

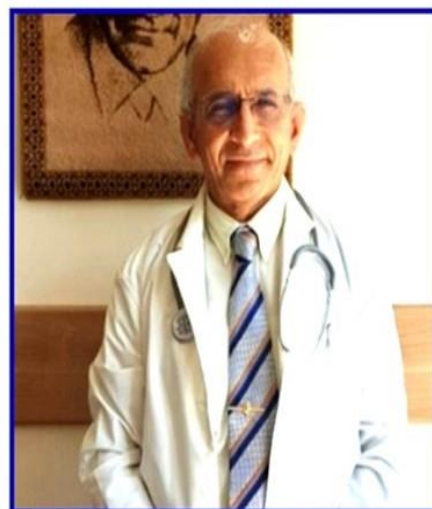
Turkish Health System Turkish Ministry of Health (MoH)

Ahmet SALTIK, MD

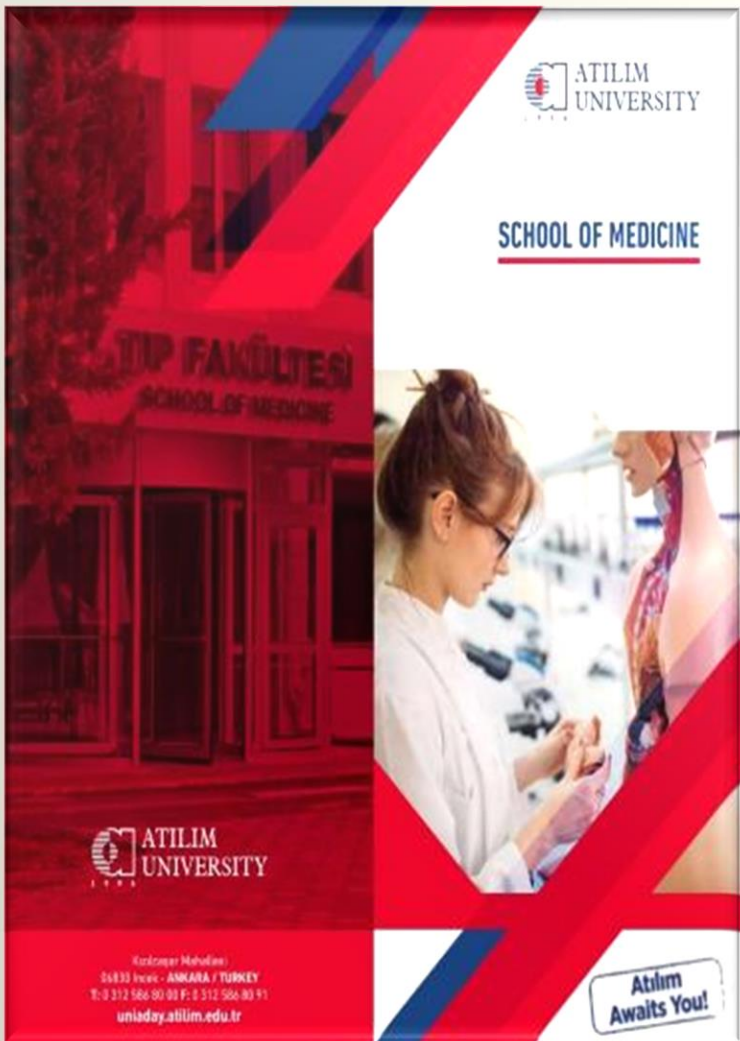
Professor of Public Health

BSc: Public Administration & Political Sciences

LLM: Health Law



The Turkish MoH it is responsible for proposing and executing the government policy on social cohesion and inclusion, family, protection of minors, youth and of care for dependent or disabled persons.



Phase 1 lecture, 2023 - 24

academic year, spring semester

19th Feb. 2024, Ankara - TURKIYE

www.ahmetsaltik.net

Learning objectives....

At the end of this lecture, students are expected to;

- ❖ *Recognize Turkish Health System in terms of organisational chart & functions..*
- ❖ **Order** main administrative units, as of general directorate and others within Turkish MoH
- ❖ *Understand the place of health system in Turkish Constitution*
- ❖ **Have an idea** at basic level about Turkish health legislation
- ❖ *Realise how to organise for a rational supplying of equal services to all citizens*
- ❖ **Examin** the central managerial bodies of Turkish MoH
- ❖ *Examin the peripheral managerial bodies of Turkish MoH and **community participation***
- ❖ **Conceive** Global&National challenges for healthy society & future organisational models

The Turkish of Ministry of Health - MoH



Turkish Ministry of Health - MoH

- ❑ The Ministry of Health (*Turkish: Sağlık Bakanlığı*) is the Ministry of the Government of Türkiye responsible for proposing and executing the government policy on health, planning and providing healthcare and protecting ***all citizens***.
- ❑ *Likewise, it is responsible for proposing and executing the government policy on social cohesion and inclusion, family, protection of minors, youth and of care for dependent or disabled persons.*
- ❑ **The Ministry of Health** is headed by the Minister of Health, who is appointed by the President of Türkiye. The current minister is Dr. Fahrettin Koca, as a pediatrician, has been serving since 10th July 2018, almost 6 years.



The following units are linked to the Turkish MoH:

- Internal Audit Unit
- Inspection Board
- Department of Strategy Development
- Office of Press and Public Relations
- Medicines and Medical Devices Institution
- General Directorate of Legal Services
- General Directorate of Emergency Health Services
- General Directorate of Health Promotion
- General Directorate of Administrative Services
- General Directorate of Health Investments
- General Directorate of Health Information System
- General Directorate of EU and Foreign Affairs
- General Directorate of Health Services
- **General Directorate of Borders And Coastal Health of Turkiye**
- General Directorate of Turkish Public Hospitals
- **General Directorate of Public Health**



Foundation of Ministry (1920 - 1946)

❖ Continuity and organization of healthcare were a key focus in the Seljuk-Ottoman medical tradition. Following the foundation of the Grand National Assembly of Turkiye (23rd April 1920), the Ministry of Health was established on 3rd May 1920 as the 3rd one in the world.

The main goal of this initial period was to heal the wounds of the war, tackling infectious disease & building required legislation rather than developing a regular registration system.

❖ *After the Republic was proclaimed (29th October 1923), **Dr. Refik Saydam** held the ministerial office until 1937. Dr. Saydam contributed gigantically to the design and development of healthcare services in Turkiye.*

Foundation of Ministry (1920 - 1946)

- ❖ In 1923, healthcare services were delivered at governmental and municipal facilities.
- ❖ *The country had 86 hospitals and 6.437 patient beds back then.*
- ❖ During this period the Law on Practice of Medicine and *Medical Sciences (1928, act # 1219)* and *the Law on Preventive Health* were adopted (1930, act # 1593).
- ❖ These two and similar other laws are still in effect.
- ❖ *The health policies during this era had four main pillars:*

Organisation & Services of the MoH (1920 - 1946)

1. Plan, design and implement **healthcare** centrally,
2. Organize **preventive care** at central level and curative care at local administrations,
3. Raise the appeal of medical faculties to citizens to increase the number of health workers and enforce **mandatory public service** for medical faculty graduate physicians,
4. Launch programs to fight **against communicable diseases** like **malaria, syphilis, trachoma and leprosy.**

Organisation & Services of the MoH (1920 - 1946)

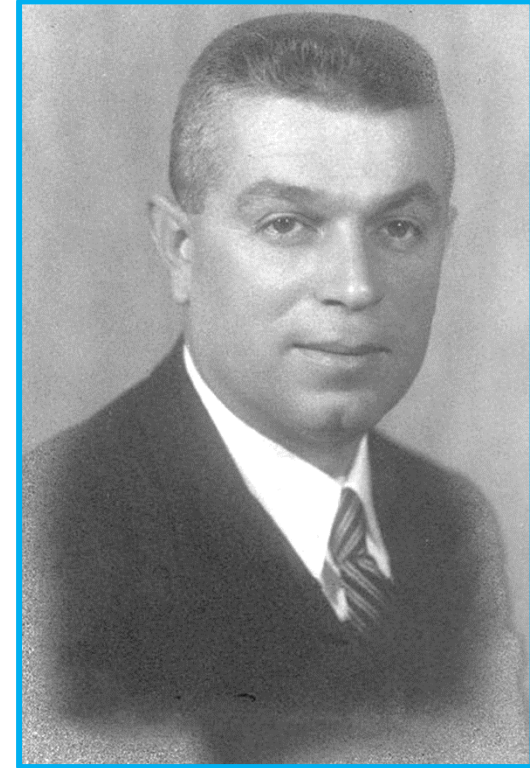
- ❑ Under these pillars, healthcare services were based on the "single-purpose care in broad geography - ***vertical organization***" model.
- ❑ Legislation was developed to promote ***preventive care*** and local administrations were encouraged to open hospitals.
- ❑ The objective was to have a government physician in every district.
- ❑ Starting from densely populated settlements, diagnostic & treatment offices were opened in 150 district centers in 1924 and 20+ in 1936.
- ❑ ***The salaries of physicians*** providing preventive care were raised and they were forbidden to engage in private practice.

Ankara, Dr. Refik Saydam Hygiene Institute's first building (1933)



National Health Plan and Program (1946–1960)

- The "***First 10-Year National Health Plan***", the first written health plan of Türkiye, was adopted at the Supreme Health Council in 1946.
- The plan was announced by the MoH **Dr. Behçet Uz** in 1946.
- It took nearly one and a half year for the National Health Plan to become a draft bill.
- It was approved by the Council of Ministers (*The Cabinet*) and at four different Parliamentary committees.



National Health Plan and Program (1946–1960)

- However, the bill was not enacted because of the change of government.
- Although the **National Health Plan** and the *National Health Program* were not entirely implemented in the form of a law, the two documents deeply influenced the healthcare organization around the country.



