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Methodological Guidelines
Enhancing the Political
Feasibility of Health Reform in
Latin America

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Political Feasibility of Health Reform in Latin
America

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OBJECTIVE

This guide is to assist applied researchers design and implement research into the political process of health system reform in Latin America. It describes the general analytical approaches and tools of analysis, the qualitative interview techniques and questions, and the validation activities that were used by the Harvard School of Public Health in applied research in Chile, Colombia, and Mexico.¹ This guide assumes that the researchers have some knowledge of qualitative research but is presented so that non-researchers can understand the methodology. However, it will be necessary to have a skilled analysts/interviewers to carry out a future research project. For comparative purposes, we recommend that researchers read the comparative report and the individual country studies of the Harvard study in order to develop a consistent approach that builds on the previous work using the same framework. These studies are available on these two websites www.hsph.harvard.edu/ihs/publications.html and www.americas.health-sector-reform.org

FRAMEWORKS OF ANALYSIS

All research projects need to be based on theoretically based frameworks of analysis.

This analysis uses a combined set of analytical frameworks that have been relatively well developed by political scientists. It combines a stakeholder analysis based on pluralistic interest group theory, with new institutionalization approaches that emphasize the limitations brought by types of political institutions in general and identifies critical institutional arenas (or "bottlenecks") of the policy process. It also develops an innovative analysis which focuses on the specific role of "change teams" of technocrats who push through the reform.

The institutional context involves describing the regime type (authoritarian or democratic) and the specific roles and functioning of the different political institutions such as the executive and legislative branches which vary considerably even within a regime type.

Stakeholder analysis involves assessing the major participants in political processes of the health sector. These may be individuals, interest groups, or social groups.

We have also identified a major role for "change teams" of technical reformers who work together in a variety of different centers of decision making -- in the ministry of health, the planning ministry, the finance ministry, and the presidency. These reformers usually form horizontal networks of officials at the same institutional level but they also have vertical networks with major policy makers such as the president, minister of planning or minister of finance.

This framework is described in more detail in the "Concept Paper" available on the websites above.

¹ For results of this study see: Alejandra Gonzalez Rossetti and Thomas J. Bossert, (2000). "Enhancing the Political Feasibility of Health Reform: A Comparative Analysis of Chile, Colombia, and Mexico." Data for Decision Making Project and LAC Health Sector Reform Initiative, Boston: Harvard School of Public Health.

SELECTION OF COUNTRIES

It is important to select countries that have had sufficient experience in attempting to adopt and implement health reform. The cases done by Harvard focused on the "Big R" major reform efforts which involved substantial, purposeful and sustained changes. The framework was designed to address these major reforms but it should also serve for studies of "small R" incremental reforms. In either case, it might be useful to select comparative countries with successful and less successful efforts at reform.

SELECTION OF LOCAL RESEARCH TEAM

The local research team should be carefully selected to include social scientists, preferably political scientists with knowledge of the analytical approaches and of the national political system, they should also have a strong knowledge of the health sector issues and the key stakeholders in the health sector. These social scientists should be skilled in semi-structured and open-ended questions.

If possible, it is preferable to develop institutional capacity by selecting the team from one major research institution; however, selection should also account for limited time availability of experienced researchers. In some situations, political considerations may have to affect selection in order to gain access and to have the results used by current authorities.

REFORM INITIATIVE

It is important to define clearly the reform package that is to be analyzed so that the research is focused on an empirically observable reform. In the Harvard studies, the reform package that was analyzed was the promotion of new forms of sector financing involving the creation of private and social insurance schemes. Other initiatives, such as decentralization of health systems have been studied in other studies and it is feasible to study small incremental reforms such as changes in laws on immunization, on collection of fees in public facilities, etc.

The reform initiative should be a recognizable activity that major stakeholders in the system are aware of and participated in. It should have clearly defined objectives that the promoters hoped to achieve specific package of activities expected to achieve those objectives, and indicators that can be used to evaluate whether the reform was actually implemented after its adoption. The software program, *Policy Maker*, can be used by the country team to help define the objectives and the mechanisms in this exercise.²

DEFINITION OF INSTITUTIONAL CONTEXT

Since our approach uses the political institutional context as a major explanatory factor, it is important to have a skilled political scientist review the literature on the country's institutional context. This review should be based on both national and international literature available on the country and may be complemented with interviews of known political

² This software, developed at Harvard, is available on the web at www.polimap.com

observers. It may be supplemented by the observations from the interviews with key stakeholders -- to be discussed below.

