aurum

A. J. Health Sci

Volume 6, No 3 | Winter 2024

# HEALTH SYSTEM IN TURKEY AND FEATURES OF HEALTH SERVICES

# Rabia EKİNCİ<sup>1</sup>

<sup>1</sup>Department of Health Tourism, Alanya Alaaddin Keykubat University Institute of Graduate Programs, TURKEY, ekincirabia96@gmail.com

(10 https://orcid.org/0000-0002-6335-0505)

Received: 29.07.2024 Review Article
Accepted: 08.11.2024 pp.215-224
Published: 31.12.2024

#### Abstract

Health has been an essential determinant of human well-being throughout history, profoundly influencing societal quality of life. This study critically examines the Turkish health system with a particular focus on its historical evolution, current structure and health service activities. Employing a qualitative methodology and document analysis of national and international sources, the research identifies the system's key characteristics, classifications and major reforms. Findings reveal that Turkey adopts a mixed health system, harmonizing public and private sector contributions, while maintaining a foundation in a welfare- oriented model. Recent advancements, including improved physical and technological infrastructure and alignment with international standards, have elevated Turkey's status as a global healthcare hub. Through an analysis of preventive, therapeutic and rehabilitative services, this study provides a comprehensive understanding of the Turkish health system and contributes to the ongoing discourse on health policy and service delivery in similar socio-economic settings.

Keywords: Health, Health System, Health Service, Features of Health Service

#### 1. Introduction

According to the World Health Organization, health is defined as "a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity." This definition highlights the well-known aspects of physical and mental health, while introducing "social well-being" as a newer concept requiring further exploration. Social well-being emphasizes that health extends beyond personal factors to include social dimensions, such as stable job security, equitable income distribution, and a harmonious social environment. In societies lacking these elements, achieving full well-being becomes unattainable (Fişek, 1991).

In today's context, the right to live in better economic and social conditions is increasingly recognized as a fundamental human right. Access to quality health services is one of the primary components of these better conditions. However, the quality and accessibility of health services vary significantly across countries. Health systems are frameworks encompassing all processes designed to improve, protect, and promote health.

This article provides a review of Turkey's current health system and its associated service activities. Employing a literature review method on both national and international sources, the study explores the key characteristics, classifications, and activities of Turkey's health services within the context of its evolving health system.

Health is a fundamental aspect of human life, crucial for the continuation of vital activities. A robust health system directly influences societal well-being and quality of life, making access to health care a basic right for all individuals. The primary goal of health care is to improve the quality of life by addressing health needs effectively.

aurum

A. J. Health Sci

Volume 6, No 3 | Winter 2024

This qualitative review examines the Turkish health system and the activities offered within its framework, employing a literature-based methodology that utilises national and international sources. This study discusses the fundamental characteristics of health services, their classification, and the current structure of the Turkish health system. Findings indicate that Turkey, with its historically well-established health system, adopts a mixed model that integrates public and private sectors. Recent reforms have improved infrastructure, access, and the quality of services, positioning Turkey as a global contender in health care. Health services, encompassing prevention, treatment, and rehabilitation, are essential for creating a healthier society. This review aims to guide further research into Turkey's health system and the services it provides.

#### 2. Health Service

Health services encompass various activities aimed at eliminating factors that negatively impact individual health, protecting individuals from these factors, providing appropriate treatments for diseases, and offering rehabilitation services for individuals with disabilities (Temizer, 2019).

The adoption of the latest medical advancements and technologies in health service delivery contributes significantly to improving the overall health status of society. Consequently, ensuring equitable and efficient access to health services and addressing disparities among individuals are key priorities for countries in the provision of health care (Temizer, 2019).

The primary objective of health care is to prevent illnesses. However, it is often challenging to protect all individuals in society from diseases. Inevitably, some individuals may fall ill. In such cases, the secondary goal of health service activities is applied, which is the treatment of diseases. Nevertheless, the resources, knowledge, and technology available in a country may sometimes be insufficient for effective treatment, potentially leading to disability in affected individuals. Therefore, the reintegration and rehabilitation of disabled individuals into society represent the third aim of health services.