Dr. Behçet Uz

National Health Plan and Program (1946 - 1960)

- The basic approach was to centralize inpatient facilities that had been controlled by local administrations.
- *The Plan aimed to expand healthcare to far rural areas by establishing a 10-bed health center for every 40 villages, roughly 25 K population.*
- facilities consisted The care design of these of delivering *preventive and curative services* together.
- *By design, each facility included two physicians, one health officer, one midwife, one visiting nurse and a village midwife and a health officer for every 10 villages.*
- The number of the health centers was 8 in 1945, 181 in 1955 and 283 in 1960.



TR, MoH
Dr. Behçet Uz Research & Training Hospital (İzmir)

The Democrat Party Period (1950 - 60)

- The ***Maternal and Child Health*** (MCH) Section was established at the MoH in 1952.
- A Maternal and Child Health Development Center was established in Ankara in 1953 with assistance from The **UNICEF** & The ***World Health Organization***.
- In this period, *pro-natalist policies* were adopted aiming growing country population due to high rate of child and infection related mortalities.
- *Therefore, Turkiye continued to increase the number of rural health centers, maternity facilities and infection prevention centers and strengthened its corps of health professionals.*

The Democrat Party Period (1950-60)

- ✓ In 1954, the **MoH** announced the "National Health Program and *Health Bank* Studies".
- ✓ Following on the first 10-Year **National Health Plan**, the Program provided the building blocks of *healthcare planning and organization* in Türkiye.
- ✓ The National Health Plan split the country into 7 health districts (*Ankara, Balıkesir, Erzurum, Diyarbakır, İzmir, Samsun and Seyhan*).



The Democrat Party Period (1950-60)

- ✓ On the other hand, the National Health Program divided the country into 16 health regions.
- ✓ After İstanbul (1827) and Ankara Universities (1945), the medical faculty of Ege University started admitting students in 1955 in order to strengthen the *health workforce / manpower*.
- ✓ The number of physicians, nurses and midwives increased more than 100% within 10 years.

**Doctors of Diyarbakır
a hundred years ago**
*A memory of that moment
taken by the doctors
working at **Diyarbakır
Numune Hospital in 1910.***



Some Legislation activities.. (1950 - 60)

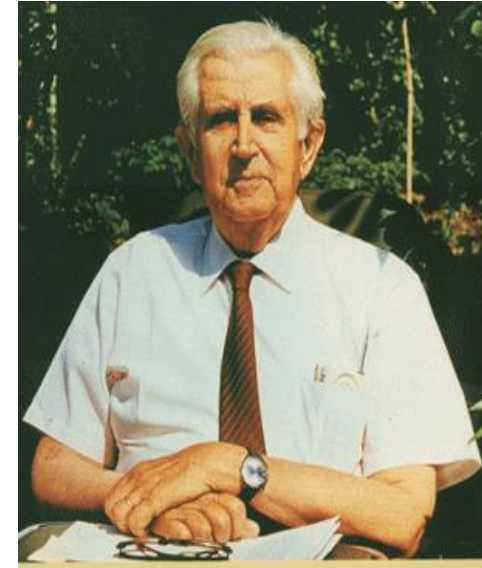
- Law on Turkish Medical Association (1953)
- *Law on Pharmacists and Pharmacies (1953)*
- Nursing Law (1954)
- *Law on the Union of Turkish Pharmacists (1956)*



Socialization of health services; Prof. Dr. Nusret FİŞEK

Health Policies in the 1960 - 2002 Period

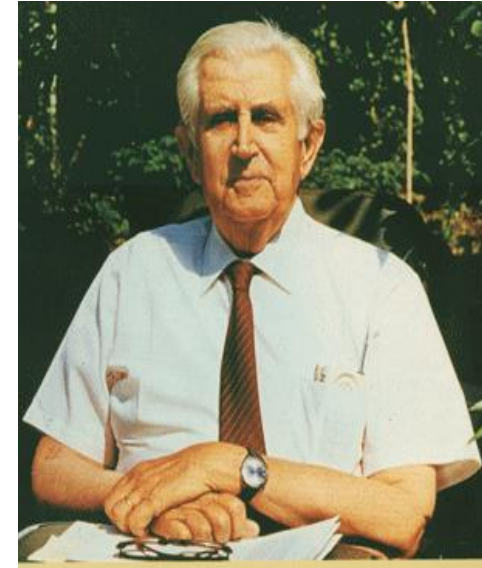
- ❑ **Socialization in health** was launched in 1963 and expanded to the whole country in 1983.
- ❑ Health posts, health centers and district and provincial hospitals were opened countrywide to provide extensive, continuous, integrated and 3 staged (*hierarchical*) healthcare; as of ***Primary, Secondary and Tertiary care..***



»*The Socialization Law is a revolutionary breakthrough in the footsteps of Atatürk.*»

Health Policies in the 1960 - 2002 Period

- ❑ The **Population Planning Law** was adopted in 1965 shifted the policy of the country from a **pro-natalist** to an **anti-natalist** policy.
- ❑ The MoH was authorized to establish a dedicated organization, obtain or manufacture or outsource provision of contraceptive drugs & tools (*condom, IUD etc.*), provide citizens in need with such tools for free or on a rate cheaper than the production cost or take measures to that effect.



»The Socialization Law is a revolutionary breakthrough in the footsteps of Atatürk.«

Period of State Planning Organization (SPO-DPT)

- ❑ In 1990, the **State Planning Organization** prepared the «*Healthcare Sector Master Planning Study*» together with the MoH.
- ❑ This basic plan on the healthcare sector marked the beginning of a process of addressing **health reforms**.
- ❑ The preparatory theoretical efforts for the health reforms gained momentum with the 1st and 2nd National Health Congress held in 1992 and 1993.



***Ministry of
Development***

Period of State Planning Organization (SPO-DPT)

- ❑ This introduced the *green card for poor citizens* without **social security**.
- ❑ This policy allowed low-income people to be covered by health insurance although coverage of care package was limited.
- ❑ In 1993, the MoH developed the "*National Health Policy*" which consisted of 5 main components including
 - ❑ *environmental health, support, healthcare delivery and goals for healthy Turkiye.*

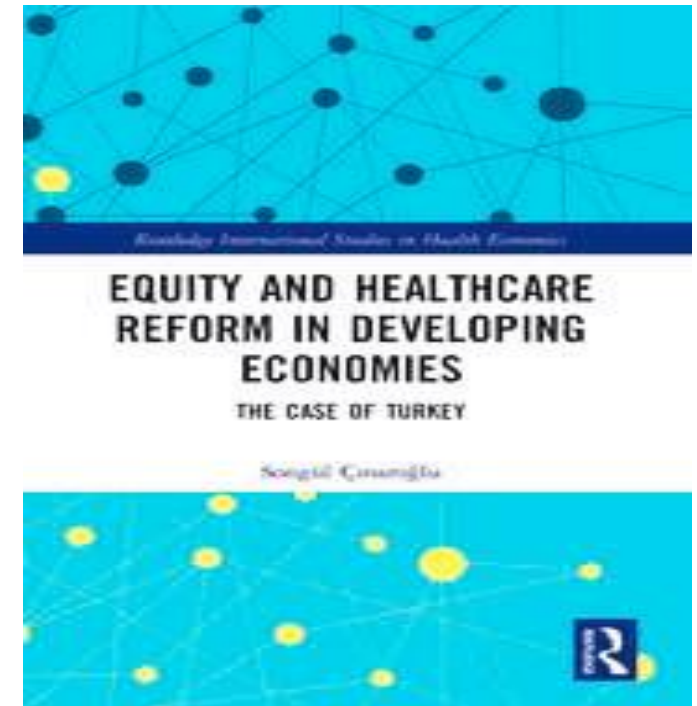


*Ministry of
Development*

Health Reform efforts in 1990s

The main components of the Health Reform efforts in 1990s were as follows:

1. **Create General Health Insurance** by merging all **social security institutions (SGK)**,
2. Introduce **family practice** for primary care,
3. Grant autonomy to hospitals,
4. Reorganize the Ministry of Health to become a planning and coordinating body with a special focus on **preventive healthcare**.
5. This was a period when major theoretical work was done but without noteworthy chances for implementation.



Health Transformation Program (2003-2013)-1

- ❑ The Government of Turkiye started the Health Transformation Program (HTP) in 2003.
- ❑ To address the challenges, **the World Bank** has supported Turkey's **Health Transformation** Program since 2003 with two Adaptable Program Loans (*debts!*) (APLs).
- ❑ The Bank also provided technical guidance and shared the experiences of other countries.
- ❑ The Plan included the following targets under the title "**Health for All**":



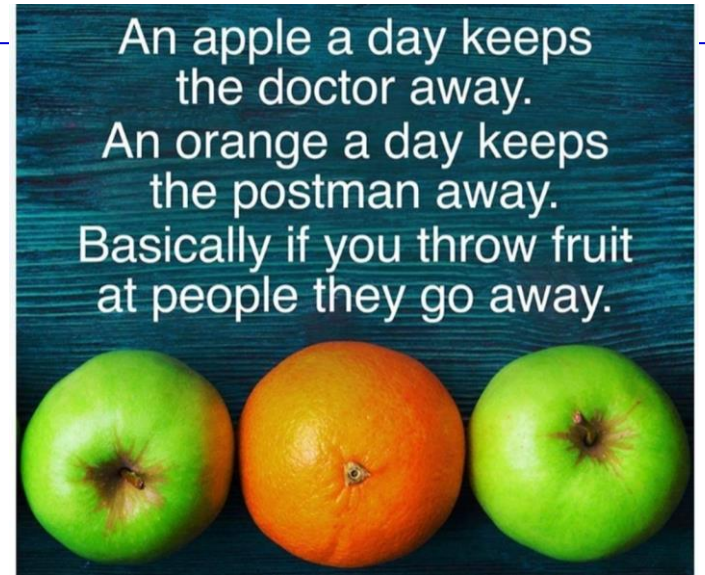
- ❖ The main but covered fonction of the WB is oppressing the countries/governments to privatise health services an limitate the proportion of public health services via credits / loans.
- ❖ The neo-liberal globalisation, ideologically is in fact, dedicated to marginalise almost all kinds of public sevicees and opening a field to both national and international capital(ism) by means of de-regulatory legal arrangements with the mask of **HEALTH TRANSFORMATION**. This pro-capital international agressive policy is clear enough that neither national nor domestic in nature.

