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Evaluating the Behaviours of Citizens and Physicians During Healthcare System Changes in Turkey

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Abstract

This study may provide insights into the positive and negative perceptions of physicians and citizens in Turkey regarding the Transformation in Health Project.We aimed to evaluate the views of physicians and citizens regarding the changing healthcare system using different questionnaires.We interviewed 1190 actively working physicians and 1997 citizens using face-to-face questionnaires to determine how the changing healthcare system has affected the behaviours of physicians and citizens. When asked whether the behaviours of patients and relatives had improved, 495 physicians (41.6%) answered yes and 580 (48.7%) answered no. When citizens were asked whether the behaviours of physicians had improved, 1399 (70.1%) answered yes and 362 (18.1%) answered no. According to the results of this study, there have been some changes in our healthcare system associated with the Transformation in Health Project.

Keywords: Healthcare system changes, behaviour, physician, citizen, Turkey

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Introduction

The Ministry of Health of the Republic of Turkey was founded in 1920 and established many legal regulations in various fields between 1920 and 1938. Considering the conditions at the time, the main objectives of these regulations were to solve the problems that occurred after the war, train more healthcare providers, improve healthcare providers' education, create an organization to bring healthcare centres to villages, and expand preventive healthcare services [1-4]. Until the 1980s, there had been improvements in the services and regulations of healthcare infrastructure and organization. Since 1983, there have been important modifications to healthcare policies [1-2,4].

According to the 1982 Constitution of the Republic of Turkey, the duty of the government is to provide a healthy environment and continuous healthcare services to everyone living within the borders of the country [5-7]. The ethical studies in the early 1980s found that healthcare services must be "patient-centred". The appreciation of autonomy, beneficence, non-maleficence and justice as the main ethical principals in 1979 was a clear expression of this paradigm [8-11].

Improving healthcare services is the main priority not only for Turkey but for many other countries. Even developed countries, such as the USA and those of the UK, have conducted many new research projects on healthcare services [1,2,12]. The main goal of the World Bank's projects until the end of 1990 was reform in healthcare. The reform projects were renamed healthcare projects during this period. These healthcare reform projects sought to improve patient satisfaction and provide high quality healthcare services at affordable prices [1-3,12]. The Universal Declaration of Human Rights (1948), Declaration of Lisbon (1981), Declaration of Amsterdam (1994), and Regulations on the Rights of the Patient in Turkey (1998) state that "Patients must be treated humanely, knowing that everyone has the right to live a healthy life and preserve his/her moral and material presence. No institution or person has the authority to remove these rights". These applications were supported with a directive in 2005 [7,10,13-19].

By the 2000s, needs and expectations changed. Especially in 2003, there were numerous changes to healthcare services. This process of change is ongoing and has changed the behaviours of both healthcare providers and citizens [1,2,20].

The subjects of our research are "the various behaviours of the physicians that began to provide patient-centred care" and "the change, whether positive or negative, in the behaviours of the patients and their relatives who see themselves in the centre of this service". We need to emphasize that patients and physicians are not two rival teams or sides. Instead, patients and physicians are two parts of the same process. Medicine is not applied against the patient but is an activity that can be applied only "with the patient" and "for the patient" [21].

To provide the most basic human right, "the right to life", "the right to health" must also be ensured. Physicians who are preserving, developing, and creating health play an important role in providing these rights [22]. The report prepared by the Ministry of Health of the Republic of Turkey mentions the steps needed to reconstruct healthcare to reconstruct the public. The report considers this a project and explains that its purpose is to improve the quality of life of citizens and guarantee their health. Additionally, guaranteeing their rights to life and living a healthy life are the main indicators of a welfare state [1].

Materials and Methods

At least 1145 people, including physicians and citizens, completed in-person questionnaires with physicians and citizens in cities determined according to the CSRU (Classification of Statistical Region Units) of TSI (Turkish Statistical Institute); this sample size was chosen based on a power analysis (with alpha=0.05, 1-beta=0.80 to present 6% change in the success of transformation in healthcare). More than the determined number of questionnaires were completed; 1997 citizens in seventeen cities and 1190 physicians in fifteen cities were interviewed. Informed consent was obtained after the questions were answered. The pollsters began in January 2014, and the research was completed in three months.

The citizens were interviewed and the research was conducted according to the TSI level in the following seventeen cities: İstanbul, Çanakkale, and Kocaeli in the Marmara Region; İzmir and Uşak in the Aegean Region; Ankara, Konya, Eskişehir, and Sivas in the Central Anatolia Region; Antalya and Adana in the Mediterranean Region; Malatya, Erzurum, and Van in the Eastern Anatolia Region; Adıyaman in the Southeastern Anatolia Region; and Samsun and Giresun in the Black Sea Region.