In short, According to figure one; it is known that health services consist of four main steps. It is classified as protect health, to treat the disease, rehabilitation services and health promotion services. (Atasever & Bağcı, 2020).

A. J. Health Sci Volume 6, No 3 | Winter 2024

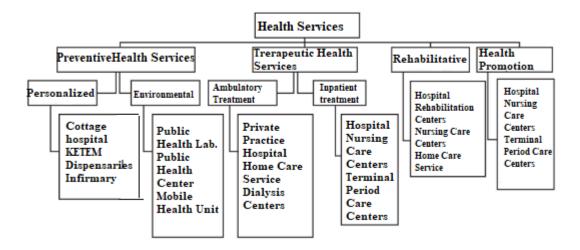


Figure 1. Classification of Health Services (Kavuncubaşı &Yıldırım, 2018)

# 2.1. Preventive Health Services

Preventive healthcare services encompass activities aimed at preserving the current health status of individuals within a society and mitigating the adverse effects of diseases present in the environment. In summary, these services are defined as interventions provided to individuals and their surroundings to safeguard health before the onset of illness. Preventive health services are categorized into two main types: Personalized Health Services and Environmental Health Services (Atasever & Bağcı, 2020).

### • Personalized Health Services:

Personalized health services refer to activities delivered by trained healthcare professionals such as doctors, nurses, midwives, and health officers. Examples of these services include immunization (active and passive), family planning, early diagnosis of diseases, medication-based protection, healthy and balanced nutrition education, and general health education (Ciftçi, 2011).

## • Environmental Health Services:

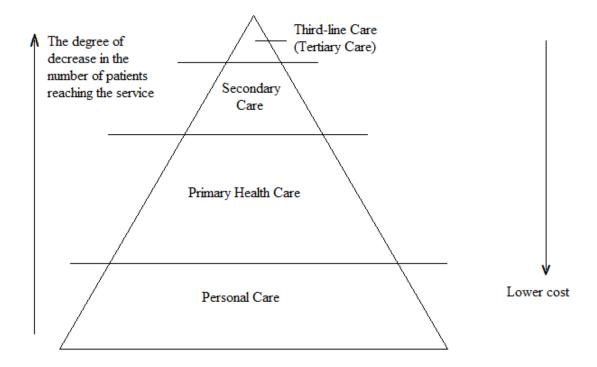
Environmental health services involve activities designed to eliminate physical, chemical, biological, and social factors in individuals' environments that negatively impact health. Key environmental health initiatives include housing sanitation, industrial health measures, pest control, air pollution prevention, radiation management, access to sufficient and clean water, waste disposal, food safety and control, and noise reduction (Temizer, 2019).

Volume 6, No 3 | Winter 2024

# 2.2. Therapeutic Health Services

Therapeutic health services are defined as interventions aimed at improving an individual's disease condition and addressing the underlying causes of illness. These services are structured into three hierarchical steps:

- Primary Health Care Services: This initial step serves as the first point of contact for individuals
  experiencing illness. Primary care focuses on outpatient or at-home treatments and combines both
  preventive and therapeutic health services.
- Secondary Health Care Services: When primary care is insufficient, individuals are referred to secondary
  health care institutions. These institutions provide more comprehensive care, often requiring inpatient
  treatments.
- Tertiary Health Care Services: Tertiary care is delivered by advanced institutions specializing in complex medical and technological procedures. These facilities, such as university hospitals and research hospitals, offer services that exceed the scope of primary and secondary care (Atasever & Bağcı, 2020).



**Figure 2.** The Relationship Between Health Expenditures And Therapeutic Health Service Steps (Atasever & Bağcı, 2020).