***10
minutes***



Health Transformation Program (2003-2013)-2

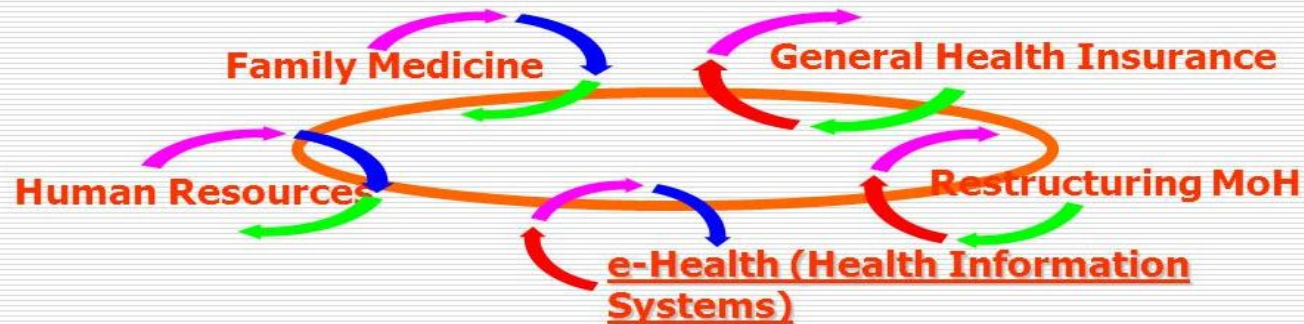
- ❑ The Program was developed and launched in early 2003 based on the earlier experiences including **Socialization** and subsequent health reform efforts.
- ❑ Complaints about long waiting lists decreased.
- ❑ Patients stranded in hospitals for failing to pay the bills became a thing of the past as the main concern was the provision of **social insurance and universal health care**.
- ❑ After addressing the emergency transportation issues, demands were now focused on qualified intensive care unit beds in sufficient numbers.



Health Transformation Program (2003-2013)-2

- ❖ But, at the end of 2 decades implementation in Turkiye, private health sector was overnourished by limitless public funds and developed against the public sector.
- ❖ The **privatised health sector** started to absorb financial sources of National Social Security System (SGK) extremely unfair when compared with the volume of health services that they performed.
- ❖ The Turkish Social Security System (SGK) has been facing with huge budgetary deficits to be covered by the general budget transfers. *And over 10 m people are incapable to pay monthly premium and out of coverage!*

e-Health in Turkey as Part of the Health Transformation Programme



PUSH ME, PULL YOU



Patients = Customers!?



Former Minister of Health
Prof. Dr. Recep AKDAĞ

'Hastalara müşteri gözüyle bakılacak'



Oğlu için organını satıyor

Gaziantep Nırdağı'nda Akdeniz Anemisi hastası olan oğlu Berat Can'ın tedavi masraflarını karşılayamayan İlyas Öztürk (38), son çare olarak yasak olmasına rağmen organlarını satışa çıkardı. Çay ocağında günlük 5 milyon liraya çalışan Öztürk, her ay bir kez kanı değiştirilen oğlunun tedavisini sürdürecektir gücü kalmadığını belirterek, "Evdeki eşyaları sattım. Akrabalara borçlandım. Yeşil Kart'ım yok. Aylık tedavi masrafı 500 milyonu buluyor. Bir böbreğimle gözümün birini vermeye hazırım. Yeter ki oğlum kurtulsun" dedi. ■ RAMAZAN TUNCER DHA

AYŞEGÜL AYDOĞAN İstanbul

İstanbul'daki Sürmeli Oteli'nde dün başlayan 'Sağlıkta Dönüşüm Programı ve Sektörel İstişare' toplantısında konuşan Sağlık Bakanı Recep Akdağ, hizmeti daha verimli ve hakkaniyetli sunmak istediklerini belirterek, "Bu doğrultuda Sağlık Bakanlığı dümeni ele almalıdır" dedi. Çalışma ve Sosyal Güvenlik Bakanlığı ile başlattıkları ortak hizmete değinen Akdağ, bu sistemle SSK'lı vatandaşların daha rahat randevu alır hale geldiğini ve halkın hizmete daha kolay ulaştığını söyledi.

Gönüllü hizmet dönemi

Döner sermaye uygulamasının hekim seçme özgürlüğünü getirdiğini savunan Akdağ, "Artık hastalar memnun edilecek müşteri olarak kabul edilecek" diye konuştu. Mecburi hizmetin yerine gönüllü hizmetin getirileceğini belirten Akdağ, şöyle devam etti: "Önceki dönemlerde Türk sağlık sistemi, ateşi düşürülmeye çalışılmış hasta gibiydi. Ateşi yükselmiş ama düşürülemedi. Acil müdahalelerle bu vücut ısını bir an önce düşürmemiz gerekiyordu. Biz bu ateşi kabul edilebilir duruma getirdik."

From now on,
patients will be
satisfied and
accepted as
customers!

Health Transformation Program (2003 - 2013)

1. Reorganize the administration and functions of the Ministry of Health,
2. *Cover all citizens under universal health care,*
3. Merge all health facilities under a single body,
4. *Grant administrative and financial autonomy to hospitals,*
5. Introduce family medicine,
6. *Attach special focus on maternal and child health,*
7. Expand preventive healthcare,
8. *Promote private sector investment in healthcare,*
9. Delegate powers to lower levels in all public institutions,
10. *Address shortage of health professionals in priority development regions*
11. Launch digital transformation in health.



Health Transformation Program (2003 - 2013)

- ❑ The 60th government of Türkiye added 3 more points to **HTP** which are the promotion of healthy lifestyle, mobilizing stakeholders and multi-dimensional health responsibility for intersectoral collaboration and deliver cross-border health services which will for furthering Türkiye's position internationally.
- ❑ *In 2003, only 39.5% of the population was satisfied with health services, whereas by 2011 this proportion had increased to 75.9%.*
- ❑ In the same period, the overall health workforce increased by 36 %, growing from 295,000 to 460,000. *(1,24 m at the end of 2021).*



The Turkish Medicines and Medical Devices Agency (TMMDA)

- ❖ «Türkiye İlaç ve Tıbbi Cihaz Kurumu» is a regulatory agency of the Government of Türkiye that acts as the highest sanitary authority in terms of **medical safety** on medicines, health products, cosmetics and personal care products.
- ❖ It is responsible for the enforcement of the Turkish Cosmetic regulations, which came into effect in 2005. The current Medical Device Regulation came into force on June 7, 2011.
A new draft regulation aligned with the new **European regulation** was published in 2018.



The Turkish Medicines and Medical Devices Agency (TMMDA)

- ❖ In 2013 the Agency proposed to permit some pharmacies to import medicine independently, bypassing legally established *The Turkish Pharmacists Association* although the Association successfully contested this decision.
- ❖ Under Law No. 7151 on Amendment of Certain Laws and Decrees related to Healthcare, published in December 2018 the *Social Security Institution* and some state institutions and organisations approved by the MoH can import medicine.
- ❖ It announced principles for the approval of secondary packaging and storage facilities for pharmaceuticals in January 2019.



Constitution of the Republic of Turkiye - Article 2

- The Republic of Turkiye is a
 - *democratic*,
 - *secular* and
 - *social* state
 - governed by *rule of law*,
 - within the notions of public *peace*,
 - national *solidarity* and *justice*,
 - ***respecting human rights***,
 - loyal to the nationalism of **Atatürk**,
 - and based on the fundamental tenets set forth in the preamble.

So, it can easily be inferred that; Health services in Turkiye must be in accordance with the provision of Article 2 in Turkish Constitution & indispensably should be defined as :

- ***Democratic***
- ***Secular***
- ***Fair***
- ***Based on solidarity***
- ***Respectful to human rights***
- ***Social***
- ***Depends on Atatürk's principles***

Constitution of the Republic of Turkiye-Article 17

- Everyone has the right to life and the right to protect and improve his/her corporeal and spiritual existence.
- The corporeal integrity of the individual shall not be violated except under **medical necessity** and in cases prescribed by law;
- and shall not be subjected to scientific or **medical experiments** without his/her consent.
- No one shall be subjected to **torture** or mal-treatment;
- No one shall be subjected to penalties or treatment **incompatible with human dignity**.

CONSTITUTION OF THE REPUBLIC OF TURKEY

Current version of the Turkish Constitution including latest amendments is available in English on our website.

Constitution of the Republic of Turkiye-Article 19

- Everyone has the right to *personal liberty and security*. No one shall be deprived of his/her liberty except in the following cases where procedure and conditions are prescribed by law:
- ... execution of measures taken in conformity with the relevant provisions of law for the **treatment**, education or rehabilitation of a person of **unsound mind, an alcoholic, drug addict, vagrant, or a person spreading contagious diseases** to be carried out in institutions when such persons constitute a **danger to the public**;

CONSTITUTION OF THE REPUBLIC OF TURKEY

Current version of the Turkish Constitution including latest amendments is available in English on our website.

Constitution of the Republic of Turkiye-Article 41

Protection of the family, and children's rights

- Family is the foundation of the Turkish society and based on the **equality** between the spouses.
- *The State shall take the necessary measures and establish the necessary organization to protect peace and welfare of the family, especially mother and children, and to ensure the instruction of family planning and its practice.*
- Every child has the right to protection and care and the right to have and maintain a personal and direct relation with his/her mother and father unless it is contrary to his/her high interests.
- *The State shall take measures for the protection of the children against all kinds of abuse and violence.*





Constitution of the Republic of Turkiye-Article 49

Provisions relating to labour

Right and duty to work

- ✓ Everyone has the right and duty to work.
- ✓ The State shall take the necessary measures to raise the standard of living of workers,
- ✓ and to protect workers and the unemployed in order to improve the general conditions of labor,
- ✓ to promote labor, to create suitable economic conditions for ***prevention of unemployment*** and to secure labor peace.



