Abstract Planned Workshop

How to affect financial flows for population activities on primary level in Turkey

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Abstract

This paper describes the funding landscape for population assistance, using data collected by the Netherlands Interdisciplinary Demographic Institute (NIDI) and published by UNFPA. It describes trends in donor assistance and in Turkey’s domestic spending on population and reproductive health activities. It addresses policy makers, programme managers, and other decision makers involved in health care and health systems reform in Turkey.

The funding landscape for population activities shapes the work of UNFPA and all other agencies addressing population issues, globally and in developing countries in particular. In keeping its mandate to promote implementation of the 1994 International Conference on Population and Development (ICPD) Program of Action (PoA), UNFPA monitors and reports on resource allocations for population activities worldwide. For reporting purposes, UNFPA defines “population assistance” as donor funding for those activities in the “costed population package”—that is, resource targets agreed upon in the ICPD PoA. The data collected cover expenditures during the previous year and expected expenditures during current year and several years ahead.

The “Health Transformation Program”, implemented by the Ministry of Health (MoH), is a very important step towards restructuring the health care sector in Turkey. In order to reach the ultimate aim of the MoH to improve the level of health, reproductive health services should be integrated into the primary health care services. According to the new model of MoH, reproductive health services are located in the Women & Reproductive Health Department. Within the framework of the Health Transformation Programme in the last seven years, maternal and child health programmes are discussed as a priority. It has been accepted that the most effective approach in closing the gap between developed and developing countries is investing in reproductive health services. In general, the countries that have experienced the highest growth in health spending over the past period are those that had relatively low spending levels at the beginning of the period. The growth in health expenditure per capita in Turkey, for example, has generally been more than twice the EU average over the past ten years.
Current funding levels in Turkey are far below what is necessary to meet current needs. Given the global financial crisis and the uncertainty of future funding levels, full implementation of the ICPD PoA agenda may be in jeopardy. Both international and domestic allocation of resources to population activities must increase from present levels to meet current and future needs. However, the results for Turkey indicate that spending on RH has reduced quite dramatically. This downward trend is related to the reorganisation of the health care system in Turkey, and the move toward primary care as part of that process. One consequence of this process of change has been that the traditional MCH/FP centres have been closed down, and there functions are supposed to have been largely taken over by family doctors. However, in practice this transition has been rather unsuccessful until now.

**Keywords:**

financial flows, sexual and reproductive health