



## REVIEW OF DIPLOMA THESIS

**Review type:** Supervisor's Review

**Author of the diploma thesis:** Wang Ren

**Title:** Chinese Healthcare System in Welfare State Typology

**Author of the review:** Zuzana Kotherová

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The thesis topic relates to the welfare state typology from health care perspective in China. The topic of welfare state is well known but, in this case, the topic may be seen as original and inspirative because the Chinese health system is not much discussed in Europe. This choice of country of interest makes - in my eyes - the thesis innovative.

The thesis' purpose is to figure out what type of welfare typology works in China. The aim is set as „Chinese health care system through comparative welfare state typology, specifically the decommodification principle proposed by Esping-Andersen (2019) and health care decommodification index put forward by Bambra (2006). “(Introduction)

To fulfil this aim, the author is asking three research questions: (1) Which indicators are relevant for the Chinese health care system classification?; (2) What's the status quo of the health care system in China? and (3) Which welfare state group does China belong to in comparison with 18 OECD countries around the world? (Introduction)

The text is structured into four main chapters:

- In the Theoretical background part, the author presents different approaches used in social state typology and decides to use the Esping-Andersen and Bambra approaches. He presents the three Esping-Andersen models and the Bambra decommodification index used to cover the provision of health services. I find this part well organised, and I do think the author explains the main features of both Esping-Andersen and Bambra approaches adequately, he was able to find suitable literature and he shows that he studied it – even if it was possible to discuss it more deeply. I would be happier if the author discusses also other health care system classifications.
- In the methodological part the author explains his choice of the research design, he decides to use the quantitative content analysis to present the Chinese healthcare system and qualitative approach to assess in which group the Chinese system belongs to. I think that it was a sensible choice. I am aware that this part was the most difficult for the author and even if the deeper description of chosen approaches might have been done, I think that the methodology is sufficiently presented and explained.



- The third chapter gives the overview of the healthcare system in China, the author explains how the system is organised, financed, who is involved, etc. I find this part well done, the reader has the possibility to discover the Chinese system and to compare it with European systems. Once again, I can imagine presenting the Chinese healthcare system more in detail but for me, this part represents a real added value.
- The final part is the centre of the thesis, the author applies the Bambra's healthcare decommodification index to analyse the healthcare system in China. The text is logically arranged and leads to the final chapter in which the results are presented. Based on his results, the author classifies China in terms of health care system in the medium decommodification group.

In summary, the diploma thesis fulfils its aims, and the research questions are answered. The author proves that he can find literature, analyse it and apply the theoretical findings. The structure is clear and logic. Stylistic, text editing and language is adequate for a diploma thesis, with some minor problems. For sure, the scope of the thesis could have been much deeper and broader. For this, the author would need more time to work on it, the timeline for this thesis was very severe. This is also why we opt for this thesis design. I appreciate very much that the author made a enormous progress between the first and second thesis, he worked hard, he consulted regularly and was motivated to submit a thesis of better quality – and I think, he was successful in it.

Possible question for the defence:

Based on your results, the public health care system coverage in China is 96,4%. At the same time, you mention that the out-of-pocket payments remain too high in China. It seems a bit controversial to me – may you explain please?

**For the above reasons, I recommend the diploma thesis for the defense.**

**My grading is "D".**

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