



## COMPARISON OF TURKEY WITH DEVELOPED COUNTRIES IN TERMS OF HEALTH MANAGEMENT PROFESSION\*

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### ABSTRACT

**Objective:** This study was conducted to compare the current state of health management profession in Turkey in accordance with the state in developed countries in the direction of the opinions of the experts.

**Materials and Methods:** In this study carried out by using qualitative research method, phenomenology design was utilized. In the survey conducted by face-to-face interview technique, participants' graduation from health management departments was determined as a criterion. A total of 12 health management graduates were interviewed. Participants consist of 4 professors, 2 associate professors, 4 assistant professors and 2 heads of civil society organizations. The obtained data were collected by using face-to-face interview technique and voice recorder. In the analysis of the data, "thematic analysis" which is one of the qualitative data analysis methods and "Nvivo" program which is one of the qualitative data analysis programs were used.

**Findings:** When looking at the result part of the research, the answers given by the experts in the question "What can you say when you compare our country with the developed countries in terms of health management profession?" were analyzed. When the answers given by the experts to this question are analyzed, four themes were found: "occupational status", "management style", "health management policies" and "health management education".

**Conclusion:** In terms of "Health Management Education" which is one of these four themes, it is seen that the opinions of experts comparing the healthcare profession in our country and the situation in developed countries are collected in two different groups. In the first group, they argued that the health care profession in our country is not even different from Europe and America, even better. In the second group opinion, it is emphasized that healthcare management education in Turkey is bad in terms of quality. In this theme, expert opinions were given under the five headings as "Education quality", "practical education", "branching", "curriculum" and "grade of education".

**Key Words:** Health Management, Education Quality, Health Management Policies

### 1. INTRODUCTION

Health sector is a sector with specific characteristics, dynamics and problems. The organizations taking place in this sector have the duties such as using highly advanced and intensive technologies, employing a number of member of profession from different professional titles, and meeting the needs of the people having various desires and expectations with the limited resources for making them satisfied (Tengilimoğlu, et al., 2014: xii). In addition, either internal environment or external environment of health sector is quite dynamic, and a rapid change is experienced in the environment. In the cases, in which the number of environmental factors is a lot, change rapid is more, and complexity degree is

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more; that uncertainty degree is also high is an ordinary result (Ülgen and Mirze, 2013: 102). For health organizations to be able to keep in step with this change process, to develop the proper strategies against changes, and to reach targets, it is necessary for them to be managed professionally. In many of the developed countries, the resource share of health sector corresponds to the part of 8 to 15% of the country economy. This rate is more than the share of education, and of even the sectors such as agriculture, information, tourism, and telecommunication, which take place in the largest industries (Smith and Walshe, 2011: 1-2). In managing such a large sector, there is a need health manager. The positive effects of managing health organizations by professional managers on the institutes are considerably more. Among these, that the resources allocated to institutes are efficiently used; that resource waste is prevented; that an increase occurs in the institutional and personal performances; that the motivations and job satisfaction of the employees increase; that the security of patient and employee is positively affected; and that health indicators improve can be counted. Three are the most important two reasons underlying the problems experienced related to health. These are insufficient financing and deficiency of raised manager cadre. That enough efficiency cannot provide in some policies executed or that those presenting service or those taking service cannot be adequately satisfied are associated with the managing cadres is a known reality. Therefore, one of the ways overcoming the problems of interest is to raise and employ the managers having a modern management approach and having full knowledge of business management (Batirel, 1997, cited by: Hayran and Sur, 1997).

## 2. MATERIAL AND METHOD

Qualitative research is defined as an “approach toward discovering and understanding the meanings attributed by the individuals or groups to a social or human problem” (Creswell, 2013: 4). In qualitative studies, each study carried out includes an idiosyncratic study design and sort of analysis (Yıldırım and Şimşek, 2008: 43). In this study process, phenomenology design among designs of qualitative study was used. This method is a qualitative study designs used for obtaining detailed information regarding the perceptions of the participants about a certain phenomenon (Lester, 1999: 1). In this study, the case of **Comparing Turkey with the Developed Countries in terms of the Profession of Health Management** was attempted to be identified by qualitative study technique in the direction of the specialists’ view. Qualitative studies are more flexible compared to quantitative study. It is possible to obtain more detailed information from the person interviewed with. The different data collecting methods can also be used in qualitative studies (Punch, 2005: 142). This case makes it easy to take deeper information from the specialists. In analyzing the data of the study, thematic analysis, one of qualitative analysis method, and Nvivo” program, one of qualitative data analysis, were used. In thematic analysis method, researcher is focused on searching for common codes and themes among the data he/she obtains (Gibbs, 2007: 48). The themes formed were determined by taking the views of academics who are specialists in their domains.

