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New Horizons in Management: Contemporary Approaches on Theoretical Foundations

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GÖNÜL YÜCE AKINCI



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İÇİNDEKİLER

İÇİNDEKİLER	3
A field study on the impact of perceived self-efficacy on employee positive voice behaviour	4
Edip ÖRÜCÜ.....	4
Ramazan Özkan YILDIZ	4
İtir HASIRCI	4
Fatma ZEYBEK	4
The Development And Approaches Of Health Sociology.....	39
Emre KARASU	39
Şeyma KAHVECI	39
Yunus Emre OZTURK.....	39
Analysis and Management of Physical and Ergonomic Risks on Ships.....	62
Murat YORULMAZ.....	62
Mert SUSOY	62
Futuristic Management as A Competitive Advantage	77
Meral ÇALIŞ DUMAN	77

BÖLÜM I

A field study on the impact of perceived self-efficacy on employee positive voice behaviour

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1. Introduction

In the era of technological progress, employees have emerged as the primary resource for organisations aiming to establish dominance in the market and ensure long-term viability.

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Recognising employees as crucial assets in attaining business objectives, it is vital for them to acknowledge their own capabilities, be conscious of their proficiency in fulfilling assigned responsibilities and duties, have confidence in themselves and endeavour to improve their performance – in essence, to possess self-efficacy awareness. The concept of self-efficacy allows us to comprehend the extent of employees' exertion in achieving a goal, their level of determination and their ability to cope with adversities (Cant & Cooper, 2017). Consequently, employees that possess high self-efficacy have a robust perception of their abilities, resulting in an elevation of their job performance and motivation. Conversely, those with poor self-efficacy have diminished levels of productivity in the job. These individuals possess a diminished sense of self-worth and have a restricted focus on personal growth. As a result of experiencing feelings of inadequacy, individuals may encounter difficulties in carrying out their given responsibilities and tasks at their workplace or exhibit avoidance tendencies (Schmidt & DeShon, 2010).

For employees to be effective and contribute to development, it is necessary for them to offer sincere, constructive and solution-focused feedback to their managers or superiors regarding job performance. Feedback behaviour is categorised into two distinct types: positive feedback and negative feedback. This study aims to analyse positive feedback behaviour. In this context, positive feedback behaviour refers to employees providing valuable recommendations for executing their duties and activities in the work environment with exceptional performance and effectiveness. Positive feedback behaviour arises when employees freely

communicate these suggestions to their bosses and colleagues. Sharing in this context serves as both a symbol of the bond employees form with their firm and as a demonstration of their exceptional performance and positive conduct, which contribute to the company's growth (Gurel, 2022: 142). Positive feedback behaviour enables employees to effectively communicate their thoughts and proposals to their managers, thereby facilitating the company's advancement and garnering support for its success (Ghani & Malik, 2022).

Employee voice is seen as discretionary conduct. Thus, this conduct is assessed as a deliberate and reciprocal endeavour that employees undertake to promote advancements in their organisations. This type of conduct, which permits employees to assess the conduct of their superiors and approaches towards their colleagues and express their concerns on work-related matters, is also crucial for organisational innovation. Trust is considered a vital component, according to social exchange theory. Trust is a fundamental element in the dynamics of interpersonal connections among employees. Hence, employees first assess the conduct of their bosses and place significant emphasis on the element of trust before articulating their opinions (Dyer & Chu, 2011).

Prior to voicing their opinions, employees evaluate their capacity to enact alterations and enhancements within the organisation. When individuals believe that they can conquer obstacles with adequate exertion, the probability of voicing apprehensions regarding work-related matters also rises. In contrast, when employees perceive themselves as incapable of surmounting difficult tasks, their inclination to voice work-related issues and

suggest ideas for enhancing the organisation diminishes. Hence, personal attributes such as self-efficacy can be seen as a determinant influencing the correlation between employees' expressions and the level of faith they have in their superiors. Therefore, this study aims to fill the existing void in the literature by examining the correlation between self-efficacy and positive voice behaviour. The study will also investigate the influence of bank employees' self-efficacy perceptions on their supportive and constructive positive voice behaviours. The research postulates a direct correlation between self-efficacy and good voice behaviour. Hence, the research framework created in this investigation seeks to address the subsequent research inquiries: Does one's perception of self-efficacy have a notable impact on engaging in positive vocal expressions? Does the notion of self-efficacy significantly affect the sub-dimension of supportive voice behaviour within positive voice behaviour? Does the notion of self-efficacy significantly influence the sub-dimension of constructive voice behaviour within positive voice behaviour?

2. Conceptual Background

2.1. Self-efficacy Perception

Self-efficacy refers to an individual's confidence in their ability to do a certain action, their belief in their competence to carry out the action well and their conviction in their capacity to attain a given objective. People consistently strive to improve their skills and it is widely recognised that the level of performance is strongly linked to self-efficacy. Huang (2016) identifies self-efficacy as a pivotal determinant of goals, actions and outcomes. It denotes an individual's perception of their capacity to successfully complete a

particular undertaking. Employees who possess self-assurance have a strong belief in their ability to perform well (Heslin & Klehe, 2006). According to Jang (2017), there is a direct correlation between high self-efficacy and an increased ability to complete an action or task. An individual's self-efficacy has a direct impact on their performance outcomes. Competence is developed by experiencing learning, which involves acquiring cognitive, social and other skills. Others possessing elevated levels of self-efficacy exhibit greater levels of courage in comparison to others with diminished levels of self-efficacy. Individuals with low self-efficacy are prone to promptly engaging in withdrawal behaviours, particularly in demanding circumstances, whereas individuals with high self-efficacy exert considerable effort to assume control of the situation and surmount escalating challenges.

Self-efficacy empowers employees to assimilate feedback from supervisors, colleagues and customers and effectively apply the acquired knowledge to enhance their performance (Randhawa, 2004). Consequently, the motivation of employees in relation to their work is enhanced, enabling them to surmount barriers inside the organisation (Bandura, 1977). Self-efficacy perception refers to an individual's confidence in their capacity to effectively handle various obstacles that arise in their life (Bandura, 1997). The impression of self-efficacy is vital in fostering individuals' motivation to effectively handle personal obstacles in times of crisis (Bandura, 1990). Expanding upon this description, Bandura (1990) characterises self-efficacy perception as the "ability to establish objectives, assess one's own performance, respond and exert influence on oneself through personal challenges" (Bandura, 1990:

28). Self-efficacy, as explained by social cognitive theory, is regarded as a means of exerting "personal control" over one's behaviour and is responsible for inducing behavioural changes in times of crisis (Andrus & Roth, 2002; Bandura, 1997).

Individuals typically like to work in situations that are conducive to their comfort, selecting activities and jobs that are in line with their preferences. In some cases, individuals may even modify their behaviour in a way that they do not necessarily wish in order to attain a desired result (Bandura, 1990). Self-efficacy is of utmost importance, particularly in times of crisis, as it enables individuals to assess the necessary effort to achieve a goal, their capacity to persist in the face of obstacles and, most significantly, their ability to demonstrate resilience when confronted with adverse circumstances (McKellar & Sillence, 2020; Cant & Cooper, 2017). In this environment, employees with high self-efficacy demonstrate a strong sense of competence and this feeling increases their performance at work, ultimately improving their motivation levels. When faced with a hard challenge, employees with high self-efficacy attribute it to a lack of effort and attempt to improve their skills. In contrast, people who possess poor self-efficacy exhibit diminished levels of performance inside the workplace. These folks show low self-esteem and unfavourable attitudes about their personal development. They view their capabilities as inadequate to attain their objectives and may display avoidance conduct even in circumstances where completing the assigned work is relatively straightforward (Vasile et al., 2011: 479; Schmidt & DeShon, 2010; Sherer et al., 1982).

2.2. Positive Voice Behaviour

Voice behaviour is grounded in Hirschman's (1970) model of Exit-Voice-Loyalty." In his research titled "Exit, Voice and Loyalty," Hirschman examined the responses of employees to management failures and identified two main reactions: exit and voice. These reactions are widely recognised in the scientific literature as representing the perspectives of employees. The initial response, exit, takes place when certain customers abstain from purchasing the products of businesses or personnel depart from the organisation. The second response, known as voice, refers to the act of customers and employees directly expressing their discontent to the management or the units that are under the management's jurisdiction (Hirschman, 1970:4). It has been noted that when staff and customers opt for the voice response instead of leaving, loyalty is established. Individuals that exhibit strong devotion towards a company are more inclined to choose voice communication rather than terminating their relationship. Thus, loyalty can be seen to exert a retarding influence on departures (Hirschman, 1970:82).

The notion of voice behaviour, initially proposed by Hirschman, has been implemented and expanded upon in the field by Freeman & Medoff (1984). According to Freeman & Medoff (1984), voice behaviour has the potential to improve the quality of worker-employer relationships and corporate processes. Nevertheless, there is a suggestion that the act of unionising is necessary for employees to promptly express their opinions and concerns towards their employers.

According to Farrelly & Rusbult (1992:202), in order to bring about a positive change in voice behaviour, Hirschman's (1970) "Exit-Voice-Loyalty" model should be expanded to include

"Neglect" as a fourth response. Neglect is said to occur when employees passively permit the deterioration of working circumstances, as per this perspective.

Positive voice behaviour, as defined by Hirschman (1970), refers to the proactive actions taken by employees to address and rectify undesirable work situations. This behaviour is rooted in the act of voicing discontentment and seeks to bring about changes in problematic circumstances. The organisation has been perceived as both criticism and improvement (Şener et al., 2018). Furthermore, this conduct demonstrates the extent of employees' authority in decision-making processes and tasks related to their employment. Employees frequently hold divergent viewpoints within their work settings and they have the option to vocalise these viewpoints in response to the prevailing conditions or opt for silence. Hence, exhibiting positive vocal conduct enables employees to immediately engage with employers regarding any issues. Positive voice behaviour includes actions such as communicating potential issues to managers and providing cost-saving recommendations to the organisation (Ghani & Malik, 2022).

Upon evaluating the current literature, it has been ascertained that there exist varying definitions of good voice behaviour. Below are many of the offered definitions:

According to Van Dyne & LePine (1998:109), it is a behaviour that aims to improve the allocation of jobs and activities in the workplace. The positive nature of these motivating actions, which involve questioning the existing state of affairs, is

underscored, emphasising the importance of directing attention towards ongoing enhancements in the workplace.

