



**College of Medicine and Health Sciences**  
**School of Public Health**

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# **HEALTH POLICY AND COOPERATION**

MPH, Msc Epidemiology,

2020 Cohort

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# Definition of key concepts in health policy and cooperation

***Health policy and policy  
analysis: what is it and  
why do we need it?***

# What is (health) policy and why study it?

# Objectives

**At the end of this session, students should be able to:**

- Define basic concepts in health policy making
- Explain why health policy is important and how to define policy.
- Describe the health policy framework: *Context, process and actors*
- Describe how health policies are made through the inter-relationship of context, process and actors

# Basic concepts in health policy making

## Key definitions

- a) Policy
- b) Policy makers /policy elites
- c) Public policy
- d) Public value
- e) Health policy
- f) Policy as intent
- g) Policy as practice
- h) Policy analysis

# What is policy?

# WHAT IS POLICY?

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## Reflection

### Reflection: WHAT YOU ALREADY KNOW ABOUT POLICY

*Before you read anything about policy in this session, please do the following:*

First, start by thinking about your home and family function. Can anyone at home just do whatever they please? What influences the behaviour of family members, or how things are done in the home? How do you make decisions in the family on issues that affect the family as a whole? These rules, practices, decisions can be considered policies, and in this session we will explain why this is so.

So, think further:

- How do these policies come into existence? Who develops them? What factors influence the types of policies that come into existence in your home and family?
- How are these policies known? Are they ever written down?
- How are the policies communicated to children or visitors? And how are they influenced by people's values and beliefs?

Secondly, writing down what you understand policy to be.

- Write down as many words, ideas or concepts that answer the question 'What is policy?' – be these at work, or in the country more generally.
- Why do we have policies? What is their purpose?
- How do these policies come into existence? Who develops them? What factors influence the types of policies that come into existence in a workplace or as a country?
- What form do policies take? Are these policies always written down or are some of them unwritten? If policies are not written down, how are they communicated to the public at large or those responsible for implementing or complying with them?



# What is policy?

- A set of decisions taken through a process of decision-making by those **people** with influence in a particular policy area, outlining a **proposed** course of action
- Within the confines of Public Law, made by governments

# Key terms

## Key terms

**Actor** Short-hand term used to denote individuals, organizations or even the state and their actions that affect policy.

**Content** Substance of a particular policy which details its constituent parts.

**Context** Systemic factors – political, economic, social or cultural, both national and international – which may have an effect on health policy.

**Policy** Broad statement of goals, objectives and means that create the framework for activity. Often take the form of explicit written documents, but may also be implicit or unwritten.

**Policy elites** Specific group of policy makers who hold high positions in an organization, and often privileged access to other top members of the same, and other, organizations.

**Policy makers** Those who make policies in organizations such as central or local government, multinational companies or local businesses, schools or hospitals.

**Policy process** The way in which policies are initiated, developed or formulated, negotiated, communicated, implemented and evaluated.

# What is Policy?

*Policy* is often thought of as **decisions** taken by those with responsibility for a given policy area

- Policy may be in health or the environment, in education or in trade.
- The people who make policies are referred to as **policy makers** or **policy elites**

## Who are policy makers?

# Definitions of key concepts in health policy processes

The term “policy”.

- **Within the health sector, policies can be of broad or narrow scope.**
  - Examples of some policies with broad scope :
    - Primary Health Care Policy , Decentralization Policy , Health Sector Reform
    - Health Financing policy (that illustrates new financing mechanisms, which affect (or should affect) most aspects of health service delivery.
  - Other policies, of strictly technical nature, address narrower issues, such as the control of a communicable disease or drug quality control
- This unit course focuses mainly on macro- and sector policies, whose implications affect the whole health sector or substantive aspects of it.
- Health can be influenced by policies in many different sectors. For example, transportation policies can encourage physical activity (pedestrian- and bicycle-friendly community design); policies in schools can improve nutritional content of school meals.

## Definitions of key concepts in health policy processes

- **The term “ health policies ”** are (or better: should be) recognizable even in the absence (or despite the content) of written statements.
- Health policies reflect the ways services are delivered, allocative decisions are made, information is produced and used, actors interact, old practices are followed and new ones are introduced: all these elements sum up into the “policies” governing a health sector during a given period of time.

