disagree that the healthcare system can be trusted?”, “strongly agree, agree” versus “neither agree nor disagree, disagree, strongly disagree”. Source: OECD PaRIS 2024 Database.

## Key features of PaRIS

### PaRIS at a glance

PaRIS contains information on patient-reported outcomes and experience measures as well as health behaviours and capabilities, sociodemographic characteristics from patients and primary care practice characteristics information from healthcare providers. The data collection took place in 2023-24 and first results were released in the publication, *Does Healthcare Deliver: Results from the Patient-Reported Indicator Surveys (PaRIS)*.

Results span 107 011 primary care users (aged 45 years and older) and 1 816 primary care practices in 19 countries: Australia, Belgium, Canada, Czechia, France, Greece, Iceland, Italy, Luxembourg, Netherlands, Norway, Portugal, Romania, Saudi Arabia, Slovenia, Spain, Switzerland, the United States and Wales (United Kingdom). All results in this country note are age-sex standardised to adjust for the different demographic profiles of the countries. In Figure 1, highest (lowest) represents the highest (lowest) values found for each indicator among 17 PaRIS countries. In Italy and the United States, eligibility criteria for patient participation differed from the guidelines, therefore, these countries are not included in this figure. For detailed information on national sampling procedures and other methodological details, see Chapter 7 of the report.

Results from Romania are based on 1 277 patients and 128 primary care practices. Patients were selected by probability sampling from the National and District Health Insurance Patient Registry. Primary care practices were selected by probability sampling from the National and District Health Insurance General Practitioner Registry.

In Romania, primary care practices responded to the questionnaire online. Patients responded to the questionnaire online and via paper-and-pencil surveys.

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**The full book is available in English:** OECD (2025), *Does Healthcare Deliver?: Results from the Patient-Reported Indicator Surveys (PaRIS)*, OECD Publishing, Paris, <https://doi.org/10.1787/c8af05a5-en>.

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