Figure 2 highlights that among the steps of health services, primary care is the most accessible for individuals. This is attributed to its dual focus on preventive and therapeutic health services, ensuring a more comprehensive and immediate response to health needs.

aurum

A. J. Health Sci

Volume 6, No 3 | Winter 2024

2.3. Rehabilitative Health Services

Rehabilitative health services are designed to assist individuals who, due to various diseases or conditions, are unable

to fully utilize their mental, physical, or social abilities. The primary goal is to alleviate these disabilities and help

individuals adapt to life, even if full recovery to their prior state is not possible. Rehabilitation focuses on improving

the current situation and fostering individuals' reintegration into social life. Rehabilitation centers serve as key

facilities in this process.

According to the Operating Regulations of Inpatient Treatment Institutions of the Ministry of Health (2005),

rehabilitation centers are defined as "inpatient institutions that provide rehabilitation for accidents and injuries

affecting the organ, nerve, bone, and muscle systems, or for injuries occurring post-surgery." These centers aim to

support individuals in adapting to social life, promoting their happiness and productivity within society.

Consequently, societies benefit from individuals who are both content and actively contributing, ultimately fostering

higher levels of social welfare (Temizer, 2019).

2.4. Health Promotion Services

Health promotion services focus on improving the existing health status of individuals, aiming to elevate it to an

even better level. Unlike other types of health services, the primary responsibility in health promotion rests with the

individuals themselves. These services aim to enhance both the physical and psychological well-being of individuals

while improving their overall quality of life. Such efforts are critical for fostering a healthy and thriving society

(Atasever & Bağcı, 2020).

3. Features of Health Service

Health services are unique in their nature, characterized by several distinct features:

• Simultaneous production and consumption: Health services are delivered and utilized concurrently,

requiring collaboration between healthcare providers and individuals seeking care.

Non-storable and heterogeneous: Health services cannot be stockpiled and exhibit variability based on

individual circumstances.

• Intangible nature: Health services are not tangible goods, making pre-use evaluation impossible.

• **Irreplaceability:** Health services cannot be substituted with other goods or services.

• **High cost:** Advanced technologies used in healthcare delivery contribute to its high expense.

• Interconnected sectors: Health services maintain relationships with numerous other sectors, meaning

innovations or changes in these sectors can directly affect healthcare.



A. J. Health Sci Volume 6, No 3 | Winter 2024

• **Risk and uncertainty:** From the simplest procedure to the most complex interventions, healthcare involves inherent risks, and no guarantees can be provided (Tengilimoğlu, 2012).

# 4. Health System

Health systems are dynamic and constantly evolving, shaped by economic, cultural, historical, and societal factors. For this reason, no single health system can be universally considered the best or worst. Health systems should be adapted to meet the unique needs of each country (Karaca, 2023).

One widely used classification of health systems was developed by Roemer (1993), which categorizes health systems into four primary models:

- 1. Entrepreneur Health System (The Out-of-Pocket Model):
- 2. Welfare-Oriented Health System (Bismarck Model):
- 3. General and Inclusive Health System (Beveridge Model):
- 4. Socialist and Centrally Planned Health System:

Each of these models has distinct features and applications, as summarized below. The health systems models are briefly given in the Table 1 (Tatar, 2011).

Table 1. Health Systems Models (Tatar, 2011)

Models	Beveridge Model (United Kingdom)	Bismark Model (Germany)	The Out of Pocket Model (USA)	Socialist Model (Cuba)
Decision making the mechanism	Decision making and management by government	Decision making and management by insurance fund and physician associations	Principles of private entrepreneurship	Decision making and management by government
Healthcare service providers	Puclic	Public/ Private	Private	Public
Resources	Taxes	Contributions of employees and employers	Private financing	Government budget

A. J. Health Sci

Volume 6, No 3 | Winter 2024



According to the table, health systems are explained as follows:

# 1. General and Inclusive Health System (Beveridge Model)

The Beveridge Model, also known as the National Health System (NHS), is a tax-financed system introduced in the United Kingdom after World War II. Countries such as Australia, Denmark, Finland, Spain, and Sweden also implement this model. Its primary characteristics are:

- Coverage for the entire population.
- Universal protection for citizens.
- Centralized administration by the national government.
- Equal access to services based on need, not financial capability.