Morrison (2014:174) defines it as the voluntary expression of employees' opinions and suggestions regarding work-related matters, with the aim of enhancing the operational efficiency of the organisation or business as well as offering solutions to encountered challenges.

Turkoglu & Misican (2019:1001) provide a definition of it as the deliberate actions taken by employees to garner support for company decisions, adapt to changes and encourage the involvement of other employees in decision-making processes.

Elden (2020) defines it as the act of employees providing solutions to address the challenges they face while carrying out their duties and assuming specific obligations within the work environment.

According to Yesilkus et al. (2022), it refers to employees openly and confidently expressing their supportive, improvement-focused and constructive thoughts and ideas to their superiors.

Positive vocal behaviour can be conveyed not just orally but also through electronic mail and other communication methods (Hirschman, 1970). Positive voice behaviour refers to the act of presenting novel ideas and making decisions that contribute to the transformation of a business or organisation. It involves offering proposals for improvement, especially in situations where there is no agreement on established procedures (Van Dyne & LePine, 1998). In the current era, where there is a strong emphasis on maintaining a competitive edge that can be sustained over time, this behaviour is

of utmost importance for organisations that must consistently enhance their performance (Van Dyne & LePine, 1998).

Employees that demonstrate positive voice behaviour can contribute to beneficial organisational results, including enhanced group learning, improved business processes, creativity and crisis prevention. Researchers studying the impact of voice behaviour on organisational effectiveness now recognise the significance of evaluating both the conceptual aspects and the factors that facilitate or impede its experimental aspects (Liang et al., 2012: 71).

A positive attitude that enhances the value of enterprises is essential to promoting positive voice behaviour. When employees experience contentment in their work environment and are able to freely articulate their emotions and opinions, they are more likely to remain in their existing positions, therefore fostering a heightened sense of loyalty towards the organisation (Park & Nawakitphaitoon, 2018). Employees may opt to resign from their existing positions when confronted with job insecurity within the organisation and harbouring apprehensions about securing new employment in light of rising unemployment rates (Nazir et al., 2020).

Exhibiting favourable vocal conduct may not invariably lead to favourable acknowledgment from employees. Research in the literature has shown that performance evaluations, whether positive or negative, are undertaken in studies connected to voice behaviour (Durdu, 2021:38). There are three distinct attributes of voice behaviour, which will be elaborated upon:

Voluntary Voice Behaviour refers to a behaviour that is initiated by a business or organisation and is not mandatory. This behaviour falls outside the scope of employees' job descriptions.

Challenge-Oriented Voice Behaviour refers to a behaviour that seeks to disrupt the existing state of affairs and bring about positive and meaningful changes.

Potentially risky voice behaviour refers to actions that intentionally create a poor perception of the organisation, promote negative labels, advertise in a detrimental manner, or undermine communication channels, hence diminishing the influence of social capital (Liu et al., 2010:191).

Within the literature, researchers have explored good voice behaviour through two distinct dimensions: supportive voice behaviour and constructive voice behaviour. The following are the explanations for these dimensions:

Supportive voice behaviour refers to the voluntary behaviour exhibited by employees to endorse and uphold policies, programmes, goals, processes and other aspects they perceive as valuable to the organisation. Employees demonstrate their endorsement of these processes and objectives and vocally advocate for organisational policies that are criticised by other employees when such critiques are unfounded (Maynes & Podsakoff, 2014). Supportive vocal behaviour can facilitate contact with other employees through other communication channels, in addition to verbal interactions (Cankir, 2016).

Constructive voice behaviour refers to the voluntary expression of thoughts, information, or suggestions that focus on

necessary functional changes at the organisational level within the work context. This behaviour includes actions such as recommending enhancements to established corporate procedures and advocating innovative or more efficient work techniques. Constructive voice behaviour involves proposing solutions to previously identified organisational difficulties, addressing issues with current work practices and processes and generating new and enhanced approaches (Maynes & Podsakoff, 2014).

3. Methodology

The objective of this study is to assess the influence of bank employees' self-efficacy perceptions on their positive speech behaviour. The study's population comprises people employed in various banks in Turkey. The study's sample consisted of 329 bank workers who were currently employed and were selected using the basic random sampling method. Simple random sampling, a probability-based sampling technique, ensures that every participant in the research population has an equal opportunity to be chosen for the sample. Choosing a smaller subset from a larger population can be accomplished with ease using this sampling technique (Gürbüz & Şahin, 2018: 135). The study employed the quantitative methodology of conducting an online survey. The survey technique enables the determination of individuals' attitudes, opinions, behaviours and expectations on specific subjects. The items in the survey were selected based on a thorough investigation that aligns with the primary objective of the research. The survey encompasses items pertaining to the factors that convey the primary objective of the research as well as the demographic information of the participants. The survey method lets you get in touch with a large

group of people, which lets you get results that can be applied to a large group of people and look at the connections between many variables at the same time (Gürbüz & Şahin, 2018: 106).

The self-efficacy scale utilised in this study was established by Jerusalem and Schwarzer in 1995. Yeşilay translated the scale to Turkish in 1996 and it has ten components. The positive voice behaviour scale, created by Maynes and Podsakoff in 2014, consists of twenty items and is organised into four dimensions. In 2016, Çankır updated the scale to Turkish. The scoring of each item on the scales was done using a 5-point Likert scale, where 1 represents "strongly disagree" and 5 represents "strongly agree." The data collected from the survey application in the study were analysed using statistical analysis software.

Positive vocal conduct is seen as discretionary conduct. Positive voice behaviour refers to a deliberate and reciprocal behaviour exhibited by employees to promote progress inside their organisations (Pap et al., 2023). Based on the self-efficacy idea, when employees have successful experiences, it can enhance their overall self-efficacy and thus inspire them to demonstrate positive behaviours. Employees possessing robust qualities will consistently demonstrate a readiness to utilise these favourable features inside the organisation, hence fostering their achievement (Bakker & van Woerkom, 2018). These successful experiences play a role in shaping employees' overall self-efficacy views, which in turn increases their likelihood of demonstrating positive voice behaviour (Chu et al., 2022). Consequently, it is anticipated that bank personnel who possess strong beliefs in their own abilities will likewise demonstrate elevated levels of constructive vocal expression. Self-

efficacy assesses the cognitive, emotional and behavioural aspects of people and is thus linked to their beliefs about their own abilities. Self-efficacy theory suggests that employees' general self-efficacy can be enhanced by successful experiences, which in turn motivates them to demonstrate positive behaviours. Highly competent employees consistently demonstrate a willingness to utilise their positive attributes inside the organisation, hence promoting their own success (Bakker & van Woerkom, 2018). Employees' general self-efficacy perspective is enhanced by successful experiences, leading to a greater likelihood of displaying positive speech behaviour (Chu et al., 2022). Consequently, it is hypothesised that bank employees who possess a strong belief in their own abilities will also demonstrate a high level of positive vocal expression. Self-efficacy evaluates an individual's cognitive, emotional and behavioural responses. Hence, self-efficacy is associated with individuals' subjective assessments of their own proficiency.

According to the goal-setting hypothesis, those who have a high level of self-efficacy prefer to set more ambitious objectives, whereas those with low self-efficacy tend to set less demanding goals due to their belief that they are incapable of effectively completing difficult activities. According to this idea, people with a high level of self-efficacy are more inclined to question the existing state of affairs, express their concerns even if they may affect their superiors and believe in their capacity to bring about changes and improvements inside the organisation. Individuals who have low self-efficacy in problem-solving may exhibit passive engagement in positive speech behaviour as a result of their difficulties in handling tough tasks and unexpected situations (Dedahanov et al., 2019).

Bandura's social cognitive theory posits that individuals' self-efficacy beliefs drive their motivational structure and influence their activities. Heightened self-efficacy beliefs bolster an individual's tenacity and resolve, resulting in elevated levels of achievement. Hence, one might contend that the self-efficacy beliefs formed by individuals, which are rooted in their skills, have a pivotal impact on defining their potential accomplishments (Arseven, 2016).

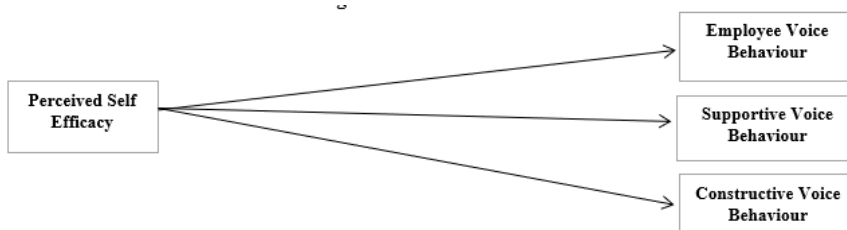
The following hypotheses and study model are offered based on the literature review, incorporating self-efficacy theory, goal-setting theory and social cognitive theory:

Hypothesis 1: The views of self-efficacy among bank employees have a notable influence on their tendency to engage in positive voice behaviour.

Hypothesis 2: The views of self-efficacy among bank personnel have a notable influence on their behaviour in providing help through verbal expression.

Hypothesis 3: The views of self-efficacy among bank employees have a notable influence on their tendency to engage in constructive voice behaviour.

Figure 1. Research Model



4. Analysis and Findings

Within the scope of the research, normality test was first applied to analyse the data and then reliability, descriptive analysis, factor analysis, correlation and regression analyses were carried out.

Table 1. Distribution of Demographic Data of Research Participants

Variables	Subgroups	Frequency	Percentage (%)
Gender	Female	220	66.9
	Male	109	33.1
Age	18-23	35	10.6
	24-29	54	16.4
	30-35	73	22.2
	36-41	98	29.8
	42 and over	69	21.0
Educational Background	High School	33	10.0
	Associate Degree	25	7.6
	Bachelor's Degree	167	50.8
	Postgraduate	104	31.6
Marital Status	Single	149	45.3
	Married	180	54.7
Monthly Income	0-11.400 ₺	20	6.1
	11.401-13.500 ₺	17	5.2
	13.501-15.500 ₺	25	7.6
	15.501-17.500 ₺	56	17.0
	17.500 ₺ ve üzeri	211	64.1
	Total	329	100

According to Table 1, the number of women among the participants was 220 (66.9%) and the number of men was 109 (33.1%); 29.8% of the bank employees are between the ages of 36-41, 22.2% are between the ages of 30-35, 50.8% of the majority of the employees have a bachelor's degree, 54.7% of the employees are married and 64.1% of the employees earn 17,501₺ and it has been determined that the income exceeds.