Constitution of the Republic of Turkiye-Article 56

- **Everyone has the right to live in a healthy**, balanced environment. It is the duty of the state and citizens to improve the natural environment, and to prevent environmental pollution.
- *To ensure that everyone leads their lives in conditions of physical and mental health and to secure cooperation in terms of human and material resources through economy and increased productivity, the state shall regulate central planning and functioning of the health services.*
- The state shall fulfill this task by utilizing and supervising the health and social assistance institutions, in both public and **private sectors**. In order to establish widespread health services, **general health insurance** may be introduced by law.

Constitution of the Republic of Turkiye-Article 58

• Protection of the youth

- The State shall take measures to ensure the education and development of the youth into whose keeping our independence and our Republic are entrusted, in the light of **positive science**, in line with the principles and reforms of **Atatürk**,
- and in opposition to ideas aiming at the destruction of the **indivisible integrity of the State** with its territory and nation.
- The State shall take necessary measures to **protect youth** from **addiction to alcohol and drugs, crime, gambling, and similar vices, and ignorance**.

Constitution of the Republic of Turkiye-Article 60

- ***Right to social security***
- Everyone has the right to social security.
- The State shall take the necessary measures and establish the organisation for the provision of ***social security***.

UDHR article 22 :

Everyone, as a member of society, has the right to social security...



Turkish Social Security Institution was established by the Act of (no 5510) «***Social Insurances and General Health Insurance***» and covered entire population with mandatory membership paying premium in addition to taxation.. ***Is it fair??***

Constitution of the Republic of Turkiye-Article 61

Persons requiring special protection in the field of social security

- ❖ The State shall protect the *widows and orphans* of martyrs of war and duty, together with invalid and war veterans, and ensure that they enjoy a *decent standard of living*.
- ❖ The State shall take measures to *protect the disabled* and secure their integration into community life.
- ❖ *The aged* shall be protected by the State. State assistance to, and other rights and benefits of the aged shall be regulated by law.
- ❖ The State shall take all kinds of measures for social resettlement of *children in need of protection*.
- ❖ To achieve these aims the State shall establish the necessary organizations or facilities or arrange for their establishment.

Constitution of the Republic of Turkiye-Article 90

Ratification of international treaties

- ❖ The ratification of treaties concluded with foreign states and international organisations on behalf of the Republic of Turkiye shall be subject to adoption by the Grand National Assembly (TGNA) of Turkiye **by a law** approving the ratification.
- ❖ *No appeal to the Constitutional Court shall be made with regard to these agreements, on the grounds that they are unconstitutional.*
- ❖ In the case of a conflict between international agreements, duly put into effect, concerning ***fundamental rights and freedoms*** and the laws due to differences in provisions on the same matter, the ***provisions of international agreements shall prevail.***

Constitution of the Republic of Turkiye-Article 119

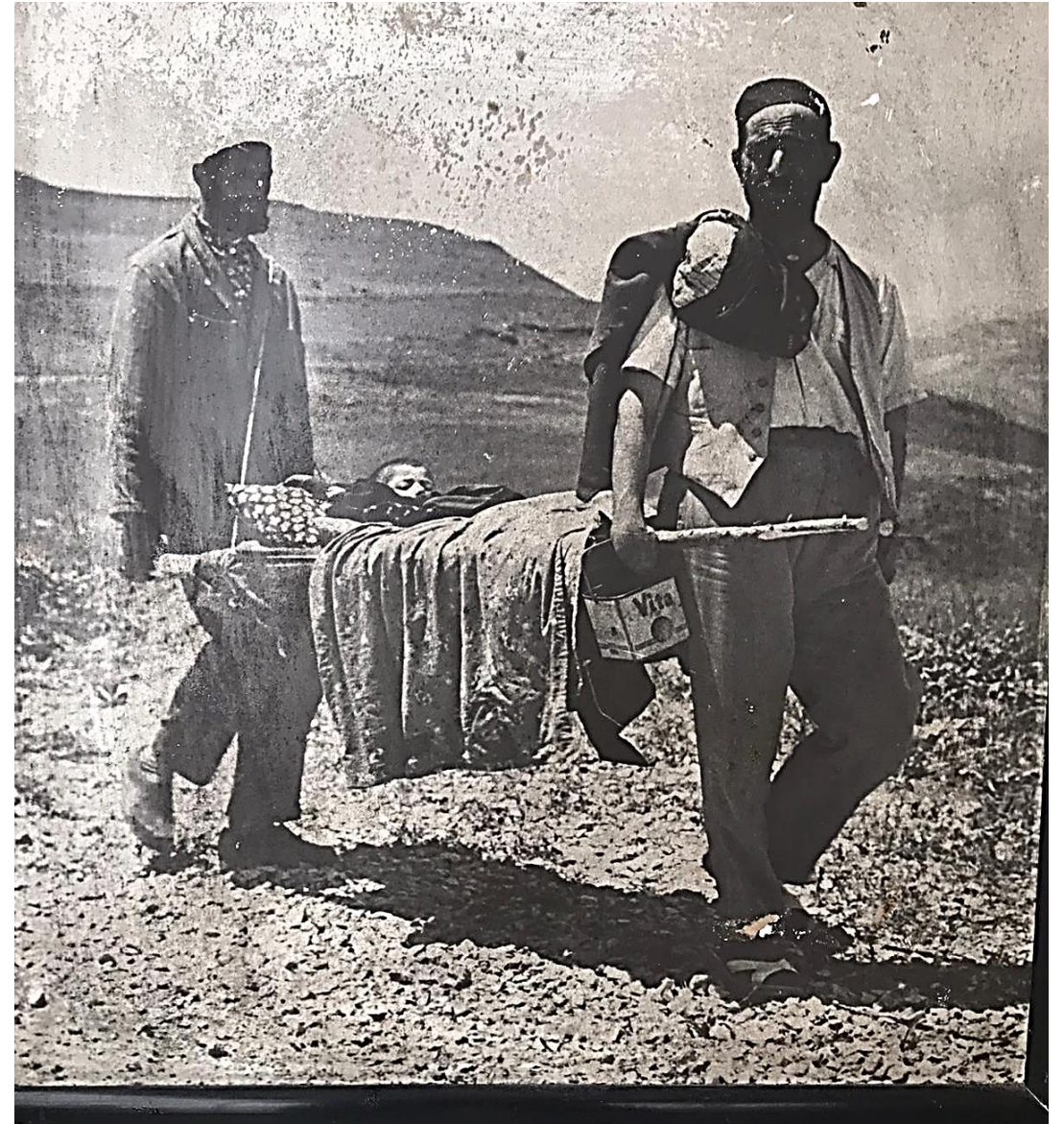
Administration of State of Emergency

In the event of **war**, the emergence of a situation necessitating war, mobilization, an **uprising**, strong rebellious actions against the motherland and the Republic, widespread acts of violence of internal or external origin threatening the indivisibility of the country and the nation, emergence of widespread acts of **violence** aimed at the destruction of the Constitutional order or of fundamental rights and freedoms, serious deterioration of public order because of acts of violence, occurrence of **natural disasters**, **outbreak of dangerous epidemic diseases** or emergence of a **serious economic crisis..**

National Medical Rescue Team (UMKE)

- ❑ National Medical Rescue Team (Turkish: *Ulusal Medikal Kurtarma Ekibi*, **UMKE**)
- ❑ Is a governmental **emergency service** organization for medical assistance in natural **disasters** and **accidents**.
- ❑ UMKE is part of the **MoH**.
- ❑ It is specialized in **medical disaster relief at site**.
- ❑ In addition to the **first aid** at the site of extraordinary events, it also provides health care with other medical personnel at nearby hospitals to preserve life, prevent the condition from getting worsened or promote recovery.





The National Medical Rescue Team (UMKE)

- Following the **August 17 İzmit** and November 12 Düzce earthquakes in Türkiye in 1999, a restructuring of the emergency organizations in the country became inevitable.
- *The National Medical Rescue Team was established by a governmental executive order in 2004.*
- With its over 4,900 personnel in 21 regions, and all 81 provinces, it is capable of providing **24/7 service** on **natural disasters** and extraordinary events in and outside the country.
- ***They were also appointed for the quake of Marash, 2023***



National Medical Rescue Team (UMKE)

- *Staff are selected among specialized health care personnel on voluntary basis. Personnel from other governmental or private health organizations can join and participate at training and exercises at various times during the year.*
- The appointment for participation at **disaster relief** is ordered by the Ministry or the provincial Governor of the event site.
- *To carry out the necessary logistics, transportation and technical works, voluntary support personnel are at service.*



**10
minutes**





**REPUBLIC OF TURKEY
MINISTRY OF HEALTH
GENERAL DIRECTORATE OF
PUBLIC HEALTH**





Prof. Dr. Sedat KAYGUSUZ
Genel Müdür

Bütçe ve Projeler Dairesi Başkanlığı V.
Dr. Hakan GÜDÜCÜ

Hukuk ve Mevzuat Dairesi Başkanlığı
Av. Halil ŞEN

Uzm. Dr. Bekir KESKİNKILIÇ
Genel Müdür Yardımcısı



Dr. Öğr. Üyesi Süleyman ÖZSARI
Genel Müdür Yardımcısı



Doç. Dr. M. Enes GÖKLER
Genel Müdür Yardımcısı

Kanser Dairesi Başkanlığı
Dr. Murat TÜRKYILMAZ

Tütün ve Madde Bağımlılığı ile
Mücadele Dairesi Başkanlığı
Dr. Sertaç POLAT

Kadın ve Üreme Sağlığı
Dairesi Başkanlığı
Dr. Tuba Esra ŞAHLAR

Çocuk ve Ergen Sağlığı
Dairesi Başkanlığı
Dr. Başak TEZEL

Ruh Sağlığı Dairesi Başkanlığı
Uzm. Dr. Esra ALATAŞ

Sağlıklı Beslenme ve Hareketli Hayat
Dairesi Başkanlığı
Doç. Dr. Mustafa Kemal BAŞARALI