This analysis should assess the characteristics of the regime -- ranging from authoritarian to pluralistic democratic -- and define the major roles of major institutions such as the executive and legislative branches, which may differ from one democracy to another. It may also be important to locate different institutional arenas within even an authoritarian regime -- for instance, in the Pinochet military regime in Chile, there were internal institutional arenas that performed executive functions and others which performed legislative functions. This analysis should also describe the general policy process of how a law or regulation is usually formulated, adopted (ratified), and implemented.

IDENTIFICATION OF STAKEHOLDERS

The country research team should perform a "political-mapping" exercise to identify the major stakeholders in the health sector -- assessing their general positions on health reform issues and their general power. Again the *Policy Maker* software is a useful tool for doing this kind of exercise because it allows the team to focus on developing a systematic list and gives guidance in defining the power of different stakeholders.

Stakeholders can be individuals -- such as the minister of health, the president, key members of the "change team", key Senators or representatives, major "opinion leaders" in the media. They can be political parties, organized interest groups such as the medical association and unions. They can also be unorganized social groups such as the broad public, specific beneficiaries, specific voting groups.

At this point it may be useful to combine the assessment of stakeholders with the institutional analysis by identifying the key actors in their major institutional arenas -- such as the actors who are important within the executive branch and those in the legislative branch of government.

INTERVIEWING THE MAJOR PARTICIPANT STAKEHOLDERS

The research team then should interview the major stakeholders who participated in the health reform process. The number will vary from country to country and according to the complexity and importance of the reform. In the Harvard studies around twenty participants were interviewed in each country.

Interviewer cannot follow a strict or even guided questionnaire since it is a rich sense of what occurred that requires participants to describe a complex and evolving process by telling their own "story". Interviewers should however, get the participants to describe their own role in the process -- as part of the "change team" or other supporters or as opponents or neutral actors. If they are part of the reform change team, they should be asked what objectives they had for the reform and why they thought the mechanisms they chose were going to achieve those objectives. This will be important for the "policy tracer" analysis of how well the reform was implemented (see below).

The interviews should ask each participant what their position vis a vis the reform was, what their own perception of their power was and what power and position other actors had. This information should be synthesized to identify consistent views of positions and power and

to identify inconsistencies which require further investigation. It should then be used to revise the initial "political map" of the stakeholders and to develop the specific maps of stakeholders in each institutional arena.

In cases where the reformers have formed a "change team" the researchers should focus on finding out from members of that team, who their members were, how clearly they identified themselves and were identified from outside their group, and what additional horizontal (to other actors at their same institutional level) and vertical networks (to major policy makers) they had. They should also be asked what other strategies they used to develop their reform and to gain support and reduce opposition. In the Harvard studies, we found that a particularly important strategy was how much to isolate the reform team from other political interests and when to open up the process to more participation of other key actors. Other strategies which may be important are how information is shared or withheld, and linking the reform to other reforms.

POLICY TRACER

In order to assess how well the reform has been implemented—since implementation itself is an important part of the policy process and because it may be useful to assess the success or failure of the strategies used by the reformers—it is important to evaluate the reform using available data and studies of other researchers on the effectiveness of the reform. In the Harvard studies, this analysis was primarily based on data and analysis of a few key studies of the reforms that were done by other researchers—usually economists and public health researchers.

DRAFT REPORT

The country team should write up a systematic review of the research with the following general areas:

- the description of the objectives and mechanisms of the reform package
- the overall political institutional context of the country at the time of the reforms
- the key stakeholders and their role in the policy process—the "story" of the health reform process within each of the institutional arenas
- if there is a "change team", a specific analysis of the location and interactions of the members of the change team with its horizontal and vertical networks.
- Analysis of the strategies used by the reformers
- The policy tracer

VALIDATING SEMINAR

We found it particularly useful to have a seminar with the key participants to present at least an oral version of the draft report to see if the country team's "story" of the events and the

stakeholder and institutional analysis was accurate in their eyes. The discussion generally validated the interpretations but also corrected some of the details.

SPECIAL REQUEST

There are very few "case studies" of health reform policy process. It would be extremely useful for the growth of knowledge of the effectiveness of different strategies of promoting health reform if we could know of your own efforts in this activity. We request that you contact us to let us know that you are using this approach and share with us the results of your study so that we can build a respectable body of knowledge on these issues. Please contact us through Thomas Bossert at tbossert@hsph.harvard.edu

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