The physicians were interviewed, and the research was conducted according to the CSRU in the following fifteen cities: İstanbul, Çanakkale, and Kocaeli in the Marmara Region; İzmir and Uşak in the Aegean Region; Ankara, Konya, Eskişehir, and Sivas in the Central Anatolia Region; Antalya and Adana in the Mediterranean Region; Malatya and Erzurum in the East Anatolia Region; Adıyaman in the Southeastern Anatolia Region; and Giresun in the Black Sea Region.

The CSRU of the TSI was the primary criterion when choosing the cities. In the cities in which the questionnaires could not be completed, alternative equivalent cities were determined by the TSI.

We attempted to have questionnaires completed in Samsun and Van, which were not included in the cities where the physicians were interviewed. Some of the physicians in these cities could not be reached, and others refused to voluntarily fill out the questionnaire. Thus, physician questionnaires are not presented from those two cities.

The number of questionnaires was intended to be divided equally between the cities. Based on interest in the questionnaire, additional questionnaires were completed in some cities.

The questions for the physicians and citizens were created separately. Our questionnaire had two parts, totalling 23 questions. The questions in the first part were about demographic factors (age, sex, educational status, monthly income, social security, institution, department, and years in service). The questions in the second part were about the changing healthcare system and behaviours.

CSRU (Classification of Statistical Region Units) are defined to minimize the differences between regions by analyzing socio-economical characteristics of each region to produce data compatible with the NUTS criteria of the European Union (EU). The NUTS classification is used in countries that are members of the EU. Candidate members use the developed classification (i.e., CSRU). This classification has three levels. In the first level, 81 cities were defined in concordance with the administrative structure, and in the third level, region units were defined. Then, 26 second-level region units were defined considering their specified population and economic, social, cultural and geographic similarities of the cities in that region. Finally, when grouping the second-level region units, twelve were defined as first-level regional units. http://tuikapp.tuik.gov.tr/DIESS/SiniflamaSurumDetayAction.do?surumId=164 (accessed on 01.05.2014)

Results

Results from Physicians

More males than females completed the questionnaire. The number of physicians between the ages of 31 and 40 was equal the number of those between 41 and 50, and there were more physicians in those two groups than in the other age groups.

Of the 1190 physicians, 1115 (93.7%) knew and 70 (5.9%) did not know that our healthcare system has been changing since 2003 with the Transformation in Health Project. Five (0.4%) did not answer the question about the change. In total, 495 physicians agreed (41.6%) and 580 physicians disagreed (48.7%) with the statement that the behaviours of patients and their relatives improved with the changing healthcare system; 104 physicians answered "I have no idea" (8.7%), and eleven physicians did not answer (0.9%).

To the question "Have your behaviours as a physician changed in a positive manner with respect to patients and their relatives?", 494 physicians answered yes (41.5%), 479 physicians answered no (40.3%), 188 physicians answered "I have no idea" (15.8%), and 29 physicians did not answer (2.4%). For the statement "During this process of change, patients and their relatives have been nicer to physicians", 417 physicians agreed (35%), 634 physicians disagreed (53.3%), 134 physicians had no idea (11.3%), and five physicians did not answer (0.4%).

For the statement "During this process of change, patients and their relatives have been ruder to physicians", 587 physicians agreed (49.3%), 436 physicians disagreed (36.6%), 161 physicians had no idea (13.5%), and six physicians did not answer (0.5%).

For the statement "With the change in the healthcare system, the rights of patients have become more respected", 740 physicians agreed (62.2%), 236 physicians disagreed (19.8%), 209 physicians had no idea (17.6%), and five physicians did not answer (0.4%). For the statement "The increased awareness of the rights of patients increased the possibility of violence against physicians during this process of change in our healthcare system," 680 physicians agreed (57.1%), 328 physicians disagreed (27.6%), 174 physicians had no idea (14.6%), and eight physicians did not answer (0.7%).

For the statement "The Transformation in Health Project made the Patient Rights Councils work more efficiently," 489 physicians agreed (41.1%), 390 physicians disagreed (32.8%), 304 physicians had no idea (25.5%), and seven physicians did not answer (0.6%). For the statement "The Patient Rights Councils helped patients and their relatives calm down and prevented them from committing violence," 351 physicians agreed (29.5%), 648 physicians disagreed (54.5%), 175 physicians had no idea (14.7%), and sixteen physicians did not answer (1.3%).