These features make it an inclusive and universally oriented health system (Tatar, 2011).

## 2. Welfare-Oriented Health System (Bismarck Model)

First introduced by Otto von Bismarck in Germany in 1883, the Bismarck Model is based on public health insurance funded through contributions from employees, employers, and the state. The model operates on the principles of social insurance and is financed primarily through premiums.

- Countries utilizing this model include Austria, Belgium, France, and the Netherlands.
- It is one of the most widely applied health systems globally due to its social orientation and effective financing mechanisms (Sungur, 2021).

## 3. Entrepreneur Health System (The Out-of-Pocket Model)

This model is characterized by a lack of mandatory health insurance, with health services predominantly funded through out-of-pocket payments or private insurance.

- Wealthier individuals can access health services, while poorer individuals often face significant barriers.
- Private entities dominate both the supply and demand sides of the system.

aurum

A. J. Health Sci

Volume 6, No 3 | Winter 2024

• Countries such as the United States and Brazil exemplify this model, though it is increasingly criticized for exacerbating health inequalities (Tatar, 2011).

# 4. Socialist and Centrally Planned Health System (Semashko Model)

Named after Nikolai Semashko, this model is centralized, with the government financing healthcare infrastructure and personnel. Key features include:

- Comprehensive public oversight of healthcare delivery.
- State-employed healthcare workers.
- Focus on equitable access to healthcare services.

Cuba, North Korea, and Vietnam are examples of countries implementing this model, reflecting its socialist roots (Karaca, 2023).

## 4.1. The Structure of Turkey's Health System

Turkey predominantly adopts a welfare-oriented health system based on the Bismarck Model, which is commonly implemented in Germany. Within this framework, health services are treated as a social responsibility, with the state taking a leading role in their provision. However, like many countries, Turkey employs a mixed health system, wherein both public and private sectors collaborate to deliver healthcare services (Yıldız, 2020). Turkey has a long-standing and well-structured health system, which has undergone significant reforms over time to improve its efficiency and effectiveness. The most recent health reform initiatives have focused on enhancing the technological and physical infrastructure for healthcare delivery. These improvements aim to ensure equitable and easy access to health services for all citizens.

A notable achievement of these reforms is the introduction of the family medicine system, which has strengthened the provision of preventive healthcare. Additionally, efforts to expand the bed capacity of public hospitals have been prioritized to address growing healthcare demands.

Turkey has emerged as a prominent destination for international patients seeking medical services. This success is attributed to advancements in medical achievements and the enhancement of quality standards in healthcare provision. The country's efforts to integrate modern technologies and improve service delivery have positioned it as a competitive player in the global health tourism sector (Yıldız, 2020).



A. J. Health Sci

Volume 6, No 3 | Winter 2024

#### 5. Conclusion

aul'um

Ensuring better social and economic conditions is recognized as a fundamental right for individuals today. One of the key components of achieving these improved living standards is access to comprehensive healthcare services. Adequate healthcare contributes to individuals' well-being, enabling them to lead fulfilling lives within society. Health services encompass activities that directly impact individuals and communities. These services are categorized into **preventive health services**, **therapeutic health services**, and **rehabilitation services**. The effective delivery of these services ensures that individuals maintain their health and live in a safe, healthy environment. The quality of health services varies significantly among countries due to differences in culture, historical context, technological capabilities, and scientific infrastructure. As a result, there is no universally optimal or deficient health system. Each country tailors its healthcare system to meet its unique needs and resources.

In Turkey, reforms in the healthcare system, improvements in both public and private hospital services, and the attainment of international standards in healthcare provision have enhanced the nation's global reputation. These advancements have contributed to raising the quality and accessibility of health services, positioning Turkey as a recognized leader in healthcare delivery.

This review aims to provide a comprehensive overview of Turkey's health system and the range of health services it offers. By doing so, it seeks to serve as a valuable reference for future studies and guide efforts to analyze and improve healthcare delivery in Turkey.