Kronik Hastalıklar ve Yaşlı Sağlığı
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Uzm. Dr. Mehmet Erdem ALAGÜNEY

Çalışan Sağlığı Dairesi Başkanlığı
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Birinci Basamak Sağlık Kuruluşları
Planlama ve Organizasyon Dairesi Bşk.
Tacettin KIZILBOĞA

Göç Sağlığı Dairesi Başkanlığı
Zehra UZUNDURUKAN

Toplum Sağlığı Hizmetleri ve Eğitim
Dairesi Başkanlığı
Dr. Aslıhan KÜLEKÇİ UĞUR

Kalite Temsilciliği
Betül Faika SÖNMEZ

Çevre Sağlığı Dairesi Başkanlığı
Ecz. Elmas SARI

Mikrobiyoloji Referans Laboratuvarları
ve Biyolojik Ürünler Dairesi Başkanlığı
Doç. Dr. Serap SÜZÜK YILDIZ

Tüketici Güvenliği ve Halk Sağlığı
Laboratuvarları Dairesi Başkanlığı
Uzm. Dr. Nurgül ÖZCAN

Aşı ile Önlenilebilir Hastalıklar
Dairesi Başkanlığı
Doç. Dr. Ramazan Azim OKYAY

Bulaşıcı Hastalıklar ve Erken Uyarı
Dairesi Başkanlığı
Doç. Dr. Sabahat ÇEKEN

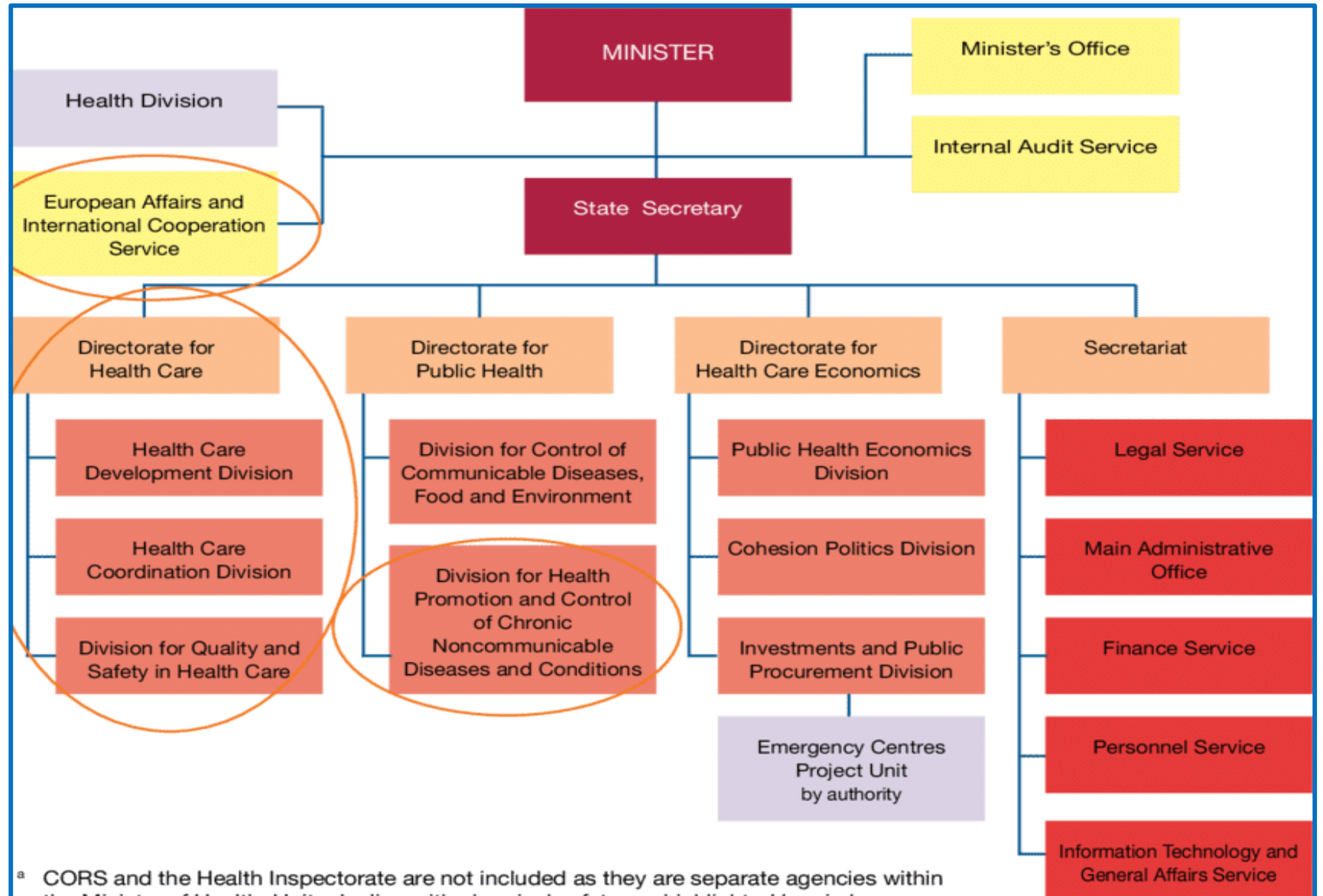
Tüberküloz Dairesi Başkanlığı
Dr. Kanuni KEKLIK

Zoonotik ve Vektörel Hastalıklar
Dairesi Başkanlığı V.
Ecz. Elmas SARI

Stok Yönetimi ve Lojistik
Dairesi Başkanlığı
Ahmet ÖNER

Teşkilat Şeması (saglik.gov.tr) 23.3.23

Organisational Chart of Turkish Ministry of Health



Border and Coasts General Directorate of Health

The institution, which was restructured with the Decree Law no. 663 on the Organization and Duties of the

Border and Coasts General Directorate of Health,

the MoH and its Affiliates; International legislation such

as the *Lausanne Peace Treaty, the Montreux Straits*

Convention, the International Health Regulations-IHR

(2005), the ILO (*International Labor Organization*)

Conventions, the Transfer of Funerals Agreement;



T.C. SAĞLIK BAKANLIĞI
TÜRKİYE HUDUT VE SAHİLLER SAĞLIK
GENEL MÜDÜRLÜĞÜ



Border and Coasts General Directorate of Health

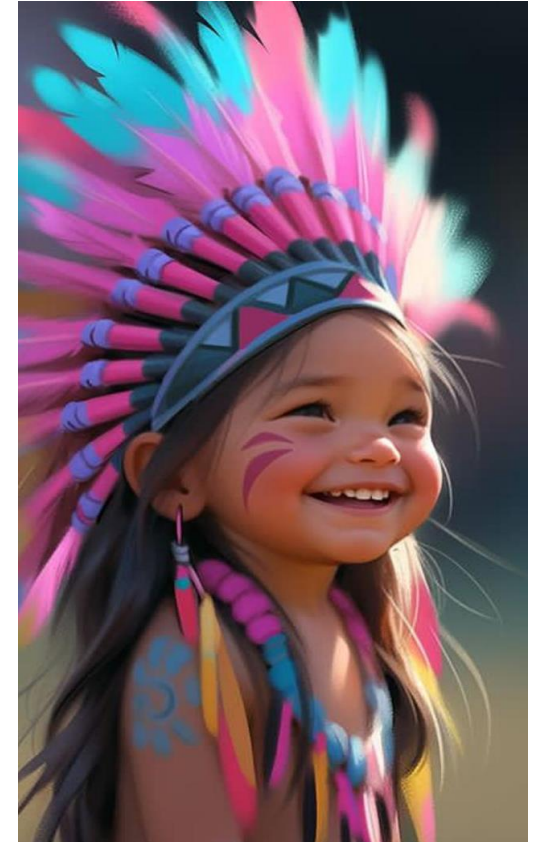
It is responsible for fulfilling basic responsibilities such as preventing **contagious and epidemic diseases** from entering the country within the framework of national legislation such as the **General Sanitary Law** no. 1593 and the Official Ship Sanitation Law no. 2548 and performing sanitary inspections on vessels that will transit the **Turkish Straits** or dock at ports.

This general directorate is a private budget institution affiliated to the MoH.

Its head office is in Istanbul.



T.C. SAĞLIK BAKANLIĞI
TÜRKİYE HUDUT VE SAHİLLER SAĞLIK
GENEL MÜDÜRLÜĞÜ



Healthcare in **Turkiye-1**

➤ Healthcare in **Turkiye**

consists of a mix of public and private health services.

➤ Turkiye introduced **universal health care** in 2003.

➤ Known as Universal Health Insurance (***Genel Sağlık Sigortası***), it is funded by a tax surcharge on employers, currently at 5%.

➤ Public-sector funding covers approximately 75.2% of health expenditures.