For the statement "The Patient Rights Councils prevented the physicians from serving," 470 physicians agreed (39.5%), 497 physicians disagreed (41.8%), 213 physicians had no idea (17.9%), and ten physicians did not answer (0.8%). To the question "What type of approach is used with the changing healthcare system?", 456 physicians answered "patient-centred approach" (38.3%), 175 physicians answered "a physician-centred approach" (14.7%), 251 physicians answered "both physician and patient-centred approaches" (21.1%), 291 physicians answered "neither a physician nor a patient-centred approach" (24.5%), and seventeen physicians did not answer (1.4%).

For the statement "A physician-centred approach to our healthcare system would be appropriate," 907 physicians agreed (76.2%), 200 physicians disagreed (16.8%), 73 physicians had no idea (6.1%), and ten physicians did not answer (0.8%). For the statement "A patient-centred approach to our healthcare system would be appropriate," 491 physicians agreed (41.3%), 584 physicians disagreed (49.1%), 102 physicians had no idea (8.6%), and thirteen physicians did not answer (1.1%).

For the statement "Patients would behave more nicely and more reasonably in a physician-centred healthcare system," 785 physicians agreed (66%), 241 physicians disagreed (20.3%), 150 physicians had no idea (12.6%), and fourteen physicians did not answer (1.2%).

For the question on profession choice, 1123 physicians chose their profession willingly (94.4%), 58 physicians choose their profession unwillingly (4.9%), and nine physicians did not answer (0.8%). For the statement "I am doing my job with joy," 984 physicians agreed (82.7%), 195 physicians disagreed (16.4%), and eleven physicians did not answer (0.9%).

For the statement "The Transformation in Health Project led me do my job with joy," 429 physicians agreed (36.1%), 731 physicians disagreed (61.4) and 30 physicians did not answer (2.5%). Finally, 423 physicians found the Transformation in Health project successful (35.5%), 570 physicians did not find it successful (47.9%), 184 physicians had no idea (15.5%) and thirteen physicians did not answer (1.1%).

Results from Citizens

Most of the citizens participating in our study were high school graduates, and most were between 18 and 30 years old. Additionally, the number of male participants was higher than the number of female participants. Of 1997 citizens, 1478 of them (74%) knew and 499 of them (25%) did not know that our healthcare system has been changing since 2003 with the Transformation in Health Project. Twenty citizens did not answer this question (1%).

In total, 1399 citizens agreed (70.1%) and 362 citizens disagreed (18.1%) with the statement that behaviours of physicians changed in a positive way with the changing healthcare system. Additionally, 228 citizens answered "I have no idea" (11.4%), and eight citizens did not answer (0.4%). Next, 1223 citizens agreed (61.2%) and 505 citizens disagreed (25.3%) with the statement "The behaviours of patients and their relatives improved with the changing healthcare system;" 245 citizens answered with "I have no idea" (12.3%), and 24 citizens did not answer (1.2%).

To the question "Did your behaviours towards physicians improve?", 1240 citizens answered yes (62.1%), 316 citizens answered no (15.8%), 322 citizens answered "I have no idea" (16.1%), and 119 citizens did not answer (6%). For the statement "Patients and their relatives were nicer to physicians during this process of change", 1380 citizens agreed (69.1%), 367 citizens disagreed (18.4%), 230 citizens had no idea (11.5%) and 20 citizens did not answer (1%).

For the statement "Behaviours of the physicians towards patients and their relatives were ruder during this process of change", 265 citizens agreed (13.3%), 1500 citizens disagreed (75.1%), 205 citizens had no idea (10.3%) and 27 citizens did not answer (1.4%). For the statement "With the changes in the healthcare system, rights of patients have become more

respected", 1264 citizens agreed (63.3%), 421 citizens disagreed (21.1%), 284 citizens had no idea (14.2%), and 28 citizens did not answer (1.4%).

For the statement "The increased awareness of the rights of patient increased the possibility of violence against physicians during this process of change in our healthcare system", 674 citizens agreed (33.8%), 898 citizens disagreed (45%), 393 citizens had no idea (19.7%), and 32 citizens did not answer (1.6%). For the statement "The Transformation in Health Project made the Patient Rights Councils work more efficiently", 1109 citizens agreed (55.5%), 468 citizens disagreed (23.4%), 394 citizens had no idea (19.7%), and 26 citizens did not answer (1.3%).

For the statement "The Patient Rights Councils helped patients and their relatives calm down and prevent them from committing violence", 829 citizens agreed (41.5%), 659 citizens disagreed (33%), 478 citizens had no idea (23.9%), and 31 citizens did not answer (1.6%). For the statement "Patient Rights Councils prevented physicians from serving", 463 citizens agreed (23.2%), 1015 citizens disagreed (50.8%), 491 citizens had no idea (24.6%), and 28 citizens did not answer (1.4%).

