Intersectoral Health Policy in Portugal: Competition, Cooperation and Control

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# Intersectoral Health Policy in Portugal: Competition, Cooperation and Control

Objectives:

– To study the mechanisms by which governments interact to develop public health policies.

– To study the role of the Portuguese National Health Plan (NHP) in Policy-making

# Intersectoral Health Policy in Portugal: Competition, Cooperation and Control

Questions:

1. Does the National Health Plan represent an **intersectoral public health policy**?

2. Was the National Health Plan implemented in a way conducive to the attainment of **health gains**?

3. How did the involved actors differ in regard to the **initiation, formulation and implementation** of the targets set for the **national health plan**?
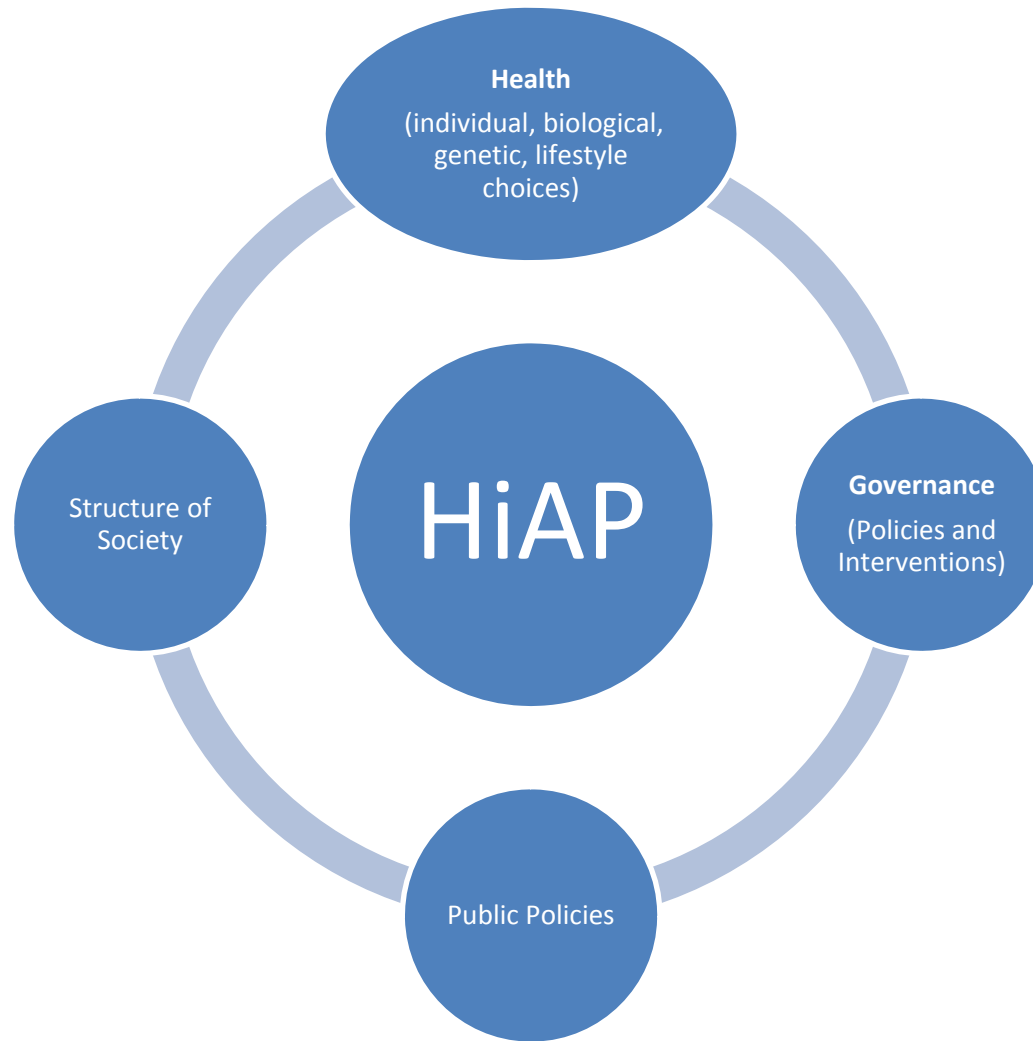
A theoretical framework
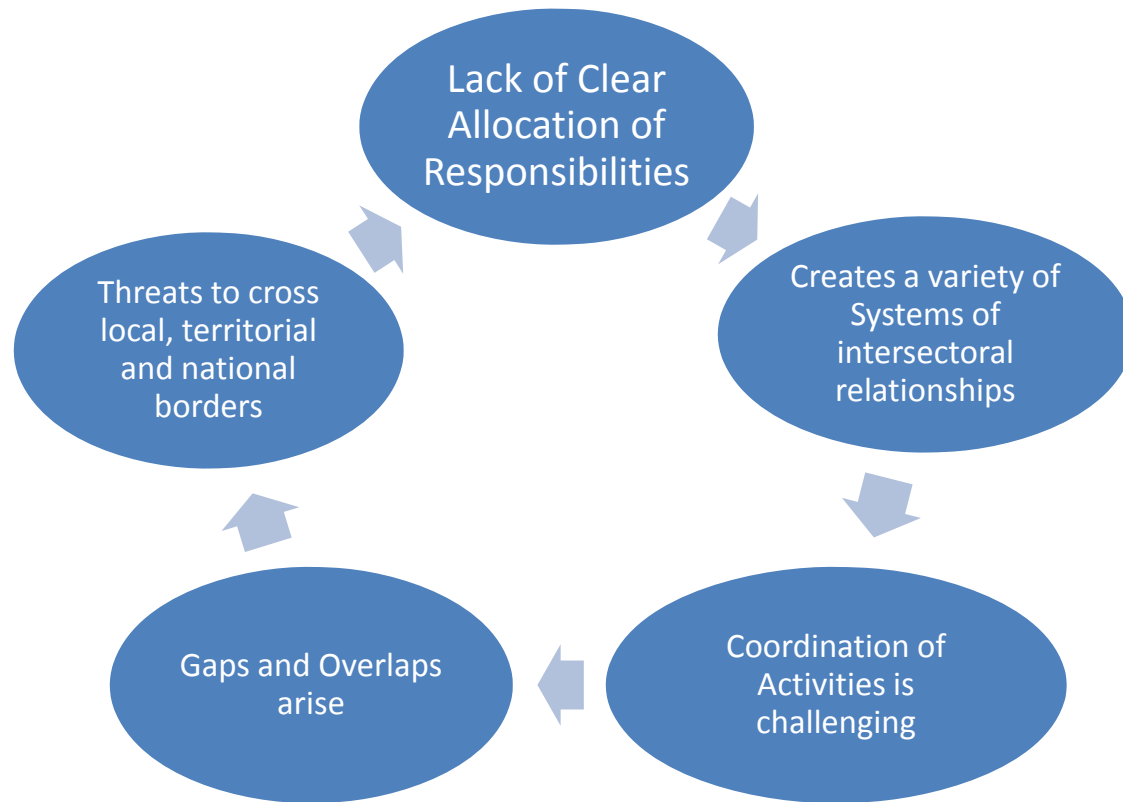# Health in All Policies Approach (HiAP)