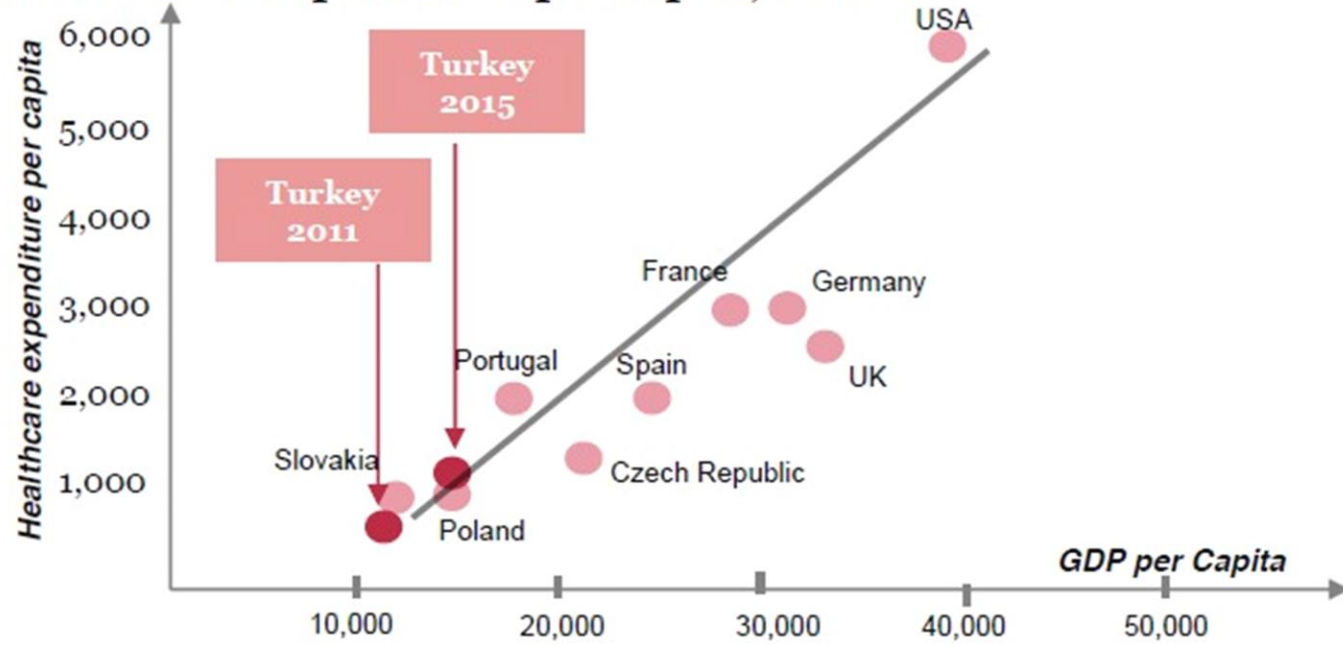
➤ Despite the **universal health care**, total expenditure on health as a share of GDP is the **lowest among OECD** countries at 6.3% of GDP, much lower than the OECD average of 9.3%.

Healthcare in **Turkiye-2**

- ✓ Median age in Turkiye is 34 (2023) compared to 44 in EU countries.
- ✓ Aging population is the prime reason for higher healthcare expenditure in the developed world.
 - ✓ Average **life expectancy** is 78.5 years, compared with the EU average of 81 years.
- ✓ Turkiye has one of the highest rates of **obesity** in the world, with nearly one third (29.5%) of its adult population obese.



Healthcare Expenditure per capita, USD



Healthcare Spending Per Capita in Turkey, USD



Source: OECD, MoH, WHO, PwC Analysis, BMI, European Commission Social Climate Report, TurkStat



Health spending Total / Government/compulsory / Voluntary, US dollars/capita, 2021 or latest available

Source: Health expenditure and financing: Health expenditure indicators

Show:

Chart

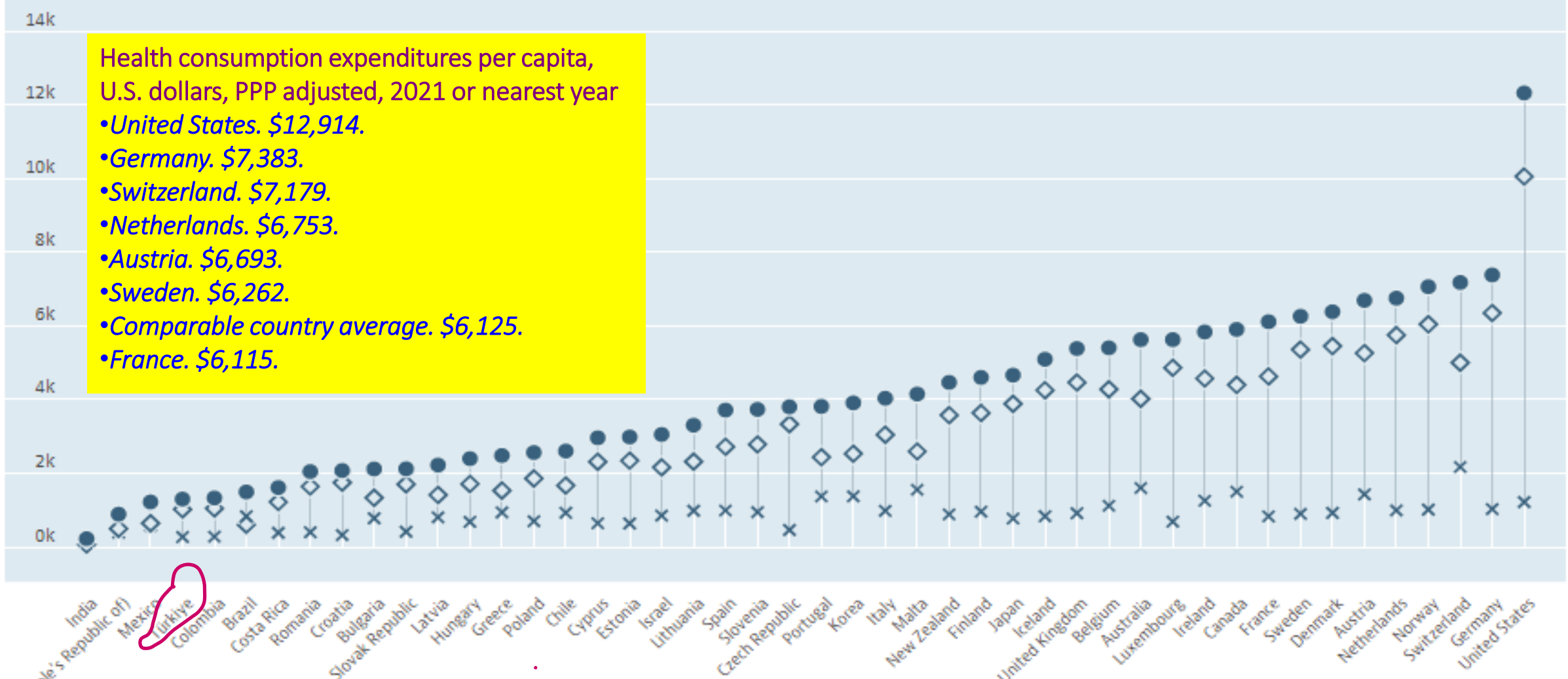
Table

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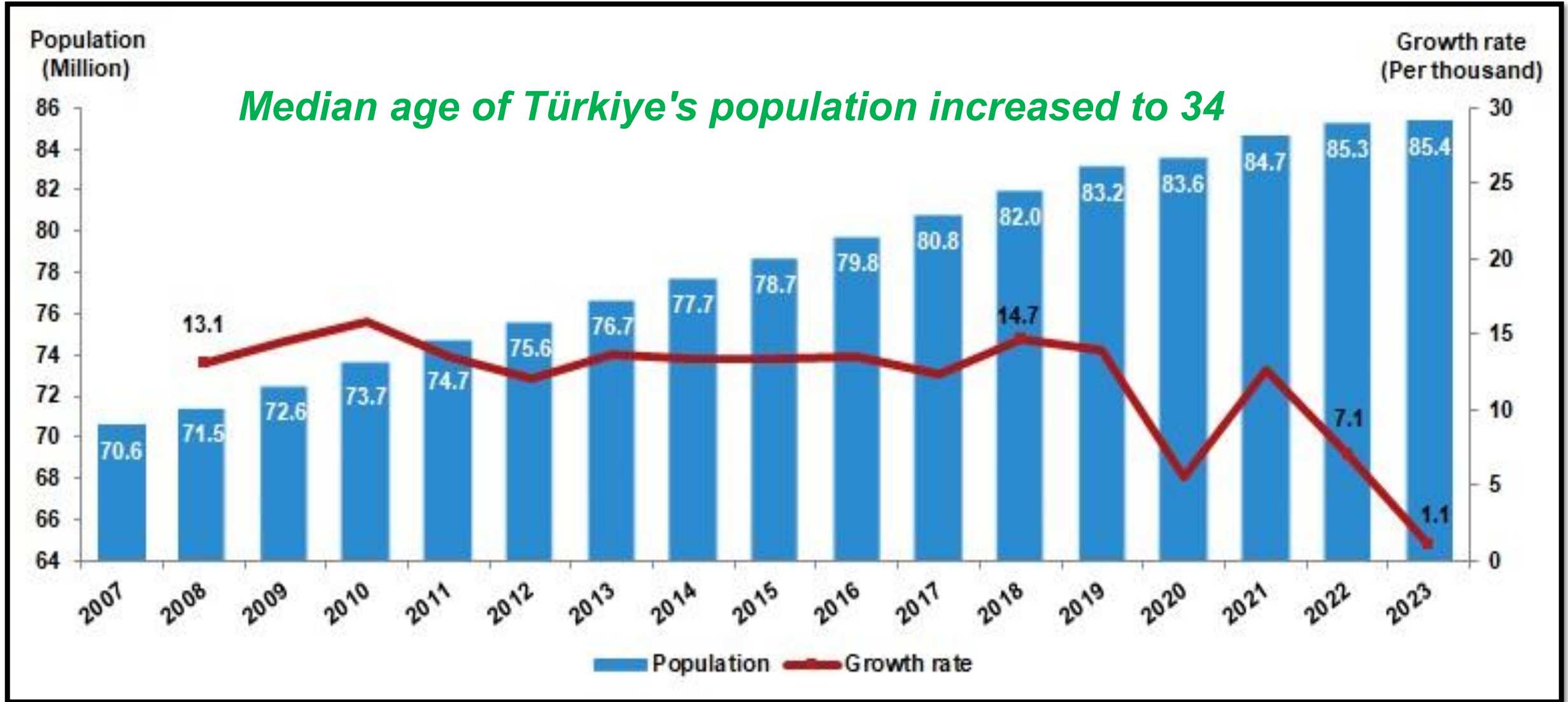
My pinboard