# Who are policy makers?

- The people who make policies are referred to as **policy makers** or **policy elites**
  - **Policy makers** : Those who make policies in organizations.
  - **Policy elites**: Specific group of policy makers who hold high positions in an organization, and often privileged access to other top members of the same, and other, organizations.
    - Provide examples of policy elites in Government

# What is a Policy ? **implicit or explicit**

## A policy can be **implicit or explicit**

- **Explicit policies** are articulated and announced clearly  
i.e. ministerial speeches, legislative statements, laws and regulations, press releases...
- **Implicit policies** are not as clearly stated or explained, but can be equally powerful.
  - i.e., prohibition to spit on the road or in the public,
- Often, policies result simply from the incremental accumulation of decisions made over time

# Where is policy?

- Policy exists **within different** sectors of society
- Policies exist at all levels of society
  - Policy may be made at many levels – in central or local government, in a multinational company or local business, in a school or hospital.
  - Policies are made in the private and the public sector



# Public policy is ...

- is developed by **government** to influence itself and others
- a set of decisions (*course of action*) authorised by the state (*parliament, courts, & government officials*) and intended to create **public value**

# What is Public Policy ?

- Public policy refers to government policy
- Public policy is whatever governments (government, or a government department) choose **to do or not to do** (Thomas Dye ,2001)
  - Government's health or economic policy
  - Rwandan governments have chosen to introduce CBHI (mutuelle de santé) or
  - Merge public universities in one University of Rwanda
- Failure to decide or act on a particular issue also constitutes policy
  - Any example, (**NO TO DO?**)

# Public Policy categorization

- There are important overlaps between **social policy, economic policy and health policy**.
  - **Social policy** is concerned largely with the maintenance and distribution of income, and the provision of welfare services such as housing and transport to specific target groups such as the poor.
  - While, in principle, **health policy** has a narrower focus, for example in meeting the health needs of a specified population,
    - Health insurance policies may be designed to cater to the same target group as those catered to by the social welfare sector.

# Major Public Policies

- **Defense Policy** – structure, actors, cold war, nuclear arms race, post cold war, homeland security
- **Education Policy** – participants, reforms, policies, equity, policy models
- **General Social Policy** – actors, at-risk populations –elderly, children, handicapped, incapacitated, genocide survivors, etc.
- **Public Health Policy** – actors, policy functions of health and human services, Medicare, Medicaid, state children's health insurance program

# Why do we need public policy?

- To bring about changes in behaviour & practices that will generate benefit and value for society e.g. smoothly functioning organisations, health, economic development
- To provide a framework that contains unfair variation between areas (e.g. in health care provision)

# Public policy supports generation of public value

**Public value** is created by satisfying the desires and needs of the public;  
that is, by

- producing things of value to groups of citizens & beneficiaries
- operating in ways that meet citizens' desires for a well ordered society: being fair, efficient & accountable

# Public policies create public value through 'policy instruments'

- direct provision of services or commissioning of services
- provision of information, education, advice
- establishment of laws, tax rules, penalties - & policing them
- use of economic instruments, such as taxes, subsidies, social benefits/grants
- regulation of behaviour & markets
- procedures and rules concerning staffing & operations of elections, government agencies
- establishment of citizens' rights



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# HEALTH SECTOR POLICY

January, 2015

# What is Health Policy ?

- Embraces **courses of action (and inaction)** that affect sets of institutions, organizations, services and funding arrangements of the health care system (public and private).
    - Includes policy made in the public sector (by government) as well as policies in the private sector
  - **But because health is influenced by many determinants outside the health system**, It goes beyond health services, however, and includes actions or intended actions by public, private or voluntary organizations that have impact on health
    - (eg: the food, tobacco or pharmaceutical industries)
- (Walt 1994 p.41)

# *Health* Policy ...

Embraces courses of action (and inaction) that affect sets of institutions, organizations, services and funding arrangements of the health care system (public and private).

It goes beyond health services, however, and includes actions or intended actions by public, private or voluntary organizations that have impact on health

Walt 1994 p.41

# Health Policy ...

- Health policy refers to decisions, plans, and actions that are undertaken **to achieve specific health care goals** within a society.
- *An explicit health policy* can achieve several things:
  - Provides a general **orientations of the sector** which are further defined in various sub-sector policies guiding health key programs
  - Defines a **vision** for the future which in turn helps to establish targets and points of reference for the short and medium term.
  - Outlines **priorities and the expected roles of different groups**; and it builds consensus and informs people.(WHO)

# What is Health Policy ?

- Public Health Policy can be presented in form of:
  - Law or Act: Health insurance law, regulations
  - Ministerial instruction
  - Policy document: Health sector policy
  - Strategy...(health financing strategic plan)
  - Roadmap (CBEHPP)
  - Program (One Laptop per child program)

