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A Construct for Health Administration: Redefining the Boundaries of Practice

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Abstract: This study redefines health management as a multidimensional and strategic discipline extending beyond traditional administrative or clinical functions. Integrating interdisciplinary principles from public health, environmental science, policy, and organizational leadership, the research emphasizes holistic coordination of health activities at individual, institutional, and systemic levels. Employing a two-phase qualitative methodology—expert focus groups followed by validation interviews—this study synthesizes perspectives from diverse global practitioners to formulate a comprehensive working definition. The revised framework highlights operational efficiency, equity, sustainability, and stakeholder engagement, addressing complex challenges such as pandemics, climate change, and social disparities. By advocating for professional pathways, competency frameworks, and integrative governance models, this work positions health managers as proactive agents of change capable of promoting population well-being, resilience, and inclusive, environmentally mindful health systems worldwide.

1. INTRODUCTION

The discipline traditionally termed ‘healthcare administration’ involves the strategic oversight, coordination, and governance of medical organizations and their constituent departments. Foundational principles guiding this domain include optimization, accountability, and impartiality. Core operational tasks generally span seven pillars: strategic formulation, system structuring, personnel allocation, performance oversight, directional guidance, hazard mitigation, and informed decision-making. These responsibilities collectively contribute to institutional resilience, fiscal responsibility, and enhanced care quality.

The establishment of an explicit definition for ‘health-care management’ has enabled diverse professional profiles—ranging from clinical supervisors to diagnostic facility directors—to identify under this umbrella. Such role clarity has propelled the emergence of this domain as a recognized field of expertise, with accredited training programs and increasing scholarly focus, significantly boosting institutional service outcomes and community wellness.

Nevertheless, societal health extends beyond the scope of clinical environments. As emphasized by international charters, well-being is fostered within daily living conditions—education, employment, recreation, and social relationships. A more expansive paradigm, like the One Health model, considers the dynamic interaction among humans, animals, and environmental systems.

Establishing resilient and equitable health infrastructures demands a distinct professional sector that transcends traditional healthcare administration. This specialization must integrate methodologies from public health, governance reform, and environmental science to address foundational influences on health. Although many professionals already operate in this capacity across governmental, non-profit, and academic sectors, the field remains fragmented due to an absence of a standardised identity.

A formal and endorsed definition of ‘health management’ could support the formation of a unified professional identity. Such a standard would not only harmonize operational practices but also advance educational alignment and scientific inquiry. Recognizing this need, a collaborative initiative was launched to construct this definition, supporting systemic

readiness for global health challenges, including pandemics, ecological instability, and access disparities. The European Health Management Association (EHMA), through its integrative role across sectors, spearheaded this initiative. EHMA's continual engagement with field practitioners allows for evidence-informed insights and fosters a platform for exchange, innovation, and capacity building in health management practice.

2. METHODS

This study was conceptualized and executed under the leadership of the European Health Management Association (EHMA), drawing on strategic contributions from its governing board and Scientific Advisory Committee. Adopting a qualitative research design, the study aimed to systematically capture diverse expert perspectives to redefine health management in a manner reflective of current global challenges and interdisciplinary thinking. The methodological approach was structured into two main phases: an initial exploratory focus group phase followed by a structured validation phase, both designed to ensure iterative refinement and triangulation of insights.

A. Focus Group Process

The first phase involved the formulation and refinement of a working definition of health management through interactive focus group discussions. To initiate this process, a rapid review and synthesis of existing academic and grey literature were conducted to capture prevailing definitions, conceptual gaps, and emerging themes in the field of health systems management. This synthesis informed the drafting of a preliminary definition which served as the foundational discussion material for expert engagement.

A panel of nine experts was assembled from EHMA's extensive professional network. Participants were selected through purposive sampling based on specific inclusion criteria:

- (i) possession of doctoral-level qualifications in health systems, public health, healthcare administration, or related disciplines;
- (ii) at least ten years of demonstrated leadership experience within health-related institutions; and (iii) a history of scholarly contributions, including peer-reviewed publications, conference presentations, or policy advisory roles.