Health resources - Health spending - OECD Data 24.2.23

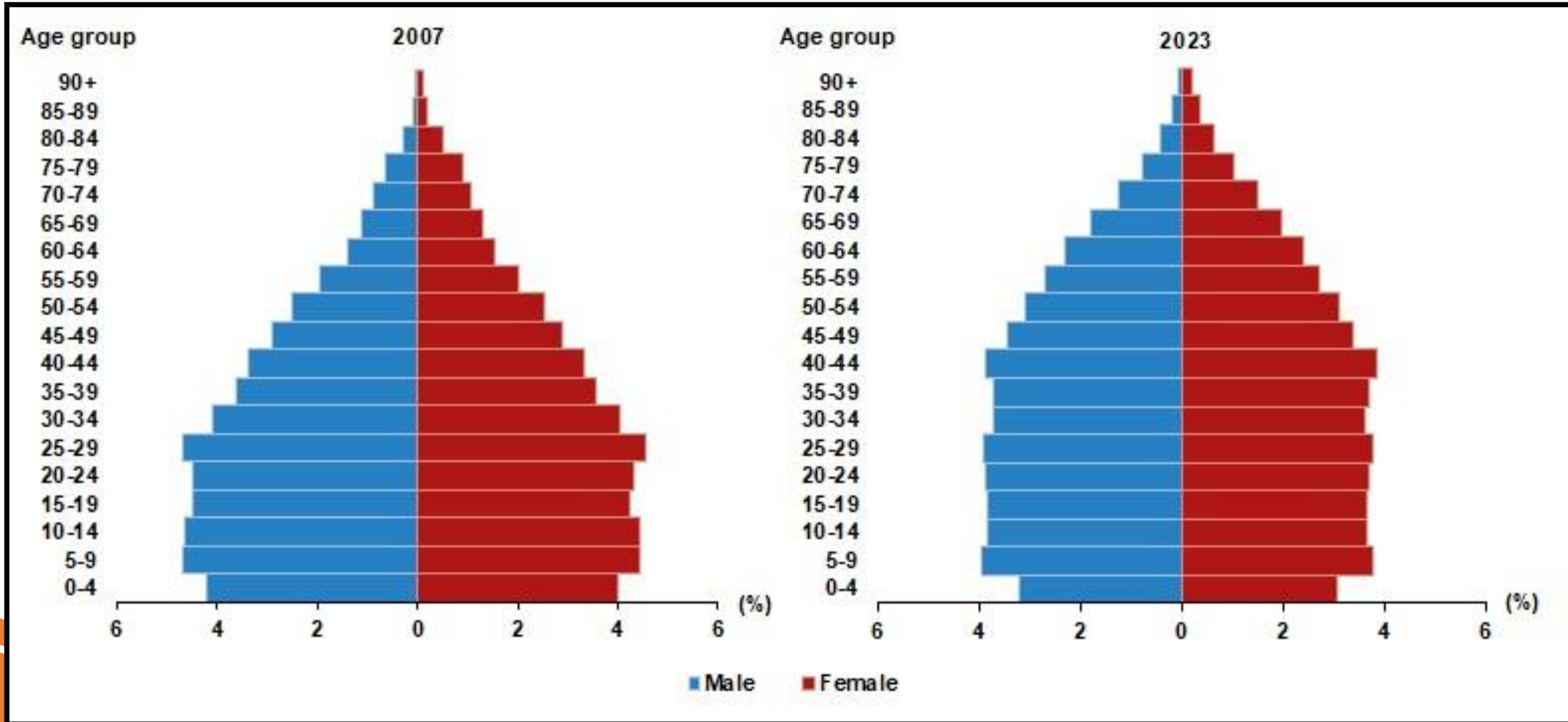
Population and annual population growth rate, 2007-2023

Median age of Türkiye's population increased to 34



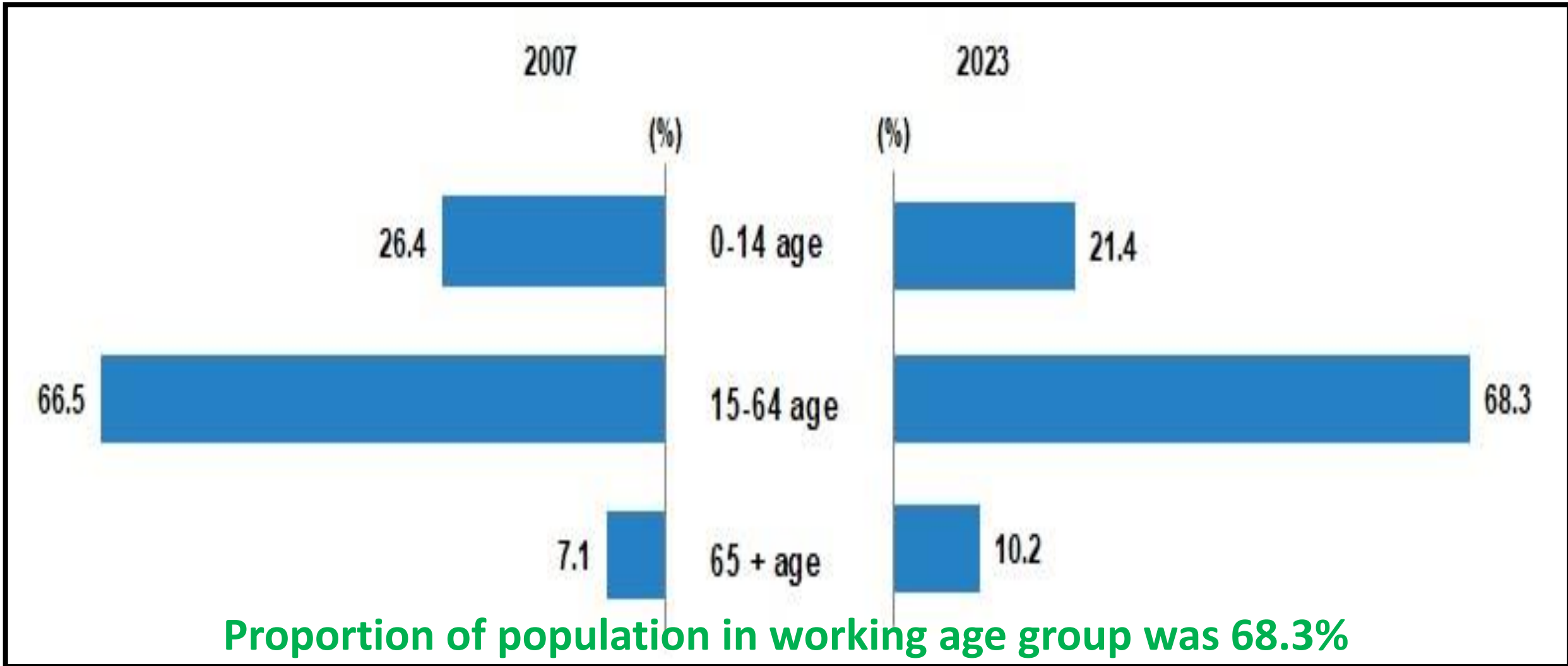
<https://data.tuik.gov.tr/Bulten/Index?p=The-Results-of-Address-Based-Population-Registration-System-2023-49684&dil=2> 19.2.24

Structural change in population pyramid



<https://data.tuik.gov.tr/Bulten/Index?p=The-Results-of-Address-Based-Population-Registration-System-2023-49684&dil=2> 19.2.24

Proportion of population by age groups, 2007, 2022



<https://data.tuik.gov.tr/Bulten/Index?p=The-Results-of-Address-Based-Population-Registration-System-2023-49684&dil=2> 19.2.24

Medical tourism in **Turkiye**

Medical Tourism In **Turkey**



Expect To Host **2 Million**
Foreigners For Treatment By 2023



2nd In The World With 47 JCI
Accredited Hospitals



So Far, Served **586,754** People In
2022

[Medical Tourism in Turkey Statistics 2023 \(clinicspots.com\)](https://www.clinicspots.com)

In 2018, 662,087 foreigners traveled to Turkiye only to take advantage of the excellent and affordable medical care offered in Turkiye. In 2020; 388,150 patients preferred Turkiye to receive medical services. We can see a notable drop in the number of health tourists, but it is due to the **global epidemic**. However, as we can see from the above chart, post-pandemic Turkiye witnessed a significant number of medical tourists and served them with quality