# What is Health Policy ?

- Provides a general **orientations of the sector** which are further defined in various sub-sector policies guiding health key programs
- In health care , we usually use public policy, or governmental action, to reduce or eliminate commonly experienced problems *which individuals acting alone cannot resolve.*

The elements of a policy include:

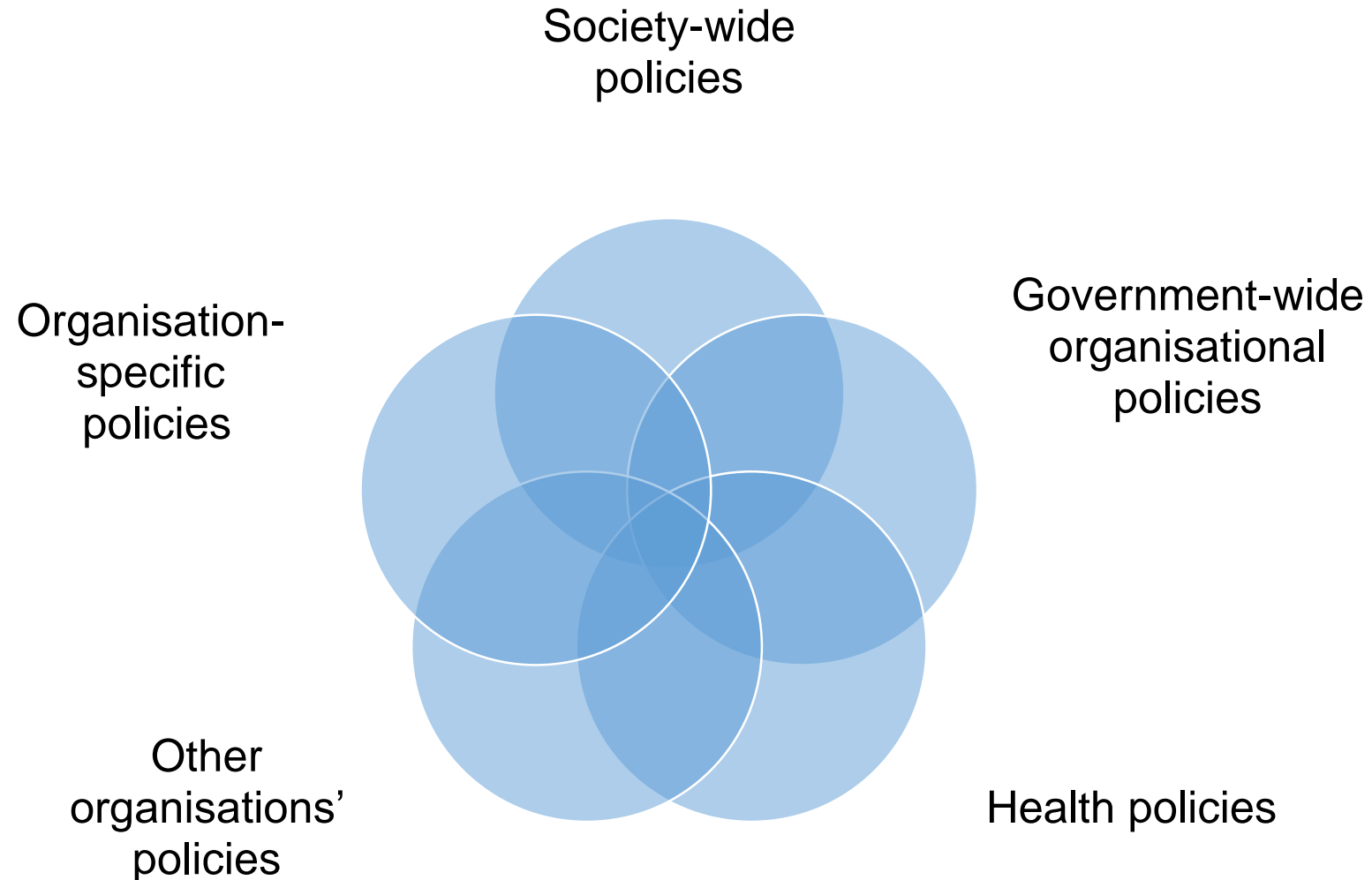
- *the area affected*: public hospitals, community health, public health;
- *the objective or desired outcome*, such as a reduction in hospital waiting lists, reduction in incidence of scabies; increase the utilization of ANC services and assisted delivery
- *the actions that have been, or are to be, taken*, including the legislative, financial and administrative mechanisms involved in the process of implementation.