Table 2. Reliability Analysis

Scale	Cronbach's Alpha
Self-Efficacy	0.860
Positive Vocal Behaviour	0.763

The reliability and validity analysis of the research was determined by Cronbach's Alpha. Cronbach's Alpha value of 0.70 and above is considered reliable in the scales (Cronbach, 1951). Therefore, the scales of this research were determined to be reliable.

Table 3. Descriptive Statistics and Normality Test of Scales

	Mean	Standard Deviation	Minimum	Maximum	Skewness	Kurtosis
Self-Efficacy	3.785	0.635	1.00	5.00	-1.043	1.443
Positive Vocal Behaviour	3.681	0.636	1.00	5.00	-0.984	0.268

It is seen that the items related to self-efficacy and positive voice behaviour in the research have average values. Some researchers assume that the data are normally distributed when the value obtained by dividing the kurtosis and skewness values by their standard error is below 3.2 (Tabachnick & Fidell, 2007). Normality test was applied by removing the 5th and 7th items in self-efficacy from the scale and the 2nd, 5th, 6th and 7th items in positive voice behaviour from the scale because they affect the normal distribution of the data in the scale. According to the normality test, it was determined that the skewness and kurtosis values in the table showed a normal distribution.

Table 4. KMO and Bartlett's Test Table

		Self-Efficacy	Positive Vocal Behaviour
Kaiser-Mayer-Olkin (KMO)		0.904	0.797
	X ²	925.628	448.381
Bartlett's Test of Sphericity	df	28	15
	Sig.	0.000	0.000

Exploratory factor analysis was applied to test the validity of the scales. According to these results, the sample adequacy of the self-efficacy scale was determined as 0.904 and the sample adequacy of the positive voice behaviour was determined as 0.797. However, the results of Bartlett's sphericity tests are also $p = 0.000$ and significant ($p < 0.05$). These test results show that the sample size for factor analysis is sufficient and the scales are acceptable in terms of factor loadings.

Table 5. Dimensions and Factor Loadings of Self-Efficacy

Self-Efficacy	Dimension
1	0.707
2	0.786
3	0.548
4	0.711
6	0.718
8	0.745
9	0.736
10	0.735

Participants' factor loadings of self-efficacy are shown. By removing the 5th and 7th items from the scale, the factor loadings of the self-efficacy scale became acceptable.

Table 6. Dimensions and Factor Loadings of Positive Vocalization Behaviour

	Dimensions	
Positive Vocal Behaviour	1	2
1	0.686	
3	0.602	
4	0.701	
8		0.573
9		0.733
10		0.772

Participants' positive voice behaviour was divided into two dimensions. By removing the 2nd, 5th, 6th and 7th items from the scale, the factor loadings of the positive voice behaviour scale became acceptable.

Table 7. Multiple Correlation Analysis Table Between Variables

Scale	Self-Efficacy	Positive Vocal Behaviour
Self-Efficacy	1 .000	
Positive Vocal Behaviour	0.458** .000	1

It was determined that there was a significant and positive relationship at the level of 45.8% ($r(329) = 0.458$, $p < 0.01$) between the self-efficacy perception and positive voice behaviour of the bank employees participating in the study.

Table 8. Testing the Effect of Self-Efficacy on Positive Voice

Dependent Variable	Independent Variable	B	Std. Error	β	t	p
Positive Voice Behaviour	Self-Efficacy	0.458	0.049	0.458	9.312	0.000
Adjusted $R^2 = 0.207$	Estimate d Std. Error=.56630	Anova (p)=0.000	F=86.717	$R^2 = 0.210$		

Behaviour with Simple Regression Analysis

It was determined that 21% of positive voice behaviour was explained by the self-efficacy of bank employees. It has been determined that the self-efficacy of bank employees significantly and positively affects the positive voice behaviour. As a result of the analysis, Hypothesis 1 was accepted. It has been determined that when there is an increase of one-unit standard deviation in the self-

efficacy of bank employees, there will be a 45.8% increase in the standard deviation of positive voice behaviour.

Table 9. Testing the Effect of Self-Efficacy on Supportive

Dependent Variable	Independent Variable	B	Std. Error	β	t	p
<i>Supportive Positive Voice Behaviour</i>	<i>Self-Efficacy</i>	0.512	0.061	0.419	8.343	0.000
Adjusted R ² = 0.173	Estimate d Std. Error=.70645	Anova (p)= 0.000	F= 69.604	R ² = 0.176		

Positive Voice Behaviour with Simple Regression Analysis

It was determined that 17.6% of the supportive positive voice behaviour was explained by the self-efficacy of bank employees. It has been determined that the self-efficacy of bank employees significantly and positively affects the supportive positive voice behaviour. As a result of the analysis, Hypothesis 2 was accepted. It has been determined that when there is an increase of one unit standard deviation in the self-efficacy of bank employees, there will be a 41.9% increase in the standard deviation of supportive positive voice behaviour.

Table 10. Testing the Effect of Self-Efficacy on Constructive Positive Voice Behaviour with Simple

Dependent Variable	Independent Variable	B	Std. Error	β	t	p
<i>Constructive Positive Voice Behaviour</i>	<i>Self-Efficacy</i>	0.405	0.055	0.380	7.421	0.000
Adjusted R ² =0.142	Estimated Std. Error=.62703	Anova (p)=0.000	F=55.071	R ² =0.144		

Regression Analysis

It was determined that 14.4% of constructive positive voice behaviour was explained by the self-efficacy of bank employees. It has been determined that the self-efficacy of bank employees significantly and positively affects constructive positive voice behaviour. As a result of the analysis, Hypothesis 3 was supported. It has been determined that when there is an increase of one unit standard deviation in the self-efficacy of bank employees, there will be a 38% increase in the standard deviation of constructive positive voice behaviour.

5. Discussion

The research analysis has shown that the self-efficacy perspectives of bank employees greatly influence positive voice behaviours, supporting voice behaviours and constructive voice behaviours. According to several studies conducted by Dedahanov et al. (2022), Liu et al. (2023), Fast et al. (2014), Wang et al. (2015), Eibl et al. (2020), Dedahanov et al. (2019), Edakkat Subhakaran & Dyaram (2018) and Sari (2019), it has been established that the

perception of self-efficacy significantly influences positive voice behaviour.

An example of research investigating the connection between individuals' impressions of self-efficacy and their positive vocal behaviour is a study conducted by Liu et al. (2021), which included 295 employees from a Chinese company. The research findings indicate that self-efficacy perception has a significant impact on positive voice behaviour. Fast et al. (2014) discovered in their study that the impression of self-efficacy has an impact on positive voice behaviour. Wang et al. (2015) conducted a study including 354 employees from nine branches of a Chinese organisation. The study examined the links between ethical leadership, positive voice behaviour, self-efficacy and personal impact. The findings revealed that ethical leadership exerts a substantial influence on the manifestation of positive voice behaviour. Furthermore, the perception of self-efficacy and personal impact operate as mediators in this relationship. The study conducted by Eibl et al. (2020) investigated the correlation between self-efficacy, supportive leadership and positive voice behaviour. The studies demonstrated that both supportive leadership and self-efficacy perception exert substantial influences on positive voice behaviour. In their study, Dedahanov et al. (2019) examined the correlation between job autonomy, feelings of self-efficacy and positive voice behaviour among 813 employees of a company. The findings revealed that the impression of self-efficacy has a significant impact on positive voice behaviour and job autonomy acts as a mediator in this relationship. In a study conducted by Sari et al. (2019) on a sample of 230 employees from an Indonesian

company, the researchers examined the relationship between positive voice behaviour, self-efficacy perception, organisational identity and ethical leadership. The study found that the influence of ethical leadership on positive voice behaviour is mediated by both organisational identity and self-efficacy perception.

In their study, Qian et al. (2020) examined the correlation between temporary employment, positive voice behaviour and self-efficacy perception among 355 employees from 66 firms in China. The analytical findings suggest that the impression of self-efficacy has an impact on positive voice behaviour, with temporary employment acting as a mediator in this association. In a separate study conducted by Duan et al. (2022), a group of 365 employees in China was examined to explore the correlation between positive voice behaviour, self-efficacy perception and the leader's self-discovery sense. The analytical results indicate that the notion of self-efficacy has an impact on both positive voice behaviour and the leader's sense of self-discovery. In their study, Cheng et al. (2019) investigated the correlation between positive voice behaviour, self-efficacy perception and perceived risk among 503 individuals working in a corporation with branches in China and Germany. The analysis uncovered noteworthy correlations among the variables. The study conducted by Ming and Zongke (2023) analysed the correlation between visionary leadership, positive voice behaviour and self-efficacy perception among 294 managers in a Chinese organisation. It was found that the notion of self-efficacy acts as a mediator in the influence of visionary leadership on positive voice behaviour. Liu et al. (2023) examined 556 workers from a Chinese company in their study. The research focused on many aspects,

including employees' strengths, positive voice behaviour, self-efficacy perspective and leader-member interaction. The findings revealed that the strengths of employees significantly influence their positive voice behaviour, with the impression of self-efficacy and the interaction between leaders and members acting as mediators. Tian et al. (2018) conducted a study including 662 employees from 21 organisations across nine industries. The study aimed to investigate the influence of servant leadership on positive voice behaviour, with a focus on the mediating function of self-efficacy perception. Ho & Tsai (2017), as well as Xiao & Chen (2020), discovered in their research that the perception of self-efficacy has an impact on positive voice behaviour.

6. Conclusion

Self-efficacy perception refers to an individual's confidence in their capacity to successfully accomplish a job or attain a goal. It involves self-assurance in managing one's actions, exerting influence on the surroundings and being driven to accomplish objectives. Individuals may possess varying levels of self-efficacy beliefs in domains such as education, employment, interpersonal connections and other important facets of existence. The concept of self-efficacy is vital as it influences an individual's self-image and their ability to effectively achieve their life objectives. The notion of self-efficacy perception is fundamental to Albert Bandura's social cognitive theory, which highlights the importance of observational learning, social experience and reciprocal determinism in the development of one's personality. Effective approaches for fostering self-efficacy involve commencing with attainable objectives and progressively elevating the level of challenge as one's confidence

grows. When confronted with a difficult undertaking, it is essential to divide it into smaller, more manageable steps. By adopting this technique, the activity becomes less intimidating and helps to cultivate self-assurance with every accomplished stage.