A theoretical framework
Health in All Policies Approach (HiAP)

ADDRESS
DETERMINANTS
OF HEALTH
MORE DIRECTLY
THAN
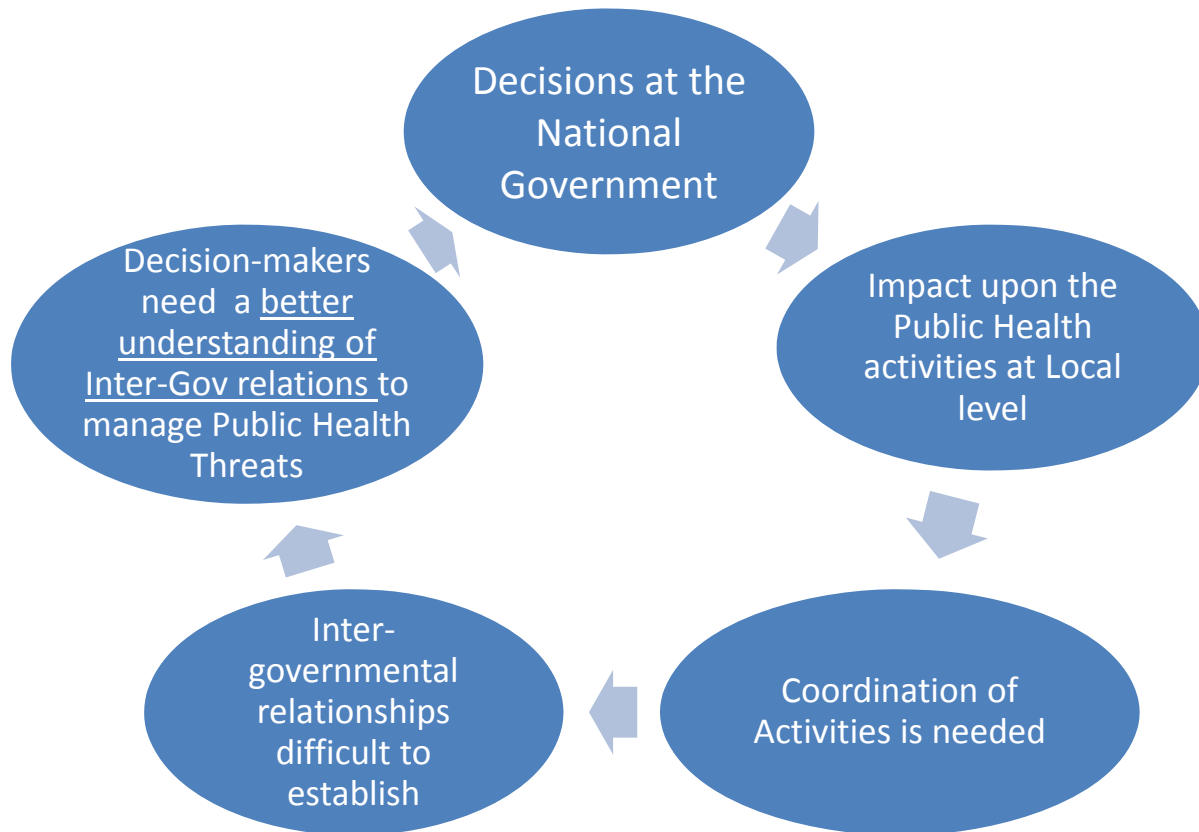HEALTH
OUTCOMES

Actions

Interventions
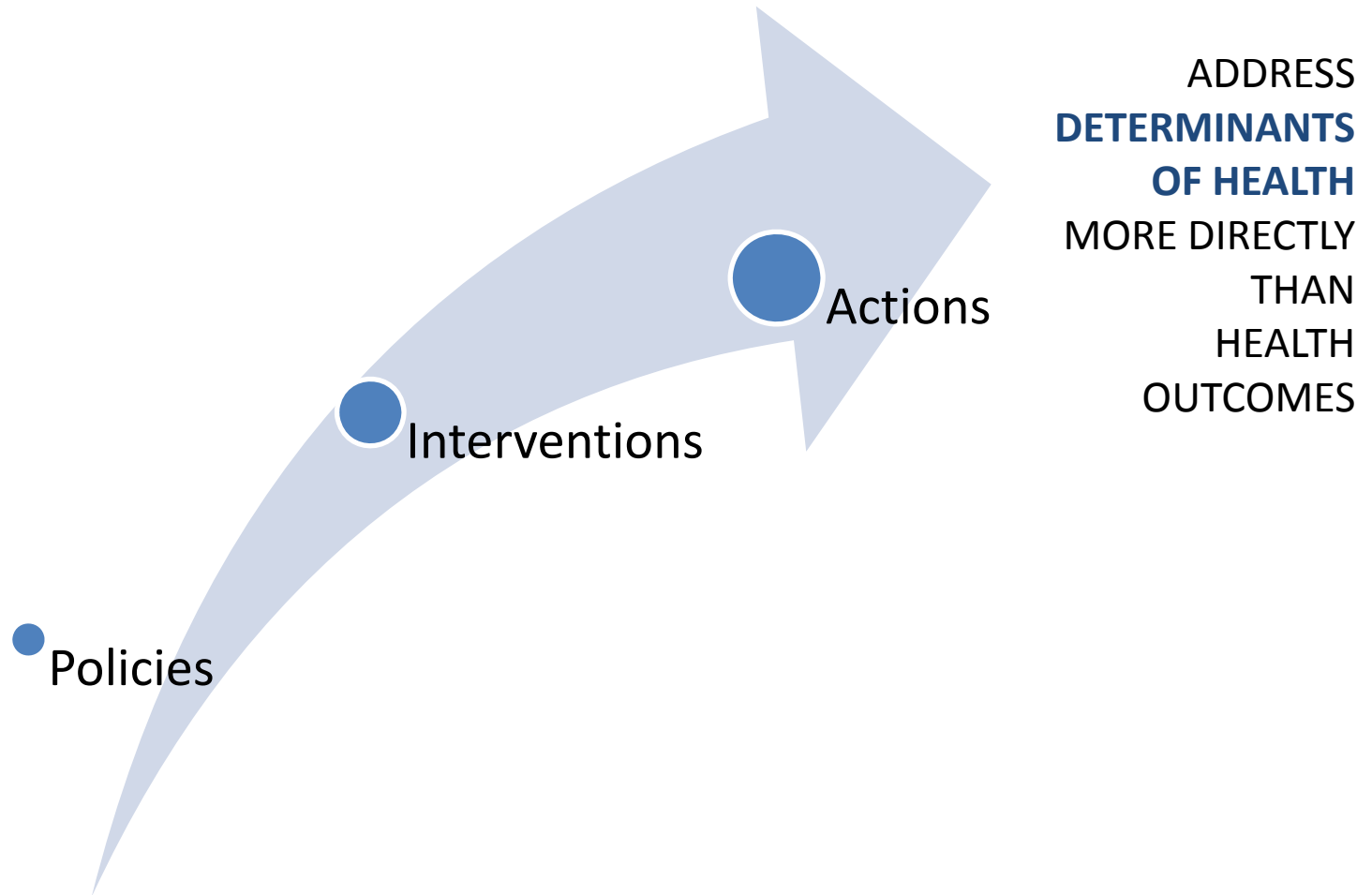
Policies

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Health in All Policies Approach (HiAP)

- Problems of Public Health Governance:

A theoretical framework Health in All Policies Approach (HiAP)

- Decisions of Public Health Governance:

Decisions at the National Government

Impact upon the Public Health activities at Local level

Coordination of Activities is needed

Inter-governmental relationships difficult to establish

Decision-makers need a better understanding of Inter-Gov relations to manage Public Health Threats

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Challenges for inter-sectoral relations:

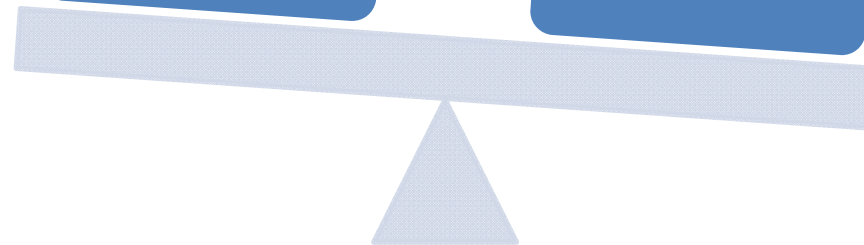Inter-sectoral relations are hampered by:

