

THE IMPACTS OF ECONOMIC CRISIS ON HEALTH THE TURKISH CASE

ASSOC. PROF. ÜMİT ÇIRAKLI
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ABSAM HEALTH POLICIES CENTRE

ABSAM Health Policies Centre (Ankara, Turkey) aims to adding years to life and life to years, and so contributing to community development through producing original, creative, usable and innovative knowledge based on R&D by carrying out consultancy, research, training and publishing activities in an integrated manner in all related areas of health, health care and health systems; particularly policy, management and economic dimensions.

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The Health Policy Books aims to present critical, interdisciplinary eBooks around policy, economics and management issues related to health, health services, and health systems. Each volume provides a critical approach to a particular issue or important topic, and is of interest and relevance to students, scholars and practitioners across the health policy, health economics and health management sciences. The books are produced by ABSAM Health Policies Centre.

List of Titles

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FORWARD

The aim of this study is to reveal the impacts of economic crisis on health and health system in Turkey. In the study, the economic crisis of 1994, 2001 and 2009 were examined, and the impacts of these economic crisis on 23 health and health related indicator which can be obtained from secondary data sources were examined by the ARDL bound test approach, which is one of the econometric time series analyzes. In the study, indicators related to the health are used as dependent variables, while macroeconomic indicators (inflation, real GDP and unemployment), are used as independent variables. The economic crisis of 1994, 2001 and 2009 are included as dummy variables in the models. Eviews 9.5 package program was used for the analysis of the data obtained in the study by ARDL boundary test.

In terms of the effects of economic crisis on health in Turkey, as a result of the analysis made, it is found that the economic crisis of 1994 was found to have significant ($p < 0.05$) negative effect on the 5 variables, which are the mortality rate under 5, crude death rate, crude suicide rate, vegetable-fruit consumption and number of assistant health personnel, of 23 variables. On the other hand, there is no variable that the 1994 economic crisis have had significant positive effect on ($p > 0.05$). The 2001 economic crisis was found to have significantly negative affect 7 out of 23 variables, including infant mortality rate, crude suicide rate, vegetable-fruit consumption, sugar consumption, public

and total health expenditures, and total number of hospital beds. On the other hand, it was found that the 2001 economic crisis affected significantly and positively the variables of the mother mortality rate, DBT, polio and measles vaccination rates, death rates from traffic accidents, alcohol consumption and the Ministry of Health budget. In the 2009 economic crisis, it was found that 3 of the 23 variables (sugar consumption, private health expenditures and total health expenditures) were significantly and negatively affected ($p < 0.05$). On the other hand, the 2009 economic crisis was found to have significant positive effect ($p < 0.05$) on 4 variables including infant mortality rate, alcohol consumption, vegetable-fruit consumption and public health expenditures.

From the results of this study, it is concluded that the effects of crises on health generally show variability. However, it is evaluated that the effects of economic crises on the health, the severity of the crisis, the developments in health related behaviors and the effects on the health system within the policy preference are also important factors. It is recommended that health spending should be increased especially during the economic crisis periods in order to prevent possible negative effects of economic crisis in Turkey. Besides, positive effects of economic crisis on some health behaviors are considered as opportunities and, it is suggested that it should be given weight to trainings which may make these behaviors change permanent.

Health Policy Books

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ABBREVIATIONS

EU	European Union
USA	United States of America
AHA	American Hospital Association
ARD	Autoregressive Distributed Lag
BUMKO	General Directorate of Budget and Financial Control
CED	Council of European Dentists
DPT	Diphtheria, Pertussis, Tetanus
WHO EU	World Health Organization European Union Region
ECDC	European Center for Disease Prevention and Control
ECM	Error Correction Model
EPHA	European Public Health Alliance
EUROFOUND	European Foundation for the Improvement of Living and Working Conditions
EU-27	27 Member States of the European Union
EWS	Early Warning System
GNP	Gross National Product
GHI	General Health Insurance
GDP	Gross Domestic Product
HOPE	European Hospital and Healthcare Federation
HPP	Healthy Public Policy
HTA	Health Technology Assessment

IMF	International Monetary Found
VAT	Value Added Tax
KPGM	KPGM International Cooperative
MBCMR	Macfarlane Burnet Centre for Medical Research
OECD	Organization for Economic Co-operation and Development
OLS	Ordinary Least Squares
MoH	Ministry of Health
SSI	Social Security Institution
SII	Social Insurance Institution
CBTR	Central Bank of the Turkish Republic
TAMR	Tobacco and Alcohol Market Regulatory Authority
TURKSTAT	Turkish Statistical Institute
TMA	Turkish Medical Association
UK	United Kingdom
UNCTAD	United Nations Conference on Trade and Development
UNICEF	United Nations International Children's Emergency Fund
USAID	United States Agency International Development
WFPHA	World Federation of Public Health Associations
WHO	World Health Organization