Individuals might derive inspiration from accomplished individuals in their desired areas of growth by closely examining their achievements. Consequently, they can gather knowledge regarding the tactics employed by these observed individuals. Individuals who are engaged in activities that are unfamiliar to them should be aware that the potential dangers and objectives may vary. Effectively surmounting these obstacles will enhance their self-assurance. Individuals who possess acquired, conscious experience are more adept at verbally influencing others. Confidence enhances the effectiveness of verbal persuasion, leading to a boost in employees' self-efficacy views. Furthermore, embracing guidance and offering input from both supervisors and peers can assist individuals in advancing beyond their current roles. Employees' productivity can be boosted by demonstrating positive vocal behaviour, offering suggestions, expressing ideas and views and optimising workflow within the organisation. Consequently, both the intrinsic drive and the overall productivity of the company might increase.

The literature evaluation undertaken in our research has yielded recommendations pertaining to the enhancement of self-efficacy views, which are considered to foster positive voice behaviours among employees. The research would have a greater impact on the literature if it were undertaken with a larger sample

size, using diverse ways to collect data and across multiple industries.

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BÖLÜM II

The Development And Approaches Of Health Sociology

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1. Introduction

Medical sociology investigates the understanding of health and illness within society by emphasizing the impact of social factors on health and disease. It encompasses a broader research area that delves into the societal perspectives on health and illness. Health sociology primarily explores the relationship between diseases and

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various social aspects such as the social structure of the community, physician-patient interactions, the role of the patient, patient-hospital relationships, and the influence of social phenomena like gender, aging, nutrition, poverty, migration, ethnicity, race, social class, unemployment, and divorce on health.

Considering its historical development, the emergence of health sociology aligns with the latter half of the twentieth century. While studies in the field gained momentum in the United States in the late 1940s, it developed in Europe in the late 1950s. However, unlike in Europe and the U.S., health sociology in Turkey did not emerge and progress simultaneously but rather saw a growing interest starting in the 1960s.

The theoretical framework of health sociology has witnessed several approaches throughout its history. The primary approaches include the Structural-Functional Model, Symbolic Interactionist Model, Conflict Model, and Feminist Model. These approaches hold significant importance in the development of health sociology. Therefore, this section explores the concept of health, various historical approaches to health and highlights the development and general perspectives of health sociology.

2. Development of Medical Sociology

Definition and Perception of Health: A Holistic Approach

Health is undeniably one of the most complex and challenging concepts to define and perceive. Examining the concept of health over past years reveals that its definition varies depending on both the historical and cultural context (Aytaç and Kurtdaş, 2015; Somunoğlu, 1999). The concept of health is acknowledged as a

phenomenon that differs from individual to individual, time to time, society to society, and culture to culture, in other words, from era to era (Öztürk and Kırar, 2019).

In the traditional biomedical model, which is a conventional approach, the concept of health is often defined in a negative sense, focusing on the absence of disease or the individual's lack of a sense of well-being rather than a positive affirmation (Robinson and Elkan, 1996). According to the biomedical model, the causes of diseases are attributed solely to physiological factors, evaluating disruptions or impairments in physiological activities as a result of external influences on the individual (Baltaş, 2004). The biomedical model adopts a narrow perspective by viewing the human body as a machine from a technical standpoint (Turner, 1990).

In recent years, criticisms directed at the biomedical model emphasize the need to consider not only pathology, biochemistry, and physiological aspects but also the psychological and social aspects of human nature. This is because, in human existence, individuals are not only biological but also psychological and social beings (Aytaç and Kurttaş, 2015).

Another approach explaining disease and health is the medical model. While expressing the absence of disease and disability, the medical model encompasses both physical and mental health (Özer, 2019). The wellness model, on the other hand, focuses on further enhancing and developing health, stating that health includes more than just the absence of disease, incorporating positive dimensions such as well-being, energy, workability, and productivity (Somunoğlu, 1999).

The concepts of disease and health should be comprehensively addressed through a holistic approach, considering them not separately but as interconnected in terms of physical, mental, and even social aspects (Aytaç and Kurtdaş, 2015). This approach belongs to the holistic model, which treats individuals as a whole, taking into account their physical, mental, and social dimensions and aligns with the World Health Organization's definition of health (Özer, 2019). According to this model, disease is an abnormal condition in the individual causing a decrease in or depletion of functions in physical, mental, and social aspects compared to their previous state (Bolsoy and Sevil, 2006).

Another model is the environmental model, which defines the concept of health in terms of an organism's ability to maintain balance with its surroundings. Factors such as economic status, gender roles and sexual behavior, family structure, marriage patterns, population policy, general health regulations, changes in an individual's body image, nutrition, clothing, personal hygiene, religion, habits, and many others are among the cultural factors influencing health and disease (Bolsoy and Sevil, 2006). From this perspective, the phenomenon of health and disease is often influenced by social factors, and it is an undeniable fact that humans cannot be separated from their environment (Cırhinlioğlu, 2010). This model describes the optimal relationships of individuals with their environment (Somunoğlu, 1999).

In summary, the medical model and holistic model treat individuals as a complete state of well-being, evaluating them as a whole from physical, mental, and social perspectives. The wellness model generally concerns the individual's state of being better than

normal, with subjective assessments related to health. The wellness model does not encompass the improvement of health. The environmental model defines optimal relationships between individuals and their environment (Torun, 2015).

Explanation of Health and Disease Through Different Models: A Sociological Perspective

The exploration of health and disease through various models draws attention to the multidimensional nature of these concepts (Açıkgöz, 2021). Particularly, when health and disease concepts are approached from both social and cultural perspectives, they necessitate a socio-psychological approach (Aytaç and Kurtdaş, 2015). Max Weber, a sociologist who made significant contributions to the development of sociology, emphasizes that sociology is engaged in the endeavor to understand and interpret the course, effects, and reasons behind individuals' actions and behaviors (Bahar, 2009; Demirel, 2013). Sociology, in its broadest sense, is a discipline systematically researching human societies (Newman, 2016). It involves the scientific examination of social life, social change, and the behavioral causes and consequences of individuals from a social perspective (Bahar, 2009).

Auguste Comte, Emile Durkheim, Herbert Spencer, and Max Weber are considered the founders of modern sociology (Bahar, 2009). When examining the literature of the field, Ibn Khaldun is recognized as the person who first discovered and implemented sociological analyses in his works (Gültekin, 2016). Ibn Khaldun's sociological approach is rooted in social foundations, and his work "Muqaddimah" has pioneered many disciplines. When evaluated from a health sociological perspective, "Muqaddimah" provides a

general framework for the historical and sociological aspects of the development and transformation of societies.

Sociology is observed to have been influenced by socio-political and socio-economic events such as the French Revolution of 1789-1799 and the Industrial Revolution of 1760-1830 (Tekin, 2007). In the early studies of sociology, especially the poor working conditions and unhealthy housing conditions of workers were addressed. For instance, in his work "Capital" published in 1867, Karl Marx discusses the health conditions of workers who work under difficult conditions and live in poor conditions. Similarly, Friedrich Engels, in his work dating back to 1844, talks about the impact of the poor living conditions of the working class in England on their health and diseases. In his book "The Housing Question" in 1872, Engels again draws attention to the negative evaluation of the working class, aiming to shed light on their health conditions (Güven, 2014). These works have been influential in understanding the interactions between society, health, and diseases in the social environment (Tekin, 2007).

Health Sociology: Development and Historical Perspective

Health sociology, acknowledged as a subfield of sociology, explores the relationship between diseases and the social structure of society, physician-patient relationships, the patient's role, patient-hospital relationships, and the impact of social phenomena such as gender, aging, nutrition, poverty, migration, ethnicity, race, social class, unemployment, and divorce on health, as well as the place of medical education within the social structure (Kızılcelik, 1996). In a broader sense, health sociology emphasizes the influence of social factors on health and illness, examining societal perspectives on

health and disease within a more extensive research framework (Bradby, 2009).

The development of health sociology is observed within a historical process (Güven, 2014), and it matured later than the emergence of sociology as a discipline (Turner, 2007). This development can be traced back to 19th-century Europe (Güven, 2014). C. McIntire is recognized as the person who first used the term "medical sociology" in history, publishing the work "The Importance of The Study Of Medical Sociology" in the 1890s, where he highlighted the significance of social factors in health (McIntire, 1894). Furthermore, in his work, Emile Durkheim, one of the classical thinkers of sociology, focused on suicide, which was one of the most debated topics of the century, and evaluated the phenomenon of suicide from a sociological perspective in his book "Suicide" published in 1897 (Torun, 2015).

Elizabeth Blackwell, the first woman to complete medical education in the United States, contributed to the development of health sociology with her essays explaining the relationship between human communities and medical science in 1902, along with the works of James Warbasse in 1909 (Aytaç and Kurtdaş, 2015). However, these early publications were more related to medicine than sociology. Looking at the development of health sociology, it is evident that the initial works on the subject were more focused on medicine rather than sociology, and the first studies were conducted not by sociologists but by physicians (Özer, 2019).

In 1909, another work related to health sociology was J. Warbasse's "Medical Sociology: A Series of Observations Touching

Upon The Sociology of Health and The Relations of Medicine." Bernard J. Stern, one of the pioneers of health sociology, approached the subject from a sociological perspective in 1927 with his work "Social Factors in Medical Progress" (Merton, 1957). In 1935, Lawrence J. Henderson, in his work "Physician and Patient as a Social System," examined physicians and patients within the scope of a social system.

II. World War, which deeply affected countries between 1939-1945, marked a period of acceleration, development, and numerical increase in studies contributing to the field of health sociology (Çekim, 2019). Undoubtedly, the changing nature of diseases and the understanding of public health in this period are products of the war (Güven, 2014). The development of health sociology is noted in the literature as having occurred only in the second half of the 20th century, primarily as an applied field within sociology. While health sociology gained momentum in the late 1940s in the United States, its development in Europe took place in the late 1950s (Torun, 2015). The publication of Talcott Parsons' work "The Social System" in 1951 played a crucial role in providing health sociology with a theoretical framework (Güven, 2014). In this work, Parsons, influenced by prominent sociologists such as Durkheim, Weber, and Freud, discussed the sociocultural significance of being healthy and the adoption of the sick role (Kasapoğlu, 1999). Additionally, Parsons contributed to the conceptual framework of health sociology by defining concepts such as 'sick role and patient behavior' and 'physician role and physician behavior' (Çekim, 2019). Following Parsons, Kendall and Merton

focused on health, physicians, and medical education in their 1958 study (Kendall and Merton 1958).