In phenomenology studies, data resources consist of the people or groups, who experience the phenomenon, on which the study is focused and who can reflect this phenomenon (Yıldırım and Şimşek, 2006: 74). Since the phenomenon, focused in the study, is the current situation and future of the profession of health management, the people who can express this phenomenon was considered to be the academics in the field and representatives of non-governmental organizations. Hence, while the sample of the study is determined, some criteria were determined. The criteria used are: becoming the graduate of health management department and executing the duty of headship of department or becoming the graduate of health management department and taking charge in a non-governmental organization in his/her field. In the study process, 15 specialist health managers meeting the specified criteria were made a direct connection and an appointment was demanded from them. 3 specialists rejected appointment demand due to time limitation. A nickname was assigned for each of 12 participants including in the study. While assigning names, according to the data of General Directorship of Population and Citizenship Affairs, the most preferred names in 2014 were used. 10 of participants are men, and 2 of them are women. When examined in terms of title, it is seen that 4 professors, 2 associate professors, and 4 assistant professor, and 2 NGO heads are included in the study. Participants continue their current duties with the times varying between 2 to 10 years.

### 3. FINDINGS

In this part, the answers given by the specialists to the question “When we compare our country with the developed countries in terms of the profession of health management, what can you say?” raised to the participants were evaluated. The answers given by the specialists were examined by collecting them under 4 themes as “professional status”, “management style”, “health management policies”, and “health management education” (Figure 1).



**Figure 1:** Comparison with the Developed Countries

As seen in Figure 1, when the profession of health management in Turkey is compared with the developed countries in the direction of the specialists’ view, the conclusion that it can be compared through 4 themes turned out. These are “professional status”, “management style”, “health management policies” and “health management education”. Among these four themes, the subheadings belonging to the theme of “Health Management Education”, can be explained as follows:

#### ➤ Educational Quality

In this section, the views of specialists related to the quality of the education of health profession management were evaluated. Some part of the specialists expressed that there was no difference between health management education in Turkey and education abroad. Professor Emre among specialists reported a view as follows:

“When evaluated in terms of educational quality, I think that there is no significant difference between the education in Turkey and abroad.” I clearly express that when we make a comparison with abroad, almost all programs are significantly inadequate in terms of the quality of education given in Turkey. Most of instructors in the school are not interested in this area. They don’t know anything about the courses (Professor İbrahim).

#### ➤ Applied Education

While the specialists interviewed with emphasize that application was necessary, they state that the applications abroad were different. The views of some specialists explaining this state is as follows:

It is necessary for us to give ear to the voice of sector. We should be benefitted from the educational possibilities, especially internship and practices, they will present to us. We have deficiencies about this subject. Abroad, these things are improving at a little better points (Professor Eymen).

Now, educational duration is varying for example, postgraduate education takes 3 years. The students take courses in two years of this duration. In the last year, they enter a place,

wherever it is in USA, in which they themselves determine as a salaried employee. When the duration expires, they return to their departments. They present the information they acquire during internship as a report to internship committee (Professor Zeynep).

#### ➤ **Curriculum**

In this subtheme, it is demanded from the specialists to evaluate the issue whether or not there is difference between the course curriculum instructed to students in health management departments in Turkey and curriculum in Europe and America. According to this, Professor Elif saying that the curriculum instructed in the departments of health management in Turkey is formed by utilizing European curriculum stated the following points: *“There was no difference in the curriculum program until the last ten years. We had already prepared a curriculum based on the programs of European and American Hospital Education Associations. In addition, most of the academics studying in this area came up with this discipline”*. Today, that the numbers of health management departments rapidly increase brought health management departments, moved away and disconnected from this discipline, in our country.

#### ➤ **Branching**

Under the title “branching”, Professor Mustafa made a statement: *“Also in the future, due to the increase in branching degree, we will see that there will be specialization in the domain of health management as well and that the number of specialist in this advanced branch will increase. I consider that this is a need and the course will be toward this point. Yes, this development arises from that the development of health management is rapid. I think that the graduates from health management, together with this branching, will contribute value added and surplus value to the institute, where they work”*.