Careful attention was given to ensuring heterogeneity within the focus group. Participants represented a balance across gender identities, geographical regions (including both European and non-European countries), and areas of professional practice (e.g., clinical leadership, health policy, academic research, and hospital management). This diversity was intended to facilitate a more comprehensive exploration of the definitional dimensions of health management.

Two virtual focus group discussions were convened, each lasting approximately two hours and attended by all nine experts. The sessions were moderated by an experienced facilitator with expertise in qualitative research methodologies and systemic leadership in health systems. The moderator employed open-ended questioning, reflective prompting, and thematic probing to encourage deep engagement with the evolving definition.

During the first session, the initial draft definition was presented, followed by an open dialogue that allowed participants to critique, contextualize, and expand upon the preliminary concepts. Key thematic domains emerged, including interdisciplinary integration, digital transformation, governance ethics, environmental sustainability, and stakeholder inclusivity. These discussions were recorded, transcribed, and subjected to thematic analysis to extract recurring patterns and consensus areas.

A synthesis of these insights was used to update the draft definition. In the second session, participants engaged in a structured consensus-building process to evaluate the revised version. Through deliberation and iterative feedback, the group arrived at a consolidated working definition that reflected the collective perspectives of the experts.

B. Validation Phase

To strengthen the credibility and generalizability of the findings, a second validation phase was conducted. This phase aimed to test the applicability, clarity, and comprehensiveness of the working definition developed in the focus group discussions.

An expanded pool of experts was recruited using snowball sampling and EHMA's broader institutional affiliations. The

inclusion criteria for this round were intentionally broadened to include professionals with demonstrated expertise in public health governance, global health policy, epidemiology, and health economics. Additional considerations such as linguistic diversity, geographic spread across multiple World Health Organization (WHO) regions, and representation from both high- income and low- to middle-income countries were prioritized. Seventeen experts—comprising both original focus group members and newly recruited participants—took part in this validation exercise. Each participant engaged in a one-on-one semi-structured interview lasting approximately 15 to 20 minutes. The interviews were conducted via video conferencing platforms and began with a standardized introduction outlining the objectives of the study, followed by a presentation of the revised working definition.

Participants were then invited to critique the definition on various dimensions including conceptual clarity, operational relevance, breadth of scope, and alignment with current global health system challenges. Feedback was recorded in detail, and interviews were subsequently transcribed and analyzed using directed content analysis. Particular attention was paid to divergent viewpoints, which were further reviewed by the research team to determine whether additional modifications to the definition were necessary.

Through this rigorous validation process, incorporating multiple cycles of consultation and expert review, the final definition of health management was formulated. It represents a synthesis of empirical evidence, expert consensus, and practical applicability. This multi-phase methodological approach ensures that the resulting definition is both academically grounded and responsive to real-world practice needs, offering a solid foundation for future discourse and implementation in the field of health systems management.

3. HEALTH MANAGEMENT: A REVISED DEFINITION

Health management, as redefined in this framework, refers to the comprehensive and strategic coordination of activities aimed at advancing health and well-being across individual, institutional, and systemic levels. It moves beyond the conventional view of health management as merely an administrative or clinical endeavor and instead embraces a multidimensional construct that integrates personal behaviors, social determinants, environmental factors, and policy systems. This rearticulated perspective aligns with contemporary, integrative paradigms—such as One Health and Planetary Health—by recognizing the interdependence of human, animal, and eco- logical health.

At its core, health management entails both operational efficiency and strategic foresight, harmonizing the delivery of care with the broader objective of sustainable development. It includes traditional responsibilities within the health sector—ranging from primary to tertiary care—but critically extends to non-clinical domains such as community engagement, environmental planning, and public policy. Through this lens, health management is inherently interdisciplinary and systems-oriented, capable of addressing complex challenges such as health inequities, climate change, pandemics, and social fragmentation.