By the 1960s, there were approximately 700 sociological studies related to health sociology in the United States (Türkdoğan, 2006). However, health sociology in Turkey lagged behind European and American countries in terms of both quantity and development, not evolving simultaneously with other nations (Eryiğit Günler, 2011). The development of health sociology in the United States and Europe after World War II contrasts with its nascent status in Turkey (Özen, 1993).

Analyzing the studies in the field of health sociology in Turkey, it is evident that there are significantly fewer compared to studies in other subfields of sociology (Ekizer, 2020). Initially, health sociology studies in Turkey were predominantly conducted by physicians, with figures like Rasim Adasal, Hamdi Dilevurgun, and Nusret Fişek being notable examples (Tecim, 2017). The first sociologist to conduct research in the field of health sociology in Turkey is considered to be Orhan Türkdoğan. His study, conducted by observing 37 villages in Erzurum province for two years, examined the attitudes and behavior patterns of people in the region towards the concepts of health and illness. Türkdoğan's work is considered pioneering and introductory to health sociology in Turkey (Çekim, 2019).

Two thesis studies in the 1970s are essential to underline in the context of health sociology. The first is Ahmet Gençler's thesis titled 'Sociocultural Determinants of Infant and Child Mortality' in 1974, and the second is Nuran Elmacı's thesis titled 'Birth-Related

Values and Attitudes in Three Different Rural Groups in Diyarbakır City' in 1976. Both thesis studies, evaluated in the field of medical or medical anthropology, follow Türkdoğan's thesis and stand as pioneering works in terms of subject and scope (Çekim, 2019).

In the 1980s, Müzeyyen Aytül Kasapoğlu became one of the most prominent figures in representing health sociology. Her 1982 doctoral thesis, titled 'Social Relations of Personnel in Health Organizations,' focused on preventive healthcare services, analyzing relationships between physicians, healthcare staff, and patients. Kasapoğlu also examined the influence and power of physicians in healthcare institutions and society concerning the roles they held (Kasapoğlu, 1982). In 1992, her work titled 'Medical Education: An Applied Sociological Study' explored how the profiles of individuals receiving medical education changed, how their values and attitudes towards their professions changed compared to students in other faculties, and how values and attitudes in line with the medical profession were affected throughout their medical education (Güven, 2014). In the following years, Kasapoğlu continued to contribute to the field with works such as "Health Sociology, Research from Turkey (1999)" and "Two Sides of the Coin: Illness and Health (2008)" (Güven, 2014).

It is also essential to mention the works of Bahattin Akşit and Belma Akşit. In their 1989 article titled 'Socio-Cultural Determinants of Infant and Child Mortality,' they researched the relationship between biomedical models and psycho-cultural and socio-economic factors in infant and child mortality (Akşit and Akşit, 1989). Another significant name contributing to health sociology in Turkey is Sezgin Kızılçelik. His work "A Comparative

Study of the Sociological Aspects of the Health System in Rural and Urban Areas" aimed to introduce medical sociology and provided contributions to the literature by evaluating the concept of health within the context of medical sociology (Kızılçelik 1996). In the years 1995-1996, Kızılçelik continued to focus on health sociology in his studies titled "Postmodernism and Alternative I-II," offering assessments of the health system in the context of modernism, postmodernism and alternative medicine (Güven, 2014).

Sevinç Özen's work in 1993, titled "A Field in Sociology: Health Sociology and Health-Social Structure Relationships," conceptually addressed health sociology. The study focused on the birth of health sociology, its areas of examination, and the social variables affecting health (Özen, 1993). Ülgen Oskay also made significant contributions to the foundational conceptual framework of health sociology in his 1993 work, "Some Conceptual Explanations in Medical Sociology." Oskay delved into the relationship between society and health institutions, disease behavior, patient and physician status, and the interaction between patients and physicians (Güven, 2019).

Zafer Cirhinlioğlu is another sociologist with contributions to health sociology. Besides his book "Health Sociology," published in 2001, Cirhinlioğlu has various articles published in journals. In the same year, a significant contribution to the field of health sociology in Turkey is the special issue on Health Sociology published in the journal *Toplumbilim* (Güven, 2014). This special issue included both translated works and original studies within the scope of health sociology. Notable names in *Toplumbilim*'s special issue on health sociology include Işık (2001), Erbaydar (2001),

Ersoy (2001), Özsan (2001), Kaya (2001), Güler (2001), Gürsoy (2001), Dikmen (2001), and Eskin ve Sarban (2001). Additionally, the special issue included translations of works by Parsons (2001), Turner (2001), and Foucault (2001), which made significant contributions to health sociology (refer to Table 1 for the titles and subjects of these works).

Table 1: Health Sociology Special Issue of the Journal of Sociology (2001).

Author Name	Study Name	Subject Of The Study
Tuğrul ERBAYDAR	Health: For Whom?	Who is health for? It is about the answer to the basic question.
Tolga ERSOY	Medicine and Alienation	The change in the view of the human body and health in modern human societies is explained within the framework of the concept of alienation.
Müzeyyen GÜLER	Socio-Cultural Factors and Women's Mental Health: Karanfilköy and Küçükarmutlu Women.	The results of the study, whose research subject is women, are evaluated mostly in terms of women and mental health.
Akile GÜRSOY	Health and Social Anthropology: Cultural Dimensions of Child Health	Social factors affecting infant and child deaths in Turkey are being investigated.
Emre IŞIK	Rationalization in Western Society The Birth of Asylums and "Homo-Medicus"	The concepts of madness and otherness in Western societies; The emergence of institutions and statuses such as medicine, asylums and physicians is evaluated.
Muharrem KAYA	Traces of Ancient Turkish Beliefs in Folk Medicine in Turkey	Beliefs, attitudes and folk medicine of Turkish societies are examined in terms of resisting diseases, starting from Central Asia.
Gül ÖZSAN	On Traditional and Modern Medicine	The reasons for the emergence of the disease in both traditional and modern medicine, who prefers traditional and modern medicine in their treatments, and the main factors affecting this choice are discussed.

In the subsequent years, studies in the field of health sociology gained momentum. Translated books that address various themes in the context of health, such as Ivan Illich's "Medical Nemesis," Bryan S. Turner's "Medical Power and Social Knowledge," Ray Moynihan and Alan Cassels's "Selling Sickness," and Jonathan M. Metzl and Anna Kirkland's "Against Health as a New Virtue," exemplify the growing body of literature in Turkish (Eryiğit Günler, 2011; Tekin, 2007). Additionally, works by Burhan Baloğlu (2006), Nurşen Özçelik Adak (2002), and İlker Belek contribute to the field of health sociology in Turkey (Eryiğit Günler, 2011; Tekin, 2007).

Although interest in health sociology in Turkey has increased since the 1960s, it is essential to note that this interest is still not at a sufficient level. The general reasons for the insufficient attention to health sociology in Turkey include the lack of a multidisciplinary institutionalization in the field, inadequate financial support, the absence of specific periodicals dedicated to health sociology, the challenging nature of research in health sociology, and the tendency to produce repetitive and similar works within the existing health sociology literature in the country (Çekim, 2019).

3. Theoretical Approaches In Health Sociology

Health sociology is built upon various theories such as Structural-Functionalism, Symbolic Interactionism, Conflict Theory, and Feminist Theory (Tecim, 2017).

In the 20th century, Talcott Parsons' analysis of the roles individuals play when feeling unwell and when they are considered patients, as presented in his book "The Social System," is considered

a fundamental turning point in the history of health sociology (Turner, 2007). Parsons, with a functionalist perspective, forms the basis of health sociology, emphasizing the role of individuals in maintaining social order when they are unwell (Eryiğit Günler, 2011). Parsons focuses on the issue of objectivity in physician-patient relationships and defines the concept of the sick role through social system analysis (Adak, 2011). Structural-Functionalism views society as a system composed of subsystems, each performing specific functions, incorporating concepts such as unity, order, balance, and harmony (Açıkgöz, 2021). According to Parsons, for the establishment of order and balance in society, everyone must fulfill their roles and adapt, emphasizing the responsibilities that individuals have in maintaining social order (Aytaç and Kurttaş, 2015). Parsons asserts that both physicians and patients have specific roles in society (Açıkgöz, 2021). The anticipated outcome is the prevention of conflicts and disagreements during physician-patient communication, leading to the establishment of social order based on predefined behavioral patterns (Cirhinlioğlu, 2001). Individuals who fully meet the responsibilities assigned by society and perform their expected roles are considered healthy, while those who fail to fulfill their responsibilities and roles are deemed ill (Eryiğit Günler, 2011). According to this approach, physicians are described as well-trained, educated individuals who accept the patient role and strive to treat and improve compliant patients (Açıkgöz, 2021). Various patterns of sick roles dictate how individuals should behave when they fall ill (Parsons, 2001). Parsons suggests that for individuals to continue their societal functions when they are unwell, they must first accept their illness and seek treatment (Eryiğit Günler, 2011).

The sick role, according to Parsons, can be defined based on four components (Turner, 2007): the sick individual must rest to recover, may be exempted from responsibilities due to their medical condition, is obligated to recover, and, finally, must seek health care from a specialized physician. Parsons developed this concept to determine behavioral patterns that individuals could adopt to minimize the destructive effects of their illnesses (Aytaç and Kurtdaş, 2015).

In conclusion, the sick role framework describes the physician-patient relationship system based on variable role patterns. Additionally, the sick role is a temporary role, and emotional attachment between the patient and the physician is not emphasized in this approach (Turner, 2007). Although Parsons made significant contributions to the field of health sociology with his proposed approach, Structural-Functionalism is criticized in several aspects (Aytaç and Kurtdaş, 2015). Adopting sick roles is not an easily processed for individuals, so the sick role is withheld from individuals until a definitive diagnosis is made (Açıkgöz, 2021). Parsons claims to have defined an ideal type physician analysis in his model; however, many sociological studies show that Parsons' ideal type analysis of physician-patient relationships does not address real concrete physician-patient interactions (Turner, 2007). Parsons often analyzes the sick role in the context of acute illnesses rather than chronic conditions. Therefore, Parsons' model assumes that the patient will recover after treatment. However, some illnesses are prolonged, and the patient cannot be exempted from responsibilities (Giddens, 2008). Parsons advocates treating all patients without making distinctions based on class, gender, or

status. Empirical research does not support this idea, and significant differences in the treatment of patients are explained by social class (Turner, 2007).