For the statement "The Transformation in Health Project has helped physicians do their job better", 1095 citizens agreed (54.8%), 442 citizens disagreed (22.1%), 433 citizens had no idea (21.7%), and 27 citizens did not answer (1.4%). To the question "What type of approach is used with the changing healthcare system?", 370 citizens answered "patient-centred approach" (18.5%), 136 citizens answered "physician-centred approach" (6.8%), 722 citizens answered "both physician and patient-centred approaches" (36.2%), 710 citizens answered "neither a physician- nor a patient-centred approach (35.6%), and 59 citizens did not answer (3%).

For the statement "A physician-centred approach to our healthcare system would be appropriate", 645 citizens agreed (32.3%), 1166 citizens disagreed (58.4%), 170 citizens had no idea (8.5%), and sixteen citizens did not answer (0.8%). For the statement "A patient-centred approach to our healthcare system would be appropriate", 925 citizens agreed (46.3%), 882 citizens disagreed (44.2%), 173 citizens had no idea (8.7%), and 17 citizens did not answer (0.9%).

For the statement "Physicians would be nicer and more reasonable in a patient-centred healthcare system", 1012 citizens agreed (50.7%), 627 citizens disagreed (31.4%), 341 citizens had no idea (17.1%), and seventeen citizens did not answer (0.9%). For the statement "The Transformation in Health Project helped us receive better healthcare services", 1135 citizens agreed (56.8%), 488 citizens disagreed (24.4%), 343 citizens had no idea (17.2%), and 31 citizens did not answer (1.6%). Finally, 1033 citizens found the Transformation in Health project successful (51.7%), 490 citizens did not find it successful (24.5%), 455 citizens had no idea (22.8%) and nineteen citizens did not answer (1%).

Discussion

Of everyone who participated in our study, 93.7% of the physicians and 74% of the citizens were informed of the changes in our healthcare system with the Transformation in Health Project. This is proof that the physicians were well informed about an issue that affects them.

The number of citizens who think that physicians' behaviour improved with the changing healthcare system was 1399 (70.1%), evidence that a high proportion of citizens are pleased. The number of physicians who think their behaviour towards patients and their relatives have improved was 494 (41.5%), proof that physicians and citizens do not share the same views on this issue.

Only 495 physicians (41.6%) believed that the behaviour of patients and their relatives towards physicians is good. However, compared with citizens, physicians seemed to be less pleased with the change. The number of citizens who thought that the behaviours of patients and their relatives are good was 1223 (61.2%). The number of citizens who considered their behaviours towards physicians to be good was 1240 (62.1%). A large number of patients thought that they treated their physicians well. When considering violence against physicians, these numbers predict a smaller number of violent events.

Table 1. Evaluating the behaviours of citizens and physicians during healthcare system changes in Turkey

Healthcare system changes in Turkey	Evaluating of citizens		Evaluating of physicians	
	n	**%**	**n**	**%**
Behaviours changed in a positive	1399	70.1	495	41.6
Disagreed	362	18.1	580	48.7
Had no idea	228	11.4	104	8.7
Did not answer	8	0.4	11	0.9
Total	**1997**		**1190**	

Interpersonal discussions or arguments have at least two sides. Physicians are on the receiving end of violent behaviours of patients and their relatives. During this process of change, only 417 (35%) physicians thought that patients and their relatives were kinder. Another question asked whether the patients and their relatives were ruder, to which 587 (49.3%) physicians responded yes. The number of citizens (another side of the argument) who think that physicians have been nicer to patients and their relatives during this process of change was 1380 (69.1%). Similarly, citizens were asked whether they thought that physicians were ruder towards patients and their relatives during this process of change, and only 265 citizens (13.3%) agreed.

Our research revealed that physicians were highly unsatisfied with the behaviours of patients and their relatives, whereas citizens were quite pleased with physicians. The idea that patient rights are more highly valued because of the transformation in healthcare was agreed with by 740 physicians (62.2%) and 1264 citizens (63.3%). However, 680 physicians (57.1%) believed that this level of care of patients has increased the violence against physicians during this process of change. Only 674 citizens (33.8%) agreed with this opinion, and 898 citizens (45%) disagreed. According to the results of our study, violence against physicians by patients and relatives is an issue that needs to be solved from a sociological and psychological point of view. Clearly, some precautions are necessary to prevent advantages for patients from turning into disadvantages for physicians during the transformation in healthcare.

