

## Health Care Management—Current State and Future Trends

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Health care delivery systems throughout the world have undergone significant changes in the past few decades. These changes have been driven—at least partly—by the recent advances in medical science and the emergence and subsequent adoption of new diagnostic and therapeutic technologies. In addition, growing populations, population aging, changes in disease prevalence have led to increased health service utilization (Walburg *et al.*, 2006; Blumenthal, 2009; Walshe & Smith, 2011).

The several changes in the health care environment were accompanied by changes in models of health care delivery and organization and in patient utilization patterns, all of which led to substantial increases in health care costs. All these factors call for more effective and more efficient health care management practices (Fisher *et al.*, 2009; Van Herck *et al.*, 2010; Walshe & Smith, 2011).

In addition, there are rising demands—further backed by governments, non-governmental organizations, and the media—for greater accountability and better health care service. At the same time, there has been a fall in the implicit trust patients have always had in medical professionals, which can be attributed, at least in part, to the high-profile scandals and failures in a number of health care systems around the world. Also, the increased media coverage and the rise of the Internet as a new mass medium have certainly accelerated the change. Patients, in many parts of the world, call for a greater role in their own health care, greater choice, and more involvement in decisions relating to their treatment. There is now a growing global trend toward reduced professional power and autonomy and a rise in managerialism and clinical governance (Marshall & Campbell, 2002; Buttell *et al.*, 2008).

These manifestations are considered to be part of a bigger picture comprising economic and social changes and are often linked to the wider movement and culture of consumerism. A number of forces have contributed to the rise of consumerism in health care including the demographic shifts and changes in populations, the increasing concerns about patient safety, and the relatively higher availability of medical knowledge to the public (Walburg *et al.*, 2006; Øvretveit, 2009; Calnan, 2010; Walshe & Smith, 2011; Ewert & Evers, 2012).

There are now raised expectations of greater transparency and more information about health care services, improved health

care quality, and more efficient utilization of resources. Patients' needs and expectations have been an important driving force for improvement in health services. All these factors have undoubtedly played an important role in the growing interest in health care policy and management. Health care systems around the world are now more focused on health care performance management, health care quality patient-centered care, and health care reform, in general. Several national health care systems now place high priority on areas such as disease prevention, health promotion, and community-based care (Ferlie *et al.*, 2007; Fisher *et al.*, 2009; Gostin & Mok, 2009; Calnan, 2010; Ewert & Evers, 2012).

In addition to these trends—namely, demographic changes, technological innovation, and changing user expectations—the rapidly rising health care costs are an ever-increasing challenge, which, largely, is a consequence of the trends described earlier. Contemporary health systems face a different set of challenges, including, but not limited to, meeting the growing demands of increasingly empowered health care users; containing the ever-escalating costs of health care services; and incorporating principles of evidence-based management and decision-making into practice (Walburg *et al.*, 2006; Fisher *et al.*, 2009; Øvretveit, 2009; Walshe & Smith, 2011).

Against such a background of a rapidly-changing health care environment and ever-increasing challenges faced by health care systems throughout the world, there is now a growing need for better approaches to health care management; there is now a great need for effective leadership practices in health care (Walburg *et al.*, 2006).

### About health care management

A relatively new, multidisciplinary field, health care policy and management is being increasingly recognized by scholars and researchers as a field distinct from related disciplines such as public management, public health, and political science.

The emergence of health care management as a field of research is evidenced by the increasingly growing number of peer-reviewed research papers and books published in the field and the number of research conferences devoted to it. In addition, several universities have established postgraduate degree-offering programs in the different areas of health care management. Another sign of the maturing of the field of health care policy and management is the recent proliferation of academic journals dedicated to the field. The publication of this Journal is one indication of the maturing of the field.

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## About KJHCM

The *Kuwaiti Journal of Health Care Management* (KJHCM) is a peer-reviewed journal in the field of health care management and policy. The purpose of the Journal is to provide a forum for managers, researchers, policymakers, and health care professionals working in or with health care systems to identify critical topics in health care policy and management. The Journal focuses on the latest trends and developments in all areas of health care management and accepts papers from around the world.

KJHCM takes a broad definition of health care management, encompassing all topics relating to health care management and, including—but not limited to—health systems management; organization and financing of health care; health care policy and reform; health economics; health care quality and patient safety; and access.

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