Symbolic Interactionism, which emerged in the 1960s, found application in health sociology in the 1980s. Early examples of this approach in health sociology are found in the works of Howard Becker, Anselm Strauss, and Erving Goffman (Tecim, 2017). Symbolic Interactionism broadly encompasses the conversations individuals conduct within themselves and their social experiences with others (Cockerham, 2013). Symbolic Interactionism seeks to answer questions such as how individuals interact with societies, how individuals understand each other, and the reasons for the success of individual social interactions (Açıkgöz, 2021).

Conflict theory struggles to find a place in the field of health, as not every situation and condition in health can be explained by the logic of conflict theory (Tecim, 2017). This is because economic interests are at the core of conflict theory (Özer, 2019). This approach, also known as Marxist Approach, emerged in the 1970s and focuses on the conflict between groups trying to gain superiority and experiencing conflicts in various aspects of society (Tecim, 2017). The Marxist approach particularly emphasizes that the exploitation of workers and the profit-oriented understanding of capitalism can create hazardous working environments and living conditions in rural areas. It suggests that these conditions can lead to higher death and disease rates among the working class (Özer, 2019). In capitalist societies, medicine reflects the characteristics of capitalism. In capitalist societies, the wealthy have access to the best healthcare services, a privilege granted by the capitalist system. The

rest of the population, especially the poor, finds it challenging to access healthcare services (Açıkgöz, 2021).

Finally, Feminist theory is one of the approaches that express views on the effects of gender on health and disease. It consists of studies addressing the impact of gender on health and disease (Eryiğit Günler, 2017). The basic idea of Feminist theory is that socialization into gender roles has a decisive impact on health and disease. According to feminists, medicine plays a significant role in strengthening conformity to social roles, particularly targeting women (Özer, 2019). Feminist theory draws attention to the ways privileged groups use medical and scientific knowledge in society (Aytaç and Kurttaş, 2015). However, the initial studies conducted by feminists primarily focused on women. In particular, when addressing sexism, the studies discuss the lower status and hierarchy of women physicians compared to male physicians (Tecim, 2017). Generally, Feminist theory criticizes the impact of the capitalist order on health services and attributes the cause of illness to poverty and sexism (Macionis, 2012).

4. Conclusion

The concept of health is often characterized by the absence of illness, the individual's harmony or state of tranquility with both the body and mind, and functional adequacy. The concept of health gains more meaning when considered in the cultural context alongside the concept of illness. Health sociology is a field built upon understanding the relationship between health and social factors, primarily focusing on the social causes of health and illness (Aytaç and Kurttaş, 2015). The areas of study in health sociology encompass the social aspects of illness and health, the social actions

and behaviors of healthcare professionals and patients, social activities in healthcare institutions, the social aspects of healthcare services, and the relationship of the health system's economic and political aspects with other systems (Cockerham, 2007). When evaluating the theoretical approaches of health sociology throughout history, various approaches emerge. The main approaches can be summarized as follows:

Structural-Functionalism Model: In this model, society appears as a balance in the social system, with individuals playing roles as both patients with a sick role and as individuals with rights and responsibilities, including physicians and patients.

Symbolic Interactionist Model: This model focuses on the general experience of illness, understanding what the patient feels, the cultural and individual context, and the social and cultural comparison of the disease.

Conflict Model: This model highlights conflict and division in social reality, the power of physicians, the influence of the capitalist system on the healthcare sector, and the inequality in accessing healthcare resources in a capitalist order.

Feminist Model: Within this model, one can observe the sexist structuring within the healthcare system, gendered patterns in experiencing illness, and the relatively low status of women as physicians.

In conclusion, health sociology plays a crucial role in unraveling the social dimensions of health and illness. The various theoretical approaches provide insights into how health and illness are perceived and experienced within different sociological

frameworks. Understanding health sociology allows for a comprehensive examination of the complex interplay between individual well-being, societal structures, and cultural contexts.

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BÖLÜM III

Analysis and Management of Physical and Ergonomic Risks on Ships

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Mert SUSOY²

1. Introduction

The health and security of the workers directly impact the quality of the worker's performance at work. In this regard, ergonomic principles are among the most critical factors (Aksüt et al., 2020). Research on ergonomics is increasing in literature. In today's world, the scientific look over risk is another vital term that affects output quality. Consequently, risk assessment of ergonomics has become more and more critical. When we review on literature; Hulshof and friends researched on ergonomic risk factors on

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musculoskeletal diseases (MSD) and they revealed the strong relationship between them (Hulshof et al., 2021), Genaidy and friends made a research on high repetition, excessive forces and awkward posture's impacts on musculoskeletal systems by review of literature (Genaidy et al., 1993), Gorai and colleagues did a research in noise and illumination level's relation to workers performance (Gorai et al., 2007), David contributed to literature with his study on MSD research methods (David, 2005), Jaffar and colleagues composed of literature review over ergonomic risk factors in construction industry (Jaffar et al., 2011), Krikhorn and fellow workers researched ergonomic risk factor of agriculture stakeholders (Kirkhorn et al., 2010), Werner and Armstrong revealed the effects of ergonomic factors on carpal tunnel syndrome (Werner & Armstrong, 1997), Remmen and friends deduced that not only the active but also retired fishermen should be investigated for better understanding of long result of work-related MSD of fishermen (Remmen et al., 2021). As can be seen clearly, ergonomic risk factors are a hot topic in literature due to technological progress. Technology is not only making our lives easier, but this ease also causes some physical and ergonomic problems.

In this regard, it is essential to look over the maritime sector. Because almost %90 of world goods are transported by the maritime sector(UNCTAD, 2023). This situation depends on the seafarers who are the most critical parts of maritime transport. Even though it is one of the oldest lines of work in human history, it is still on-trend. In 2021, over 850,000 officers were certified by Standards of Training Certification and Watchkeeping (STCW) worldwide (BIMCO & ICS, 2021). There needs to be more interest in the

maritime sector to cover the employment gap in the world maritime sector. It is another big reason for developments against the maritime sector's physical and ergonomic risk factors. Nevertheless, besides all the developments, the health and security of seafarers is still a hot topic. Also, The International Organization of Standardization (ISO) is working on the affirmatory process of physical and ergonomic factors in the maritime sector. Some of the documents published by ISO are listed below;

- ISO 7547 (2022) Ships and marine technology: Air-conditioning and ventilation of accommodation spaces and other enclosed compartments on board ships - Design conditions and basis of calculations.
- ISO 8861 (1998) Shipbuilding: Engine-room ventilation in diesel-engined ships - Design requirements and basis of calculations.
- ISO 7730 (2005) Ergonomics of the thermal environment: Analytical determination and interpretation of thermal comfort using calculation of the PMV and PPD indices and local thermal comfort criteria.
- ISO 7033 (2023) Ergonomics of the thermal environment: Analytical determination and interpretation of heat stress using calculation of the predicted heat strain.
- ISO 7243 (2017) Ergonomics of the thermal environment: Assessment of heat stress using the WBGT (wet bulb globe temperature) index.

However, seafarers' health and security differ from other activities. Because the central veins of maritime transport are ships, and ships have to cope with nature even in every simple activity they are conducting, challenges against nature become ordinary for seafarers, and this ordinariness mostly ends with neglecting some health issues. The table below shows the factors and the direct sources of maritime

physical and ergonomic risk factors. Three experts determined these factors after semi-structured interviews with 70 seafarers.

Table 1. Physical and Ergonomic Risk Factors in Maritime

Factor No.	Physical and Ergonomic Risk Factor	Direct Source
F1	Weather and sea state	Nature
F2	Rumble	Machinery
F3	Vibration	Nature and machinery
F4	Inadequate ventilation	Machinery
F5	Heavy and overactivity	Nature and machinery
F6	Heat, humidity and air flow	Nature
F7	Perpetual sitting or standing	Nature
F8	Radiation	Machinery
F9	Exposure of chemicals	Machinery

As can be seen from Table 1, nature has a significant effect on physical and ergonomic risk factors. If we look closely at the effects of F1, F3, F5, F6, and F7, we can see that they are directly caused by nature. This makes the maritime sector unique from any other branch of activities. In this paper, we tried to understand the physical and ergonomic risk factors on ships and reduce their harmful effects on seafarers. In this regard, 70 seafarers will be consulted for revealing the most affected part of the body and the FMEA risk analysis method implemented to those risks. Although physical and ergonomic risk assessments are highly researched in literature, they are rare in the maritime sector. This paper aims to stand in the bridge for this gap in the maritime sector.

2. Method

FMEA was created as a design methodology for aerospace, but because of the great interoperability with other engineering branches, it is now a common risk analysis method(Bowles &

Peláez, 1995; Liu et al., 2013). Huang and friends researched literature on maritime transport risk assessment conducted in the last 22 years and revealed that FMEA was used in %0.59 of the studies(Huang et al., 2023). Even though it looks very few at first sight, FMEA is still one of the most convenient ways to assess maritime risks.

FMEA basically uses *Risk Priority Number (RPN)* to assess and prioritize the risk factor. There are 3 main source that compose the *RPN*. These are *Severity (S)*, *Occurance (O)* and *Detection (D)*. *RPN* is multiplication of these 3 qualifications of the risk factor.

$$RPN = S \times O \times D$$

The three criteria that generate *RPN* are scaled from 1 to 10. The scale measurement criterion is shown in the table below(Vinodh & Santhosh, 2012; Yousefi et al., 2018).

Table 2. Scale of Criterias

Rank	<i>S</i>	<i>O</i>	<i>D</i>
10	Danger without notice	Very high	Impossible
9	Danger with notice		Very Hard
8	Very High	High	Hard
7	High		Very Low
6	Medium	Medium	Low
5	Low		Medium
4	Very Low		Higher Than Medium
3	Neglectable	Low	High
2	Very Neglectable		Very High
1	No Failure	None	Certain

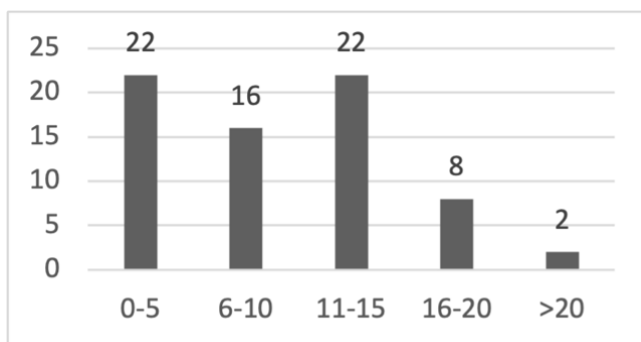
RPN scale is shown on the table below. It is starting point of risk assessment with FMEA on this paper.