According to the findings, the Patient Rights Councils are working efficiently for both sides, with 1109 citizens (55.5%) and 489 physicians (41.1%) agreeing that the Patient Rights Councils are working more efficiently during the Transformation in Health Project. Concerning the prevention of violence, 829 citizens (41.5%) believed that the Patient Rights Councils were effective; however, only 351 physicians (29.5%) stated that the Patient Rights Councils calmed patients and prevented them from violent behaviours. This finding indicates that physicians cannot be protected from violence by these councils.

In addition, 470 physicians (39.5%) thought that these councils blocked their workflow, compared with 497 physicians (41.8%) and 1015 citizens (50.8%) who believed that these councils did not block physicians' workflows. The functionality of the Patient Rights Councils appears to be limited to an extent. Four hundred fifty-six physicians (38.3%) thought that healthcare services are patient-centred; this number is higher than for citizens, where only 370 (18.5%) answered the same. The numbers of responses from the citizens to this question were similar for the possible answers; 722 (36.2%) thought that healthcare services must be both physician and patient centred and 710 (35.6%) thought that healthcare services must be neither patient nor physician centred. The inconsistency of the other answers from both physicians and citizens indicates that the healthcare system is in a transitional phase. As such, our research could not clearly reveal who is currently the centre of the system.

Differing results were obtained from the citizens and physicians regarding who should be the centre of the healthcare system. Naturally, 907 physicians (76.2%) found that the physician-centred approach would be appropriate; however, only 645 citizens (32.3%) agreed with this position, and 1166 citizens (58.4%) disagreed. By contrast, only 491 physicians (41.3%) believed that a patient-centred healthcare system would be appropriate, and 584 of them (49.1%) disagreed. On the other hand, 925 citizens (46.3%) stated that the patient-centred healthcare system would be appropriate, and 882 citizens (44.2%) disagreed. Considering the answers from the citizens, they did not want physicians to be the centre of the healthcare system but they also did not approve of a completely patient-centred approach. According to data obtained from physicians, they largely favoured a physician-centred system.

Most physicians (785, 66%) believed that a physician-centred system would result in nicer behaviours from patients, whereas 1012 citizens (50.7%) believed that a patient-centred

system would be more reasonable and would result in nicer behaviours from physicians. These points were clearly expressed by the number of participants who reported such positions. Perhaps, at this point, the exact roles of the two important sides in the healthcare system (physicians and patients) must be adjusted. If allowed to turn into a conflict, continuous discomfort in practical healthcare services could result. The optimal healthcare system would be where the rights of physicians are respected by patients and patients are not behaving aggressively towards physicians.

We found that 1095 citizens (54.8%) believed that the Transformation in Health Project led physicians to do their work better. Additionally, 1135 citizens (56.8%) thought that the Transformation in Health Project provided them better healthcare services. Considering these numbers, we found that the Transformation in Health project pleased more than half of the citizens who participated in the study, and 1033 citizens (51.7%) found the Transformation in Health Project successful. The physicians' views on the Transformation in Health Project were quite different from those of the citizens. Only 423 physicians (35.5%) found that the Transformation in Health Project was successful, whereas 570 physicians (47.9%) disagreed. The physicians appear to be displeased with this process of change.

Physicians do not appear to be at peace when they are providing healthcare services as only 429 physicians (36.1%) stated that the Transformation in Health Project allowed them to enjoy their job more. By contrast, 731 physicians (61.4%) disagreed.

We asked the physicians whether they were performing their current job because of a mistake made when choosing their profession, but 1123 physicians (94.4%) stated that they chose their profession willingly. In addition, the number of physicians who said they were doing their job with joy was 984 (82.7%).

Conclusion

Physicians, who play an important role in providing healthcare services, naturally tend to prioritize their business life, which is sometimes reflected in their behaviour towards patients. This role can cause some strain in the relationships between physicians and patients. Thankfully, the majority of citizens are pleased with their physicians. Of course, this single-

sided satisfaction is quite important for the continuity of the relationship between the physician and the patient.

An upside of the changing healthcare system is that we can see the satisfaction of the citizens. However, this satisfaction must exist in a balanced patient-physician relationship. Notably, the balance can be maintained by removing the discussion of "who will be in the centre." Although the desire to be in the centre is prominent in physicians, citizens disagree more on the issue. Because the citizens have shown that they do not want their partner to be excluded in a vital subject such as health, physicians' desires might originate from the possibility of neglecting medical professionals during this process of change. The changes in our healthcare system also caused changes in the behaviours of physicians concerning patients and their relatives. During this process of change, several regulations for physicians will certainly take this process to a more positive level.

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