Health managers, as defined in this broadened context, are individuals who take an active role in shaping health outcomes through informed leadership and systemic thinking. They may occupy roles across a wide array of sectors, including health- care institutions, governmental bodies, non-governmental organizations, academia, and civil society. Their qualifications need not be restricted to specific academic disciplines or professional titles; rather, their contributions are validated by their capacity to synthesize diverse forms of knowledge, apply ethical principles, and lead initiatives that advance the public good.

Table 1. visualizing the methodological steps towards a health Management definition

Phase	Description
Initial Definition	Coordination of health systems activities to secure population-level well- being.
Key Concepts from Groups	Multisectoral—holistic—digital integration—environmental interaction— interdisciplinary—policy alignment—behavioral and societal influences.
Validated Definition	Strategic leadership promoting health across societal levels, incorporating hu- man, animal, and ecological consid- erations. Recognizes stakeholders in governance, industry, and civil society for cooperative health system advance- ment.

The definition evolution depicted in Table I illustrates the methodological trajectory undertaken to refine and validate the concept of health management. Beginning with a foundational understanding centered on system coordination, the definition was expanded by integrating insights from interdisciplinary working groups. These insights emphasized the need for multisectoral collaboration, digital innovation, environmental stewardship, and alignment with societal values and behaviors. The final validated definition reflects a synthesis of these diverse elements, positioning health management as a critical enabler of equitable and sustainable health systems.

To fully institutionalize this revised paradigm, there is a pressing need for the development of formal governance models and professional pathways for health managers. This includes the establishment of competency frameworks, credentialing mechanisms, and continuous learning structures that support professional growth and accountability. Furthermore, embedding these elements within national and international policy agendas will legitimize health managers as key actors in the global health landscape, capable of fostering resilience, equity, and long-term system adaptability.

Ultimately, this reconceptualization of health management equips societies with a forward-looking, integrative, and action-oriented framework that can better respond to emerging global challenges. It recognizes that meaningful health advancement requires not only technical interventions but also visionary leadership, ethical governance, and inclusive participation from all sectors of society.

4. IMPLICATIONS

The redefined concept of health management introduced herein carries considerable ramifications for how health ecosystems are designed, overseen, and executed—particularly regarding longevity, inclusivity, and intersectoral synergy. This framework establishes a theoretical base that blends principles from One Health and advocates for resilient, equitable, and high-performing systems. The approach reinforces excellence across both policy formation and operational execution, enhancing systemic preparedness and population well-being.

A. *System Efficiency and Ecological Continuity*

In this context, sustainability denotes the endurance of health frameworks to function effectively over extended periods, even amid socio-economic or ecological disruptions. Efficiency, serving as the cornerstone of sustainability, signifies optimal deployment of available resources—including financial assets, workforce, and technology—to maximize health outputs while curbing redundancies.

This renewed outlook necessitates a comprehensive perspective wherein managers account for the mutual dependencies among digital infrastructure, environmental stability, and biological health. Challenges such as pollution or rising temperatures now demand strategic foresight, as they can burden service provision and escalate public health risks. Likewise, digital governance in health domains must address disparities while supporting access equity.

Strategic plans should encompass climate-resilient health architecture and environmentally responsible pharmaceutical logistics. Sustainable practices must also address supply chain management, reduce institutional emissions, and conserve finite inputs such as water and energy within care settings.

B. *Equity Across Health Systems*

Another core consequence of this reframed definition is the heightened emphasis on fairness in healthcare distribution. Health structures are increasingly held responsible for rectifying imbalances caused by uneven access and the unequal allocation of societal resources like education, shelter, and income.

This updated interpretation places equity as a central mission, compelling managers to interact with medical professionals, legislators, advocacy networks, and civic organizations. Such collaboration enables the formulation of strategies that reduce exclusion and extend reach to disadvantaged populations.