Table 3. RPN Scale

<i>RPN</i>	Precaution Style
$RPN < 40$	Not necessary to take precaution
$40 < RPN < 100$	It is beneficial to take precaution
$100 < RPN$	Precaution is necessary

3. Findings

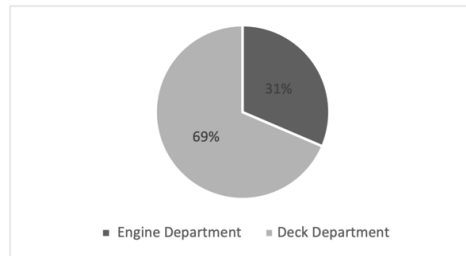
For this study, 70 seafarers were interviewed in semi-structured interviews to better understand the physical and ergonomic risk factors of ships. When we look at the sample group, we first notice that they are all men. Graph 1 below indicates the range of working time of the sample group on ships.



Graph 1. Range Of Working Time On Ships

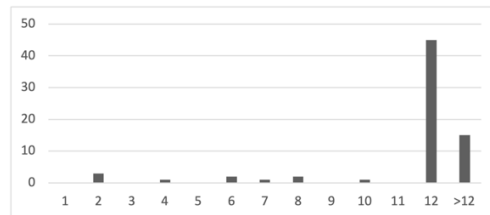
Graph 2 presents department of the participants. Almost %70 of participants from deck department. This is an important data while analyzing the physical and ergonomic risk factor. Even all departments personnel effected by the same natural factors,

dissimilarity of the work they are conducting on ships effects them differently.



Graph 2. Range Of Department

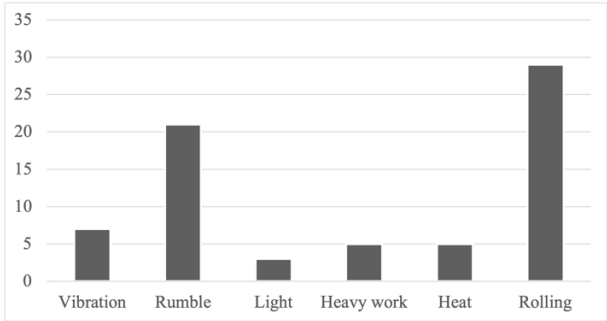
Graph 3 displays how many hours per day participants keep watch and it demonstrates that how hard seafarers are working. Because as it is stated below that %86 of participants works 12 or more hours per day. We should add two more difficulties in that situation. First of all, even the seafarers not on watch, they still experience the physical and ergonomic risk factors. Because they are living in their ship also in their breaktime. Secondly, even working in ship includes not only high physical but also mental effort.



Graph 3. Work Hours Per Day

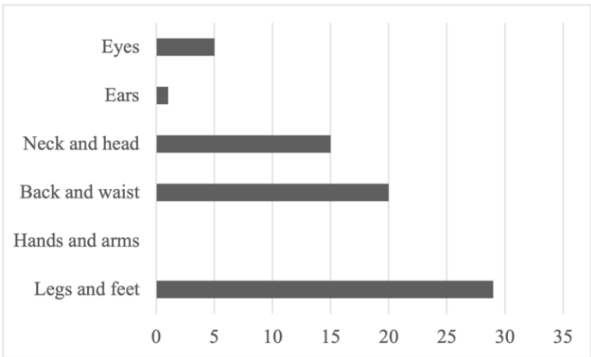
Graph 4 is the result of the question that participants answered “What is the worst factor that effects your body on ship?” It is one of the most important graphs of this study. The factor that evaluated the worst by participant is rolling. Rolling is induced by nature and it is a big part of the life at sea. The second one is rumble

and it is induced by machinery. When we checked the answers given by participants, it is remarkable that answer given by the seafarers from different deputies. Because over %65 of participants who evaluated rumble as the worst effect are from engine department. The engine room and engine control room which are usually very close each other are the most effected parts of the ship from rumble.



Graph 4. The Worst Effective Factors

The last graph reveals the most effected body parts of the seafarers. As it is seen in graph 5 legs and feet are the most effected parts. The main reason of that is perpetual sitting or standing under the effect of the nature.



Graph 5. Most Effected Body Parts

After interviews with 70 seafarer 3 experts, who are all oceangoing captains, the physical and ergonomic risk factors affecting seafarers were determined. These can already be seen in Table 1. After determining the risk factors, FMEA was implemented to prioritize them. FMEA results are presented in the table below.

Table 4. FMEA Implementation and Prevention of Risk

F	Nominative					Precaution	Reformed				
	S	O	D	RPN	Rank		S	O	D	RPN	Rank
F1	10	6	2	120	2	It is directly caused by nature and there is no way to prevent it from happening. However, meteorology science helps us to predict weather and sea state in any part of world with a high accuracy. So, changing course or adjusting speed can help to reduce the occurrence.	10	3	2	60	2
F2	5	10	2	100	4	Main reason for rumble is engines of the ship. Placing them inside a sound insulated capsules and wearing headphones when exposing to rumble are some basic solutions. Also today's daily wearable technology allows us to have rumble sensors on our smart watches. These accessories can be good awareness for seafarers.	5	5	2	50	3
F3	6	6	3	108	3	Vibration is another factor that caused by engines of the ship. Shock mounted engine system design can reduce the risk factor perceptibly.	2	2	3	12	6
F4	3	4	3	36	8	Also ventilation is an issue of the design of the ship. Building larger cabins with adequate ventilations system can solve the problem.	2	2	3	12	6
F5	5	5	2	50	6	Big progress in autonomous systems are spreading through maritime sector. But today human is still the cornerstone of shipping. Using adequate equipment while conducting heavy activities and scheduling work hours more carefully can reduce this risk factor.	4	5	2	40	4
F6	2	5	2	20	9	In this regard, especially engine room and engine control room workers are on high risk. Scheduling their time in high heat areas and giving breaks to cool down and recharge the motivation can be a solution.	2	3	2	12	6
F7	9	9	5	405	1	This factor has the biggest effect on seafarers. Because shipping incorporate long monotonous hours and days. Seafarers should be aware about monotonous activities and spend an effort to stretching and resting their bodies. Work hours are the key factor in this context. Work hours should be adjusted for every different work and duty to reduce this risk factor.	5	6	5	125	1
F8	2	10	2	40	7	Radars are one the most common and useful navigation aid of shipping. But they also produce radiation which effects seafarers. However, the amount of the radiation is not so high enough to harm human body. But reducing using time of the radars especially while the crew on open deck (like STS operations, maneuvering in harbors etc.) can reduce the impose of radiation which crew facing.	2	8	2	32	5
F9	6	4	3	72	5	Equipping a protective dress and taking necessary health precautions can reduce the risk.	2	2	3	12	6

4. Result and Review

Physical and ergonomics risk factors are one of the most critical factors that affects seafarers' safety, health and work performance. Thinking about this issue should start from the design of the ship. This paper aimed to help better understand of physical and ergonomic risk factors. On this regard 70 seafarer semi-structured interview and 3 experts determined the physical and ergonomic risk factors on ships. FMEA implemented the risk factors and prioritize from high risk to low. The first FMEA implementation showed that *F7* is the highest risk factor.

Furthermore, experts discussed about the prevention of that risk factors and implemented another FMEA. In second FMEA results, even the *F7* is still the highest risk factor, the *RPN* was decreased on large scale. That brings us in the result that, physical and ergonomic risk factors on ships can be reduced by taking precautions. However, it is also another research area for academicians. Because some of these solutions can cause decreases in profits of the shipping companies. For example, changing routes or increasing speed to avoid from bad weather can increase the fuel consumption and affects the profit directly. Multi criteria decision making (MCDM) methods can be used for individual situations to find the optimum solution.

The research revealed that risk factors also differ for departments also. Especially work safety courses should be considered based on that knowledge. Situational awareness and foresight should be grounded in every seafarer's mind against these physical and ergonomic risk factors with these courses. Another critical awareness for seafarers is nature. Most of the risk factors are

induced by nature and sometimes it is even not possible to prevent them. So, seafarers should be considering their own safety and health while they are working. One of biggest characteristic specification of shipping is working in the ship also means living in the ship. It is one of the factors that turns maritime to a lifestyle, not just a job. In this regard, also it has a vital importance for seafarers to use their free times effectively to reduce and prevent the effects of physical and ergonomic risk factors.

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BÖLÜM IV

Futuristic Management as A Competitive Advantage

Meral ÇALIŞ DUMAN¹

Introduction

Predicting the future and making interpretations about the future has been an area of interest since the existence of human beings. With the introduction of digital transformation, industry 4.0 or high technological devices into our lives, it has become important to be able to respond to this speed, to be the first to enter the market and to make quick decisions compared to competitors, among the rapidly changing needs, goods and services, what may happen in the future. In this context, the use of technologies as a tool and the digital transformation of businesses become an important competitive advantage.

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In this study, the issue of how futuristic perspective and futuristic management can provide competitive advantage to businesses is examined theoretically. There is a significant deficiency in the literature regarding futuristic management, futurism perspective in businesses and future-oriented studies. The reason for this deficiency may be due to the concept of futurism being attributed to new people and managers and the increasing importance of digital transformation awareness. In this context, the study is expected to contribute to the relevant field in terms of literature review and awareness raising.

1. The Concept of Futurism and Futurist

The concept of futurist is a special concept attributed to humans. The basis of the concept comes from the philosophy of futurism. Accordingly, futurism is a way of thinking, a perspective, and a set of efforts aimed at quickly seeing and predicting possible changes in the future and preparing for these changes (Çalış Duman, 2023: 70). According to Tarhan (2010), president of the Turkish Futurists Association, futurism is a positive future design, and a futurist is a positive future designer. This design focuses on the positive effects of technologies in the future, emphasizing that technologies are helpful to people. Futurism, which seeks answers to the question of what technological changes will occur in the future and how countries, businesses and individuals will be affected by these changes, tries to foresee and predict the future. Accordingly, the origin of the word comes from the word 'futurism', and the word 'futurism' means future, future design (Erdem and Uğuroğlu, 2019: 56).