#### ➤ **Educational Degree**

In related to this heading, Professor Ömer expresses that the people received basic management education will be able to work on the domain of health management on condition that they receive postgraduate education in the form of *“When I generally regard to the issue, I see that the education on the domain of health management is given in the style of postgraduate education in most of the developed countries . That is, now that health management is a specialization domain, we see that the people received basic management education are prepared for health management through postgraduate education. Indeed, this case, in this sense, is an appropriate approach”*.

#### ➤ **Employment Policies**

The issue “employment” is an issue very closely interesting and concerning the members of profession in all countries of the world. Especially in our country, the people graduated from health management departments, opened in an unplanned way, face to the problem with not being employed. The graduates from health management departments experience employment problem due to the fact that the people educated in the different domains occupy employment areas in health institutes. This theme consists of three headings These are, employment deficiency, non-domain employment, and “employment in terms of favoritism in assignments”

#### ➤ **Employment Deficiency**

The specialists participating in the study said that there was no problem with employment in this domain abroad; that the graduates from health management could be assigned to the top stages of health management; and that moreover, there were health managers as many as the number of physicians. Some expressions of the participants were presented as follow:

In USA, health management education at both undergraduate and postgraduate and doctorate level is a very appreciated domain; hence, those graduating from this area are largely employed there. But, there is no a direct employment area in Turkey and Europe under the name of health manager (Professor Yusuf)

#### ➤ **Non-Domain Employment**

Professor Kerem, among the participants of the study, is a specialist who had been in USA and closely followed the applications there. The observations of the professor Kerem related to Health Management

Department in USA are in the form of that “According to that I see, the top manager of all hospitals are generally the people selected from the non-medical domain and absolutely received health management education”. The professor Kerem continued as follows:

I went to USA and saw the system there. Part of USA is toward higher education in this area not undergraduate part of this thing. You can become a physician or nurse in the system. That economists, business managers, and jurists have either postgraduate or doctorate degree is adequate. Top managers of all hospitals are selected from among those not being physicians (Professor Kerem).

#### ➤ **Favoritism in Assignments**

Favoritism is known in the form of illegally helping relations and acquaintances in assigning to a certain position. Unfortunately, this kind of negative applications are encountered in Turkey. It is viewed as one of the biggest barriers in improvement of professions. Among the participants, the Professor Ömer and the professor Elif emphasized that in employing the members of the profession of health management, the political mechanisms largely run. The views of these two specialists are given as follows in order.

Health managers in USA have a good earning and status. But, in our country, since some simple dirty tricks are played in assigning health managers and changing their positions, assignment and dismissal become very easy. Some political and union tricks can include in it (the professor Ömer).

#### ➤ **Educational Policy**

The number of department forms the code of this subtheme. In the recent periods, it is a reality that the numbers of department show an increase. This increase brings together some problems with it.

#### ➤ **The Number of Department**

As a result of the analysis made, that the numbers of health management departments are much more are expressed by the participants in such way. For example, *the professor Mehmet, saying that “there are 35 departments in Turkey and I estimate that this number will amount to 100 in five years. This is not a good state”*, continued his explanations with his following words:

I guess that the number of the school (health management department) in our county is close to the total number of almost all of the schools in Europe. For example, as undergraduate program, there are about 5 to 10 schools in Germany. The situation is so in the other countries providing health management education. There are 35 departments in Turkey and I estimate that this number will amount to 100 in five years. This is not a good state. In supply –demand relationship, the department as many as one needs should be opened. This is a method determined by the market. Government can also intervene in this. [System] works so in Europe. But, in our country, there is a continuous supply without considering the market and asking “Is there anybody demanding this? ”. We are assigning health manager for the market, i.e. we continuously assign, there is no counterpart of it in market (The professor Mehmet).

#### ➤ **Management Style**

In the developed countries, in managing health institutes, while professional health managers are utilized, in Turkey, this phenomenon has recently begun to be recognized. The expressions of the professor Öner, among the participants, regarding the subject are given as follows

We consider that the point health management basically originates from is already USA. Hence, we see that there is a more professional management style there. There is a more professional structure in the developed country, while in our country, there is a structure going to professionalism The main difference between them is this. Breaking physician – weighted managerial structure in our country seems to take time (The professor Ömer).