Medical tourism in **Turkiye**

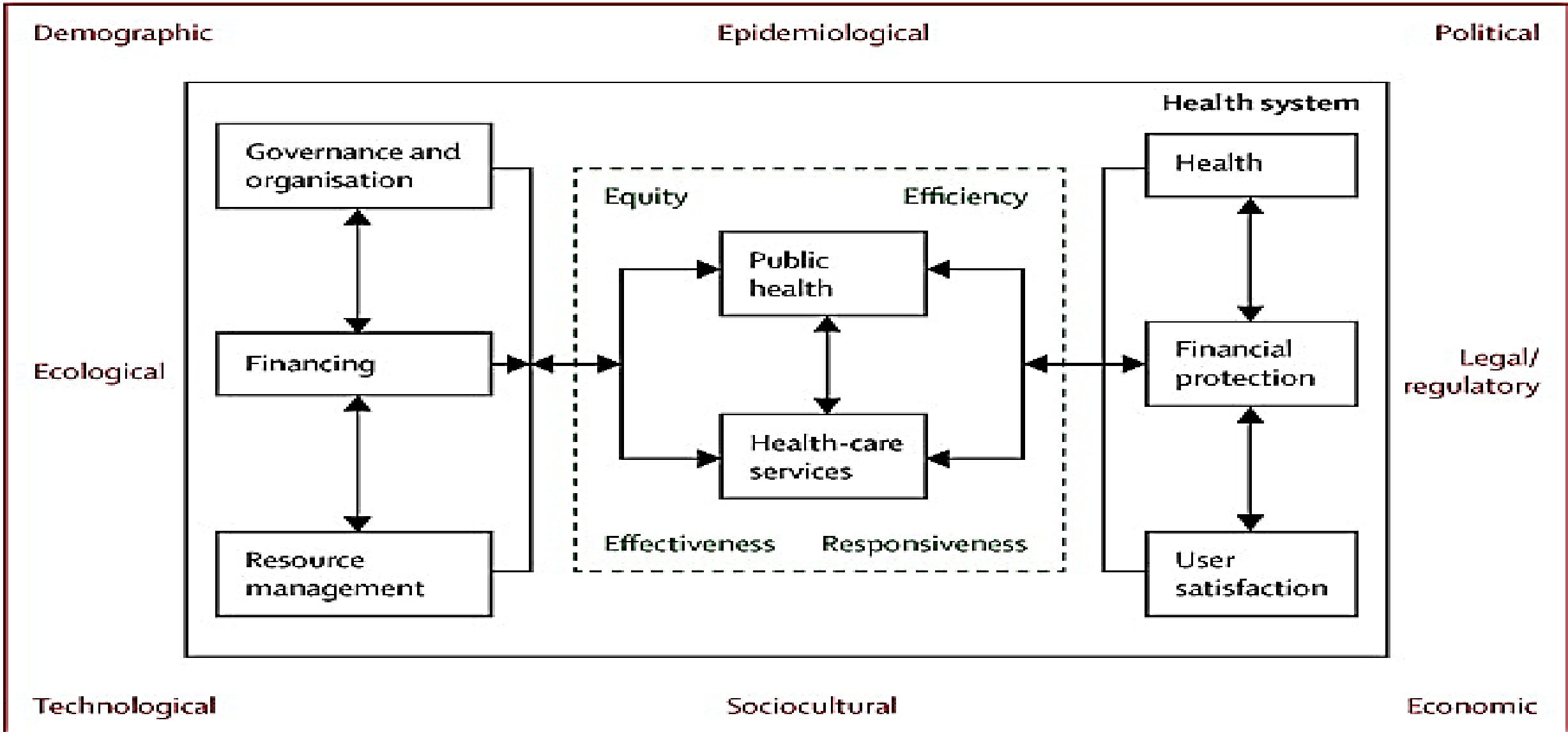
According to Glasgow Research & Consulting, there were an estimated **23 million medical tourists** worldwide in **2019**, with **2.3 million** traveling from the US.

Did you know that Turkiye is among the top 10 countries for medical tourism worldwide?

And over 32% of individuals getting their treatment from Turkiye are medical tourists.

From affordability and exceptionally skilled medical professionals, to US-accredited hospitals, Turkiye has everything a medical tourist desires.

Healthcare Systematic



US President Franklin Roosevelt :

The Four Freedoms



Jan. 1941



Freedom
of Speech



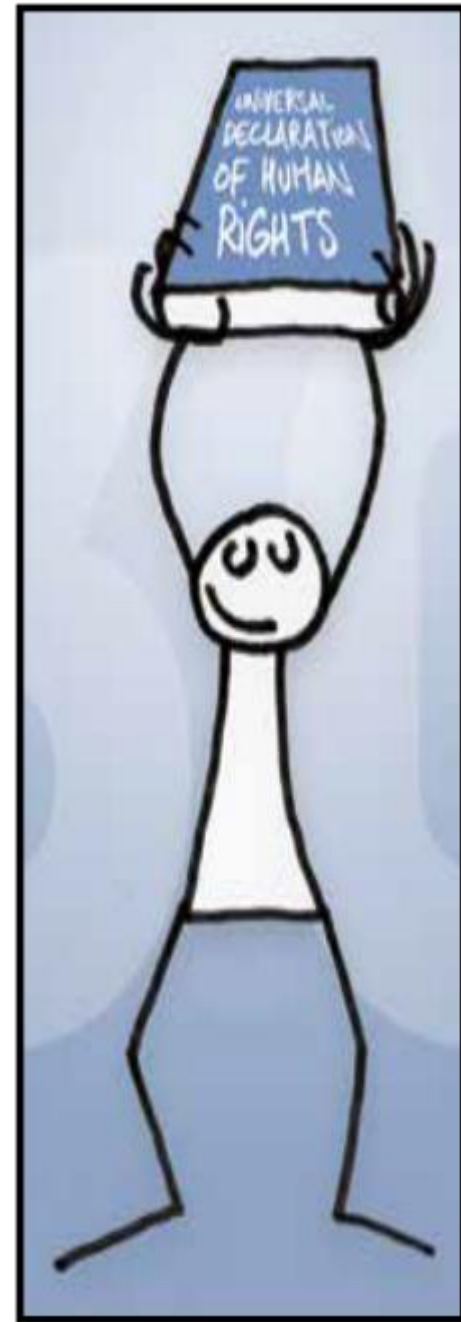
Freedom
of Worship



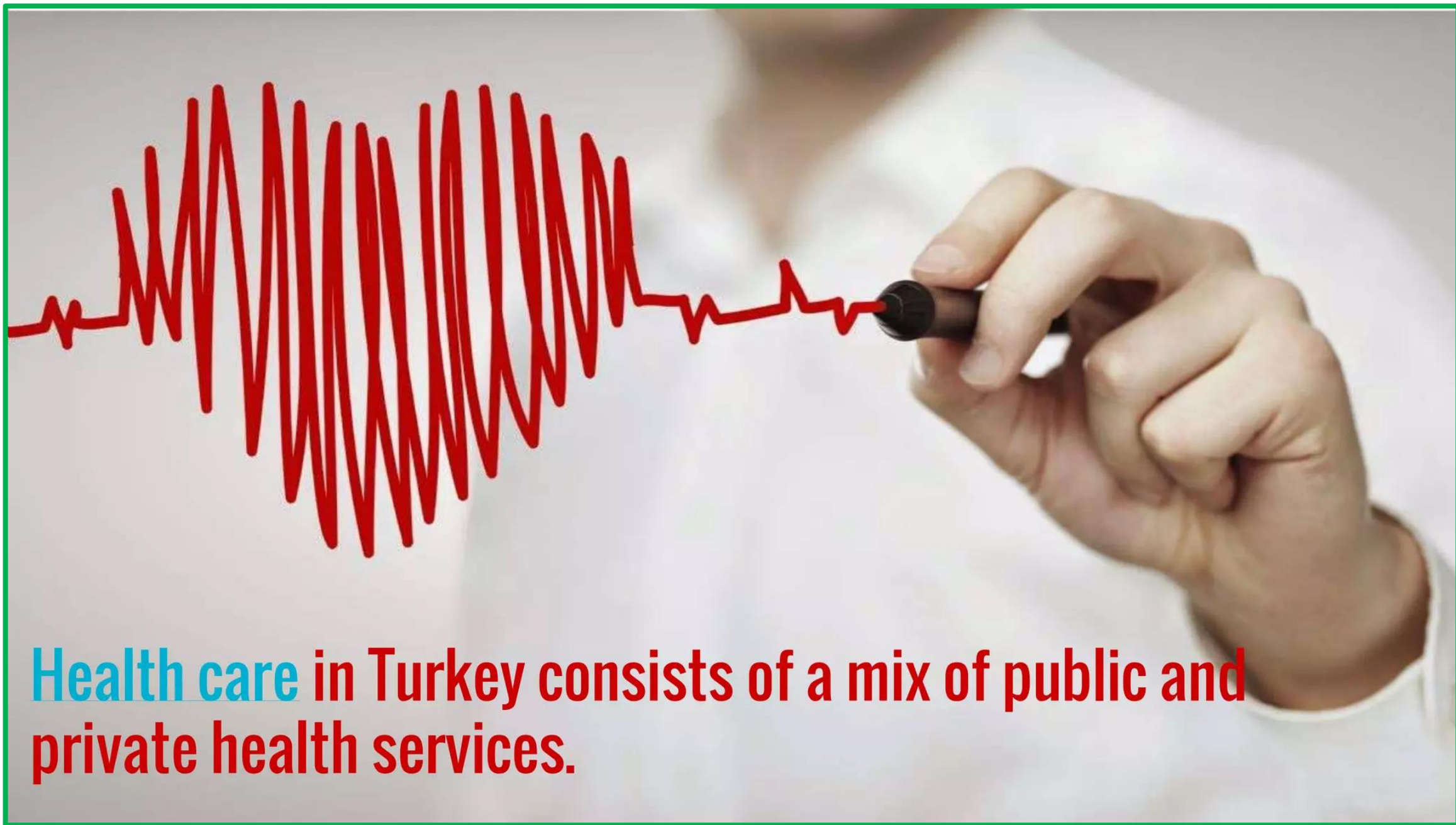
Freedom
from Want



Freedom
from Fear







Health care in Turkey consists of a mix of public and private health services.



The Turkish healthcare system used to be dominated by a centralized state system run by the Ministry of Health.

Jan. 1

Some url's for Turkish MoH

https://hsgm.saglik.gov.tr/depo/birimler/saglikli-beslenme-hareketli-hayat-db/TURKEY_DIETARY_GUIDELINES/TBSA_2017_Ozet_Bulgular_ENGpdf.pdf

<https://hsgm.saglik.gov.tr/tr/beslenmehareket-yayinlar1/beslenmehareket-ingilizce-yayinlar>

<https://hsgm.saglik.gov.tr/depo/birimler/saglikli-beslenme-hareketli-hayat-db/Yayinlar/ingilizce-yayinlar/Cosi-Tur-2013.pdf>

https://hsgm.saglik.gov.tr/depo/birimler/saglikli-beslenme-hareketli-hayat-db/TBSA_RAPOR_KITAP_2017_ENG_.pdf



**Any QUESTIONS?
or COMMENTS??**

f o r

*Thank you
for joining..*



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