For instance, equity-driven planning may include the deployment of mobile clinics in remote zones, fusion of health-care and social welfare services, and lobbying for policies that dismantle access barriers. Additionally, participatory models where community voices contribute to service evaluation and design will ensure relevance, inclusion, and

effectiveness.

C. Policy Integration and Institutional Oversight

From a governance lens, the refined framework offers a directional model to shape regulations anchored in fairness and sustainability. This perspective guides stakeholders in addressing multifaceted influences—digital, ecological, and economic—that affect public health infrastructures.

Legislators might adopt rules obliging service providers to quantify their ecological footprints, adopt green innovations, or assess care effectiveness alongside inclusivity and resource-consciousness. Performance benchmarks could be aligned not only to clinical output but also environmental responsibility and sectoral cooperation.

Moreover, this reconceptualization champions collaborative governance frameworks that involve constituents, non-profits, and private sector partners in co-creation processes. Health managers hold a pivotal role in fostering such integrative mechanisms, ensuring responsiveness, transparency, and alignment with collective health ambitions.

D. Population-Level Impact

By incorporating environmental and social determinants into operational scope, health management expands its influence over population health. Preventative actions—ranging from curbing air contaminants to stabilizing housing or promoting sustainable nutrition—are within its purview.

Decision-makers in this field must lead initiatives that prevent illnesses by confronting upstream risk factors. A definition centered on inclusivity ensures targeted interventions address diverse community needs—covering underserved demographics, minority groups, and individuals with special requirements.

Embedding sustainability and fairness into managerial activities empowers leaders to produce long-term health improvements. These efforts extend beyond immediate treatment needs and tackle foundational influences that shape well-being outcomes across populations.

E. Professional Preparation and Skill Development

Integrating holistic frameworks like One Health into leadership doctrine influences educational agendas across the sector. Updated competencies should span beyond hospital operations and embrace areas like environmental resilience, policy literacy, cross-sector coordination, and technology integration.

Future curricula must equip professionals to design adaptive infrastructures capable of withstanding pandemics or extreme climatic episodes. Emphasis should also be placed on waste reduction, renewable energy adoption, and digital fluency. Moreover, developing proficiencies in stakeholder engagement is essential, as health managers increasingly interact with planners, environmental agencies, agricultural sectors, and tech providers to build comprehensive, system-wide strategies.

5. CONCLUSION

The conceptualization of health management presented in this work lays the groundwork for a transformative approach to global health system governance. Rather than viewing health management as a narrow administrative function, the proposed framework elevates it into a multidimensional construct—one that is capable of guiding systems through complex transitions while remaining grounded in ethical, social, and ecological responsibility. It advocates for the evolution of institutions that are not only operationally resilient and economically viable but also fundamentally inclusive, equitable, and morally sound.

By integrating interdisciplinary methodologies—from public health and sociology to environmental science and organizational theory—the framework redefines the scope of health management to encompass the broader determinants of health. This holistic orientation ensures that decision-makers and institutions are better equipped to anticipate and respond to the interconnected challenges of modern health crises, whether they arise from pandemics, environmental disruptions, or systemic inequities.

At the heart of this framework is a reimagined managerial identity—one that moves beyond traditional roles to embrace a leadership paradigm rooted in collaboration, adaptability, and foresight. Health managers are envisioned

not merely as implementers of policy, but as proactive agents of change who are empowered to foster innovation, ensure social justice, and uphold environmental stewardship in the delivery of care.

The strategic integration of ethical considerations, social inclusivity, and ecological mindfulness into management practices contributes to a future in which health systems can sustain both human and planetary well-being. In doing so, this articulation offers a visionary yet actionable path forward—one where health management becomes a cornerstone of societal progress, driving measurable improvements in care quality, reducing systemic inequalities, and promoting long-term resilience across global populations.

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