REDUCING HEALTH INEQUALITIES IN TURKEY WITHIN THE SCOPE OF HEALTH TRANSFORMATION PROGRAMME

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HEALTH TRANSFORMATION PROGRAMME

• Started in 2003.

• The main principle: “Health for everyone”.

• MAIN OBJECTIVES:
  ◦ Effective
  ◦ Productive
  ◦ Equal

  \[\text{HEALTH CARE SERVICES}\]
HEALTH TRANSFORMATION PROGRAMME – KEY OBJECTIVES

- Restructuring of the Ministry of Health.
- Covering all the citizens by the universal health insurance
- Gathering the health institutions under one umbrella
- Providing the hospitals with an autonomous structure administratively and financially,
- Introduction of the family medicine implementation
- Giving special importance to mother and child healthcare
- Generalizing the preventive medicine
- Promoting the private sector to make investment in health.
- Devolution of authority to lower administrative levels in all public institutions.
- Eliminating the lack of health personnel in the developing areas.
- Implementation of the e-transformation in the field of health.
UNIVERSAL HEALTH INSURANCE

• A component of the Health Transformation Programme

• Covers everyone.

• No fee is charged to citizens for primary health care even though they are not covered by social security.

• Even non-registered people have the chance to go any family practitioner as “visitor patients” and receive health care services indiscriminately.

  “Access to primary health services and extension of the general health insurance scheme have improved”

  (EU Progress Report 2010)
Real Budget Allocated for Preventive and Primary Health Care Services (Million TL)
FAMILY MEDICINE SYSTEM

- Pilot implementation was launched in Düzce province in 2005.
- System is being implemented countrywide by the end of 2010.
- A family physician is responsible for health, health problems and diseases.
- A member of family
- All health problems of the applicant are dealt within the scope of the primary health care services.
- If the problems of the patient can not be solved through primary health care services, then the patient is referred to a specialist or a dentist.
A SURVEY IN 2008

Distribution of the Examinations Performed at the Primary Level and in Hospitals in Family Medicine Provinces

Before the Family Medicine Implementation
- Primary Healthcare: 40%
- Hospital: 60%

After the Family Medicine Implementation
- Primary Healthcare: 51%
- Hospital: 49%
Preventive and Primary Healthcare Services are now Free-of-charge

- Today all our citizens can get all kinds of services from all primary healthcare institutions without being asked for a security document across the country.
GREEN CARD SYSTEM

- Established in 1992

- Directly funded by the Government.

- For citizens who has low level of income

- These citizens benefit from health services without any contribution payment and under equal conditions with other citizens through the green card.

- 9,360,826 citizens covered.
  - 04.04.2011
EMERGENCY SERVICES

- The emergency health services were restructured.
- Air ambulance systems
- Rapidly reach even the most remote points of our large and challenging territories.
- Free of charge !!!
MOTHER AND CHILD HEALTH

• The intensive studies aiming at improving mother and infant health gave result.

• The improvements in the health indicators were also reflected in the UNICEF and EU Reports.

• In these reports, Turkey is one of the countries which made progress in relation with this subject.
INFANT MORTALITY RATE (%oo)
Guest Mother Project

- Project is aimed to provide the deliveries in a health facility.

- In order to eliminate the difficulties in reaching a health facility.

- The mothers are welcomed near the health facilities for a couple of weeks before the delivery.

- Their deliveries are made in the health facility.

- Free of charge.

- ~13,000 mother used since 2008.
Ratio of Deliveries Made at the Hospital (%)

Kaynak: TNSA
VACCINATION RATES (%)
TOBACCO

- Efforts to raise the awareness in the fight against smoking.

- As a result of successful implementation of the smoking ban in all public places since 2009, we have reached the lowest cigarette consumption level in five years in 2010.

- In 2009 July, our Prime Minister was granted the “World No Tobacco Day 2010 Award” by the WHO General Director.

- As regards tobacco, Turkey largely fulfils the acquis requirements.

  *(EU Progress Report for Turkey 2010)*
Change in smoking rates by gender

Source: OECD Health Data 2010; Eurostat Statistics Database.
Alcohol consumption among population aged 15 years and over

Source: OECD Health Data 2010; Eurostat Statistics Database; WHO (2010).
CANCER SCREENING CENTERS
CANCER SCREENING CENTERS

- Carry out screening and training programs for breast, cervical, colorectal and skin cancers
- Raise awareness about cancer in the society
- Aim to reduce the number of cancer cases diagnosing at early stage.
SOLVING UNBALANCED DISTRIBUTION OF HEALTH PERSONNEL

- Compulsory service implementation started.
- For the health professionals (especially for doctors)
- In order to provide a balanced distribution.
- Thus, the unbalanced distribution to the provinces was largely eliminated.
- The physicians were priced with a flexible way through the “Performance Based Payment System.”
Health system reform is a perpetual process. At this early stage in its implementation, Turkey appears to be one of the few middle-income countries to be implementing a “big bang” reform effectively.

The HTP represents both an important improvement in Turkey’s social welfare system and a “good practice” example for other countries struggling with the same issues.
All was different yesterday,

and all will be better tomorrow...
Thank you for your attention...
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