Futurists are also responsible for strengthening the future sensitivity and openness of society and its members. On the other hand, futurists alone are not responsible for the creation and implementation of desired future alternatives (Nováky and Tyukodi, 2010). Because the future can only be created on the basis of cooperation. Participation is therefore necessary to create a mutually responsible and harmonious future. Futurists can not only help laypeople fulfill their responsibilities, but they can also offer some kind of positive example of what responsible thinking and acting can mean for the future. Futurists have more freedom in decision-making and can strengthen different directions of change. In this sense, they can stimulate the creation of significantly different future alternatives (Nováky and Tyukodi, 2010).

According to Tarhan, whoever holds the power, the source of their power is the futurist approach. Those who plan the future and create scenarios manage those who cannot do this planning. Societies and people who do not have change and futurism on their agenda are content to follow others' planned agendas, others' productions and developments. These countries miss many opportunities that are happening in the world (Tarhan, 2019: 57). For this reason, the adaptation of the futuristic perspective to businesses and its integration into management processes is of critical importance. Businesses need futuristic management to grow and be sustainable.

2.Futuristic Management

Futuristic management aims at harmonization by focusing on issues such as technological changes occurring all over the world, digital transformation, globalization, climate and natural life

changes, rapid change of demographic factors, and predicting customers' expectations and needs. Accordingly, futuristic management is a management approach that aims to cope with uncertainties about the future and change.

Futuristic management goes beyond a single practice area, such as planning, or any single role, such as technology forecasting. Both strategic planning and technological forecasting embrace the broader vision of a variety of approaches and tools that can be leveraged to integrate foresight as broadly as possible across the organization, aiming to increase foresight capacity across all organizational activities (Hines and Gold, 2014). The basic assumption of futurist management is to create new opportunities, compete for the future, and determine the boundaries of the sector. This management approach, which sets out with the aim of creating the future, requires preparing a road map, going beyond competitors and creating an independent idea for this (Taşkesen, 2008: 18).

It is becoming a requirement for managers to be futuristic for today's businesses. In particular, futuristic managers must seek new approaches to designing organizations, management and change, developing active learning paths and trajectories, as well as higher levels of adaptive knowledge transfer, to face ever-changing operational environments. These approaches may be organizational learning, openness to learning and flexibility. Businesses that learn in the face of changes, try to adapt to change and create a learning culture will also be successful in digital change and transformations (Ivaldi, Scaratti, and Fregnan, 2022). According to researchers working in the field of futurism, there should be a separate organizational futurist in the business and should constantly work on

the future situation of the business. Thus, the integration of the company's current actions and future goals can be achieved (Hines and Gold, 2014).

When the question of what a futurist manager should be is searched in the literature, it is seen that these managers are visionary, open to innovation, leaders who can coach their employees and prepare them for the future. These types of leaders mainly focus on respect, emotional intelligence and human development (Karaçivi and Demirel, 2014: 132). In his research on this subject, Hines (2003) referred to Goleman's research on leadership styles when explaining the characteristics of futurist managers. In this research, organizational futurists were included in the coaching leaders classification. Accordingly, leaders who coach develop, prepare and adapt people for the future.

3.Futuristic Management as a Competitive Advantage

The formulation of the concept of competition lies in the association of a business with its environment. The environment of businesses consists of the sector or sectors in which they compete. Industry structure plays a key competitive role for businesses. Accordingly, Porter (2015) underlines that businesses should have five important competitive strengths. These are market entry, risk of substitute products, bargaining power of buyers, bargaining power of suppliers and competition among existing competitors.

Businesses are required to enter the market first or faster than their competitors, to have a unique product and service, to shape the expectations of consumers, and to minimize their costs in order to gain competitive advantage. Each business' search for solutions to

achieve these demands is different. Futurist businesses' search for a solution is to predict the future through technology. In particular, futuristic management can play an important intermediary role in reducing the risk of market entry and substitute products. Because futurist managers are people who are open to learning, enterprising, predict the future, see opportunities, and like to be the first in the market. Research shows that businesses that learn, transform and make investments for the future achieve successful change management (AlManei et al., 2018). Accordingly, there are a number of advantages that futuristic management provides to businesses. Based on the literature, these advantages can be listed as follows: Digital technologies in production and service processes provide high efficiency, quality and fast production cycles. . For example, additive manufacturing with 3D printing and cyber-physical systems reduce both physical and geographical constraints due to lack of tools and blur the boundaries between the digital and physical worlds. This unique advantage opens up a new set of possibilities in terms of who can produce new products and how and when they can be produced. Thus, it has been stated that managers who have more sustainable, more innovative and flexible production processes are better prepared for changes that may arise in the future (Maric et al., 2023). Again, it is stated that blockchain technology will be used in every field of smart businesses in the future, from health to education, from finance to transportation. In this respect, futurist managers are also developing skills for cryptocurrencies and blockchain applications (Hassan et al. 2020).

As AI-supported algorithms become increasingly involved in the management of businesses, it becomes imperative to conduct

human-centered AI management research and understand people's emotions and behaviors. This may make it easier for technology-adopting and futuristic managers to make predictions about behavioral research and human-centered work designs and organizations (Dong et al., 2024). Again, futuristic managers combine the power, repeatability and accuracy of robots with the high-level cognition, flexibility and adaptability of humans to achieve high productivity and an ergonomic working environment (Wang, 2022: 199). Ensuring human-machine cooperation brings about changes in the way of doing business and working environments. As seen in Figure 1, while humans work together with machines, a task that is impossible today will be possible tomorrow, thanks to a super operator equipped with advanced capabilities, and durable smart factories will also be able to survive in the long-term future (Wang, 2022: 201).

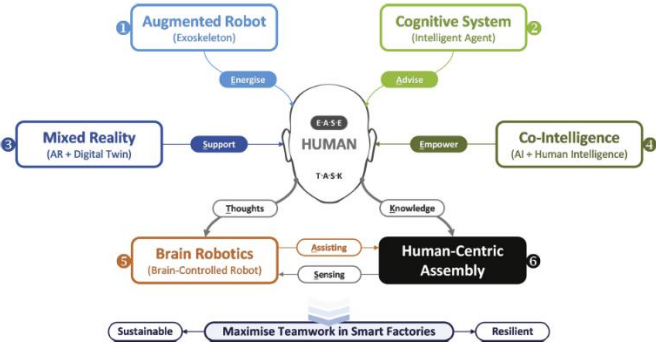


Figure 1: Example of Human-Centered Hybrid Work in Future Businesses (for assembly work) Source: (Wang, 2022: 201).

In their study on futurism in the health sector, Erdem and Uğuroğlu (2019) stated that with technology, speed will become an indispensable part of life and waiting times and procedural

procedures in hospitals will decrease. According to researchers, as a reflection of technological developments and developing treatment methods, it is predicted that life expectancy will increase, the importance given to elderly care centers will increase, and hospitals that invest in technology will achieve positive results.

In this context, the task of a futurist is to monitor changes to ensure early adaptation and proactive strategy (Nováky and Tyukodi, 2010: 1549). For example, health managers actively use digital health technologies in the treatment diagnosis of patients and in the process of generating data for new cases that may arise. Medical futurists see digital technologies as a tool to help individual patients and medical professionals prepare for changes in the near future (Mesko, 2021). Studies show that in the future, there will be significant changes in people's behavior, working styles, lifestyles and thoughts. For example, managers can use ChatGPT and Chatbots technologies when organizing training programs. These technologies can behave like humans when chatting with people over the internet (Ratten and Jones, 2023). For example, ChatGPT can influence managers' decision-making levels (Figure 2). While it reduces the workload of subordinate managers, especially in daily routine tasks, it can enable managers to make more accurate decisions at the strategic level.

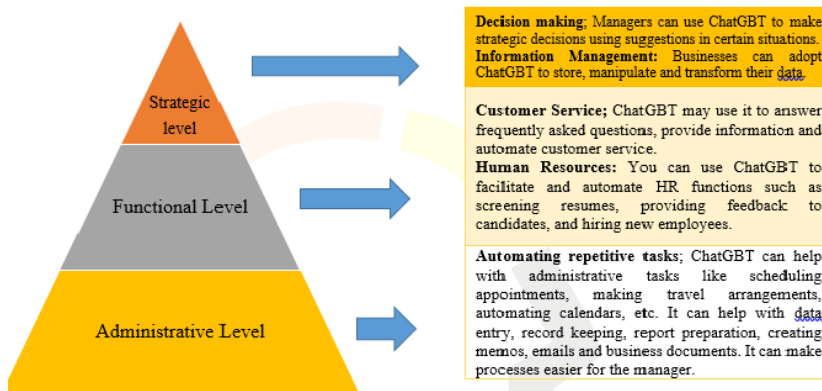


Figure 2: *Changes that ChatGBT Technology Can Create at the Managerial Level of Businesses* Source: (Korzynski, et al., 2023: 4).

Futuristic management is also a condition for the Sustainable Development Goals aimed at the Society 5.0 vision. Because the issues emphasized in these goals, especially decent work, gender equality, economic growth, clean energy, industrial innovation and infrastructure, responsible consumption and production, can only be achieved with a future-oriented management. Sustainability problems, ranging from environmental (climate change, air quality problems, waste accumulation), economic (unemployment, economic inequality) and social (food security, water scarcity and poverty) challenges emphasized in these goals, are also reflected in the vision of managers, future-oriented decisions and strategic management. can achieve its goal with . For this reason, systemic thinking and futuristic planning become a necessity for managers. (Kutty et al.,2020: 1348).

Conclusion

Today, businesses have much different problems than in the past. Businesses are trying to cope with many global problems such as climate change, pandemic, resource depletion and technological advances. Compared to the past, these problems require businesses to change faster and be flexible and agile. It is important for managers to be future-oriented in order to achieve agility, flexibility and adaptation to change, which also become competitive conditions. Futurist managers who can predict the future, work on the future and use technology as a tool can become leaders in the market and manage others. In this context, future studies emphasize the importance of methods and approaches that aim to help businesses cope with future uncertainties (Çalış Duman, 2023).

As a result, futuristic management can reduce the environmental footprint and create a sustainable business world that raises environmental awareness. It is a strategic power for managers to use high technology for both efficiency and sustainability and to prepare their employees, business conditions and strategies in this direction. For this reason, being a futurist business, organizations that reveal and direct changes rather than just following them, will be the most important competitive advantage not only today but also in the future.

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