# References

- **Atasever, M. & Bağcı, H.** (2020). Türkiye Sağlık Sistemi. Akademisyen yayınevi. Retrieved from https://www.google.com.tr/books/edition/T%C3%9CRK%C4%B0YE\_SA%C4%9ELIK\_S%C4%B0STE M%C4%B0/zSLbDwAAQBAJ?hl=tr&gbpv=0
- Çiftçi, H.İ. (2011). Sağlık Sistemi ve Finansmanı: Türkiye ve Çeşitli Ülkeler. Yüksek Lisans Tezi. Marmara Üniversitesi/Sosyal Bilimler Enstitüsü/ Maliye Anabilim Dalı, İstanbul.
- Fişek N. (1991) Türkiye Cumhuriyeti Hükümetlerinde Sağlık Politikaları. Prof. Dr. Nusret Fişek'in Kitaplaşmamış Yazıları I Sağlık Yönetimi. Ankara: TTB Yayınları. Retrieved from <a href="https://www.ttb.org.tr/n">https://www.ttb.org.tr/n</a> fisek/kitap 1/33.html
- **Karaca, M.** (2023). Türkiye, İspanya ve Kanada Sağlik Sistemi ve Göstergelerinin Karşilaştirmali Analizi. Anadolu Akademi Sosyal Bilimler Dergisi, 5 (1), 125-151. Retrieved from <a href="https://dergipark.org.tr/tr/pub/anadoluakademi/issue/76207/1266896">https://dergipark.org.tr/tr/pub/anadoluakademi/issue/76207/1266896</a>.
- Kavuncubaşı, Ş. & Yıldırım, S. (2018). Hastane ve Sağlık Kurumları Yönetimi. (5th ed.), Ankara: Siyasal Kitabevi.
- **Roemer, M.I.** (1993), "National Health Systems throughout the World", Annual Review of Public Health, 14(1), 335-353.
- **Sungur, C.** (2021). Sağlık sistemlerinin sınıflandırılması ve performans analizi üzerine kavramsal bir inceleme. Kahramanmaraş Sütçü İmam Üniversitesi Sosyal Bilimler Dergisi, 18 (3), 2174-2201. DOI: 10.33437/ksusbd.956240 Retrieved from <a href="https://dergipark.org.tr/en/download/article-file/1838428">https://dergipark.org.tr/en/download/article-file/1838428</a>
- **T.C. Sağlık Bakanlığı.** (2005) Yataklı Tedavi Kurumları İşletme Yönetmeliği, Sayı:4247, Retrieved from <a href="https://www.resmigazete.gov.tr/eskiler/2005/05/20050505-12.htm">https://www.resmigazete.gov.tr/eskiler/2005/05/20050505-12.htm</a>, Ankara.

aurum

A. J. Health Sci

Volume 6, No 3 | Winter 2024

**Tatar, M.** (2011). Finance Methods of Health Services. Development of Social Health Insurance in Turkey. Journal of Social Security (SGD), 1(1). Retrieved from <a href="https://dergipark.org.tr/en/download/article-file/282892">https://dergipark.org.tr/en/download/article-file/282892</a>

**Temizer M.** (2019). Namık Kemal Üniversitesi Sağlık Bilimleri Öğrencilerinde Algılanan Sağlık Hizmeti Kalitesi Ve Sağlık Hizmeti Kullanımı. Yüksek Lisans Tezi, Tekirdağ Namık Kemal Üniversitesi, Sosyal Bilimler Enstitüsü Sağlık Yönetimi Anabilim Dalı. Tekirdağ.

Tengilimoğlu, D. (2012). Sağlık Hizmetleri Pazarlaması, Ankara: Siyasal Kitabevi.

**Yıldız, A.** (2020) Sağlık Turizminde Öne Çıkan Ülkeler-Sağlık Sistemleri ve Dünya Sağlık Turizmindeki Yerleri, Ankara: Nobel Yayınevi.