# Analysis of Health Policy ...

There are various definitions of **what policy is** and many ideas about the analysis of health policy, and its focus:

- an economist may say health policy is about the allocation of scarce resources for health;
- a planner sees it as ways to influence the determinants of health in order to improve public health;
- **For a doctor** it is all about health services (Walt 1994).
- For Walt, health policy is synonymous with **politics** and deals explicitly with **who influences** policy making, **how they** exercise that influence, and **under what conditions**
  - **Politics cannot be divorced from health policy.**

# Multiple layers of 'formal' policies





# **Health policy and Cooperation**

**Why is this course relevant to you?**

# Why is this course relevant to you?

- Health policy and cooperation is a small but growing area within the field of health policy and systems research.
- It aims to give public health researchers and practitioners the insights and tools to better understand what health policy is, how it is developed and implemented, what the factors are that shape it, and how people (actors in the health system) can influence and shape it

*“Prof Uta Lehmann, UWC- South Africa”*

# Why is this course relevant to you?

- If you are interested in improving population health, strengthening the health system, promoting social justice.....
- Achieving those goals requires:
  - understanding of the social, political and organisational factors that act as obstacles to or enablers for the interventions/ activities required and
  - how to take account of them in advocacy, policy development, management/implementation and evaluation of health policies;
- Need an awareness of the broader context of decision-making about health & health systems

# Why is health policy important?

**Health sector is an important part of the economy in many countries:**

- Consuming large amounts of national resources to pay for the many healthcare workforce
- An important driver of the economy, through:
  - innovation and investment in bio-medical technologies
  - production and sales of pharmaceuticals, or
  - ensuring a healthy population which is economically productive.
- **Citizens come into contact with the health sector as patients or clients,** through using hospitals, clinics or pharmacies; or as health **professionals** – nurses, doctors, pharmacists, managers, etc
- Health is accorded a special position compared to the social issues; *the nature of decision making in health often* **involves matters of life and death**

# Why is health policy important? C't

- Health is also affected by many decisions that have nothing to do with health care:
  - Poverty affects people's health, as do pollution, contaminated water or poor sanitation, malnutrition.
- Economic policies, such as taxes on cigarettes or alcohol may also influence people's behaviors (inexpensive fast food, the sale of soft drinks at schools, as well as dwindling opportunities to take exercise.)
- Other policies: road safety, urbanization...
- Understanding the relationship between health policy and SDH is important to be able to tackle major health issues: rising obesity, the HIV/AIDS epidemic, growing drug resistance
- Health policy guides choices about which health technologies to develop and use, how to organize and finance health services, or what drugs will be freely available

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# Observing policy

# Where can we observe policy?

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- Policies are **presented** in:
  - documents, regulations, laws, ministerial statements, guidelines, protocols etc.
- Policies are **constructed** in:
  - what happens in practice
  - and in the expectations, principles, understandings that shape practice

# Policy as intent vs Policy as practice

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- **Policy as intent =**

- the vision, goals, understandings, principles, and plans that seek to e.g. guide activities, establish accountability & responsibility

- **Policy as practice =**

- routine decisions, activities, understandings & actual achievements
- Sometimes what a policy intends to achieve does not happen in practice.
- Can you think of any examples in your own experience – either as a professional or as a citizen in our country?



# Self-study task

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Sometimes what a policy intends to achieve does not happen in practice.

**Can you think of any examples in your own experience – either as a professional or as a citizen in our country where *policy intent* was not necessarily translated into *practice***

# From universal health insurance to universal healthcare? The shifting health policy landscape in Ireland since the economic crisis<sup>☆</sup>



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## ABSTRACT

Ireland experienced one of the most severe economic crises of any OECD country. In 2011, a new government came to power amidst unprecedented health budget cuts.

Despite a retrenchment in the ability of health resources to meet growing need, the government promised a universal, single-tiered health system, with access based solely on medical need. Key to this was introducing universal free GP care by 2015 and Universal Health Insurance from 2016 onwards.

Delays in delivering universal access and a new health minister in 2014 resulted in a shift in language from 'universal health insurance' to 'universal healthcare'. During 2014 and 2015, there was an absence of clarity on what government meant by universal healthcare and divergence in policy measures from their initial intent of universalism.

Despite the rhetoric of universal healthcare, years of austerity resulted in poorer access to essential healthcare and little extension of population coverage. The Irish health system is at a critical juncture in 2015, veering between a potential path to universal healthcare and a system, overwhelmed by years of austerity, which maintains the status quo.

This paper assesses the gap between policy intent and practice and the difficulties in implementing major health system reform especially while emerging from an economic crisis.

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# Conclusion

- Policies often don't achieve what was intended because of *power & processes*
- Policy = politics = power

***Questions?***