National Case Studies on Health Policy-making in the Middle East: The Case of the National Social Security Fund Voluntary Health Insurance System in Lebanon

SUMMARY BRIEF

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Background

Public policy making is complex and suffers from limited uptake of research evidence, particularly in the Eastern Mediterranean Region (EMR). In-depth case studies examining the health policymaking process would contribute to strengthening health systems, informing future policymaking and pushing for the use of technical evidence in this process through investigating how particular Knowledge Translation mechanisms and models can best be matched to particular policy-making context.

Objectives

This study describes the results of a retrospective policy analysis exercise in Lebanon, a Low-Middle Income Country (LMIC) in the EMR region. The study aims at generating in-depth insights about how policies are being made, the influences over policymaking, and the use of evidence in this process. Selecting the Lebanese National Social Security Fund (NSSF) voluntary insurance policy as a case study, this policy analysis also explores how and why this policy was developed and how it was implemented, explains its impact and draws lessons learned for informing future public policymaking and providing insights for structuring the decision making process, particularly for large-scale decisions.

Guiding Frameworks:

Two public policy frameworks were used to guide the analysis: the John Kingdon’s streams model and the policy triangle framework. The John Kingdon’s streams model of the public policy process (1984) is one of the most widely applied in the field of public policy analysis. The Kingdon streams model was employed to assess how this particular policy has emerged to the government’s agenda. Kingdon argues that issues emerge on policy agendas when three independent streams – problems, policies, and politics – flow together.
The second guiding framework, the policy triangle framework of Walt & Gilson (1994), allow a comprehensive understanding of the policymaking process through incorporating context, actors, process and content concepts in analyzing policies. This framework investigates the contextual factors-social, economic, political and international- that influenced the policy, the process by which the policy was initiated, formulated, developed, implemented and evaluated, the objectives of the policy and the actors involved in the decision-making.

Methodology

The study examined the policymaking process through a policy tracing technique that covered a period of 12 years using several methods of data collection including:

1- Comprehensive media analysis: articles published between the years 2000-2012 in Arabic and English newspaper and tackling the NSSF voluntary health insurance were analyzed.

2- Comprehensive document review: documents reviewed included legislations, minutes of meetings, official letters, reports and actuarial studies (1963-2012)

3- Key informant interviews: 22 key informant interviews were conducted with policymakers, stakeholders and journalists.

The use of multiple methods of data collection provided in-depth data, increased the reliability and validity of the findings through cross-checking of information across different data sources. Study activities took place from September 2010 to April 2012.

Findings

Findings revealed that the voluntary health insurance policy was purely a political decision taken in a quick manner by the government to tackle an urgent problem related to the restructuring of the Middle East Airlines (MEA) company. Policy implementers and stakeholders were not involved in the policy development. The voluntary insurance scheme faced financial deficit after less than 2 years from its initiation and deprived around 30,000 families from health coverage. The financial deficit has burdened the hospitals and negatively affected the quality of care and the reputation of the NSSF as a trusted public institution. Scientific evidence did not have a role in the policy development and formulation; policymakers started examining evidence after the policy has failed. Although the policy had a good intention that is providing uninsured citizens
with health coverage at an affordable cost, the development and the implementation mechanisms of the voluntary insurance policy were improper and led to its failure.

This case study highlighted the absence of a structured process of decision-making and the subjective nature of policymaking. In many occasions, policy decisions were made based on personal experience, values and opinion of policymakers rather than on evidence. This case study illustrated the case of a law article implemented for objectives that were different from its intended objectives due to contextual factors that had a strong influence on decision-making. These influences on policymaking may have hindered the use of evidence and may have contributed to policy failure.

The study showed the need for policy-relevant research that can guide policy development, formulation and implementation. The lack of research evidence on high priority policy issues was a main barrier to the use of evidence. In addition, findings revealed that the political context has a great influence on policymaking: personal interests of policymakers, sectarianism and favoritism were also reported as barriers to the use of evidence. Resource constraints (both financial and technical) were also a major barrier for making evidence-informed policies. Findings indicated that capacity of public institutions (the parliament, the ministries) to generate and use evidence was limited and that expert assistance in decision-making was needed.

Enhancing political and institutional accountability was reported as a key strategy to strengthen how policies are made. Respondents also called for building a culture for evidence-informed policymaking through training policymakers and building capacities within public policy institutions on the use of evidence in policymaking.

**Conclusion**

Findings from this policy analysis case study highlighted the complex nature of policy-making process, the multiple influences over this process and the absence of a structured process of decision-making which is mostly subjective in nature. Policymakers (and stakeholders) lack mechanisms to prompt them to use research in policymaking. Findings also suggest that policymakers should be made more aware on the important role of evidence in informing public policy-making. Policymakers showed the need for research on high priority issues, experts’ assistance and training to enhance the use of evidence in policy-making. Study findings also
suggest the need to improve the quality of health reporting and to incorporate more robust evidence into journalism. Study findings are critical in light of recent policy discussions in Lebanon and some EMR countries about universal health coverage and social protection policies. Also, findings are likely to matter in light of the changes that are unfolding in some Arab countries and the looming opportunities for policy reforms.