### ➤ Professional Status

In terms of professional status, evaluations of some specialists are: *“We see that health managers in USA undertake the high role as both economic aspect and status. Health management is a prestigious profession”* (The professor Ömer).

When the health systems of USA and the developed countries are evaluated, we see that the health managers, thus, health management, are so appreciated. The prestige of this profession is too much in USA (Mr. Emir).

As will also be understood from the above explanations, in the developed countries, the profession of health management is accepted and seen as a prestigious engagement taking place in the top class.

## 4. CONCLUSION

In this section, the evaluation of the answers given by the specialists to the question **“When we compare our country with profession developed countries in terms of profession of health management, what do you say?”**

The participants comparing our country with developed countries in terms of health management education reported their views on the divided subjects such as educational quality, applied education, branching, curriculum, and educational degree. An evaluation is made in terms of educational quality and it was stated that the specialists were divided into two different thoughts as a result of the study. Some part of the participants considers that there is not any difference between health management education in our country and education in the developed countries. The participants arguing this thought said that the course curriculum of the developed countries was the same as that in our country. As a result of this, since the education received is the same, the conclusion obtained from the participants at the end of the study is that the application is also close to that of the developed countries. In addition, another finding reported by the participants is that many academics can go abroad, gain experience, receiving education there; and that they transmit what they learnt there to the students of health management in the universities of our country.

According to the second view, the participants arguing the view that the quality of the education in our country is lower compared to the developed countries support their theses with the following arguments:

Educational curriculum is not strengthened with accreditation system. Educations are different from that of the developed countries and it does not have any quality and developedness to provide achievement. Because of these, among the reasons for that educational quality in our country is low, the rapidly proliferating departments, the presence of academics coming from the different area and becoming unfamiliar to the domain were evaluated by the participants as negative phenomena. Another point identified during the study is that a serious and specific study should be carried out to enhance the quality of education. Some participants argued that practical education abroad was better compared to our country. They said that there was an application of mentorship in internship abroad and, as result of one-to-one interesting, the students were raised better. The specialists interviewed with emphasized that field application in education was necessary. Another result obtained during interviews is that the course curricula of health management department instructed in our country were formed by utilizing the course curriculum in Europe and even it was one-to-one same. Mr. Muhammet, among the participants, emphasized that the curricula of health management education were more comprehensive, compared to the other countries. According to the common views of many participants, in the countries such as European Union and USA, where the profession of health management education is developed, it was reported that education was usually at postgraduate level rather than undergraduate level.. This seems also to be an application contrasting to the applications in our country. In our county, a new health management department providing undergraduate or associate degree education is opened every year. When the views of specialists are received in terms of the barriers resulted from the policies of health management, the various views were introduced from the aspects of employment, management style, professional status, and income. Employment is an element very closely interesting and concerning professional groups in also our country as is all over the world. Especially in our country, the employment problems the students

graduated from the schools in unplanned way experience increase every passing day. Unfortunately, while the graduates received the education of health management in our country are not employed in the field, the people educated in the different areas manage health institutes. In related to the employment in this domain abroad, a number of problems are not experienced. It is emphasized by the participants that the graduates can easily be assigned for top level stages of health management and that there are health manager more than the number of physician. According to the result of the study, one of the employment differences between our country and the developed countries is favoritism, which means that the people in better position in terms of status bring some people to the position they do not deserve without regarding to their qualifications. This state is the biggest barrier before the professions. All specialists, whose views are received, complain about that the number of health management department are so many. Another finding reported by the participants is that the number of health management department in our country is close to a total number of health management departments in Europe. Some evaluations of the specialists in terms of professional status is in the form that the profession of health management is an acceptable and strong profession and a prestigious engagement that is elite as status. The feature to be income-generating, which is one of the conditions of that an engagement is accepted as a profession, is one of the most important criteria that is also valid for the profession of health management. In terms of income-generating, when we compare the health managers in our country with the other developed countries, we can say that the health managers in USA and Europe obtain more income compared to the health managers in our country. Together with the application of Public Services Unity implemented in our country in 2012, income levels of health managers were brought into better state. In the developed countries, while professional managers of health institutes are often assigned in managing health institutes in the developed countries, in Turkey, this phenomenon has recently begun to be recognized.

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