Cultural

Different values, accountabilities and performance criteria

Organizational

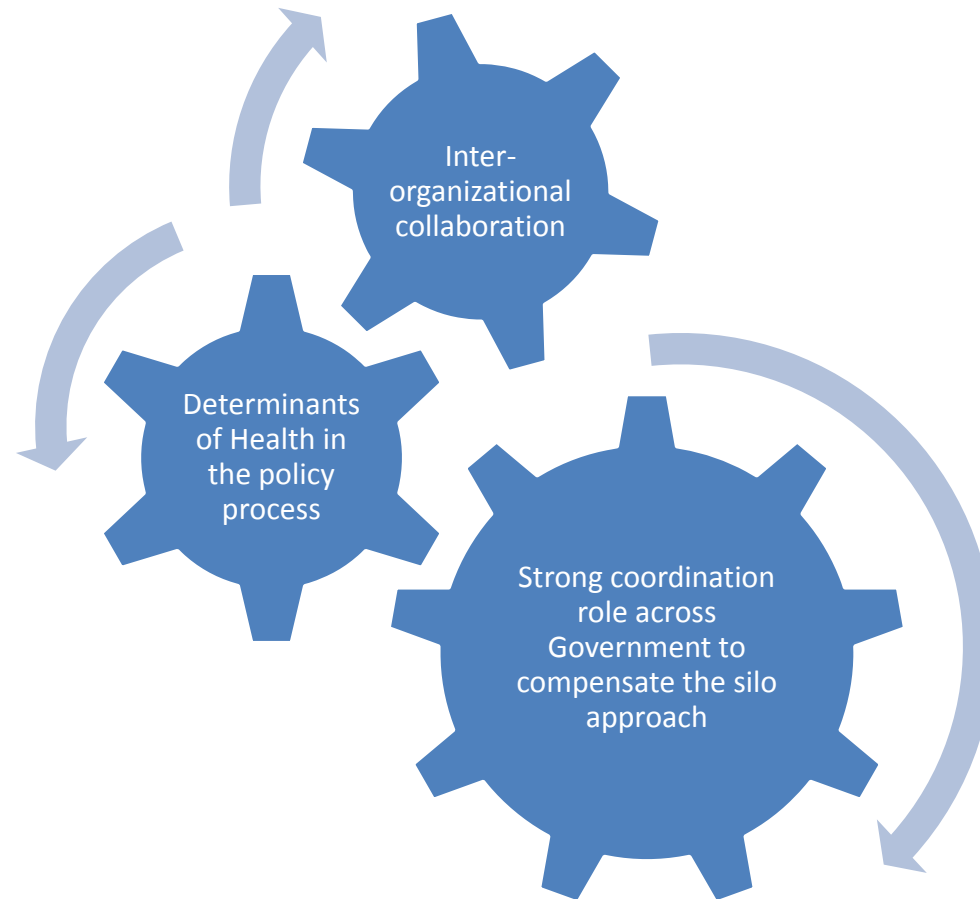Actions across different organizations and sectors

Financial issues

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Public Health Challenges to ensure HiAP is effectively mamanged:

A theoretical framework: Intergovernmental Relations

National – Regional Government relationships in Public Health:

Disentangled

Unilateral

Collaborative

Case Study:
The Portuguese Health Plan (PHP)

- The plan (2004-2011) provides a relatively comprehensive organizing framework for health system activities.

- The Plan prioritizes health gains, such as prevention, health promotion, involvement of the whole of government in attaining health gains, and primary health care.

- The Plan as a framework for setting priorities, organizing activities and introducing change.

PHP as a Public Policy Process

- 1) Agenda Setting:

Politicians' view	•To create an organizational framework for health activities to reach health gains •Supportive of the Plan and committed to a future Plan.
Public Health experts' view	•The Plan focuses on the population's health gains •The Plan does not draw in-depth attention to the distribution of health across the Portuguese population •The Plan does not specify how to reduce inequalities
Inter-governmental relations	•There are some relations between the Government and the regional health authorities but there are no formal accountability agreements in national-regional relations. •There are relations between regional-local level but it is not systematic or consistent across regions.

PHP as a Public Policy Process

- 2) Policy Initiation and Formulation:

  > The NHP was discussed publicly in 2003 and represents a broad consensus.

  - It was supported by most Parties in Parliament

  > The NHP as a tool of management with its strategic guidelines designed to sustain the NHS politically, technically, financially.

  - It is committed to the fulfillment of the goals set in the Plan

Portuguese Health Plan as a Public Policy Process

- 3) Policy Implementation:

Problem of Fragmentation	• Implementation has suffered from the fragmentation of the health system management functions.
Problem of Information	• Lack of knowledge about the consequences of different actions, system strategies and available information and evidence.
Problem of capacity	• The ability to accomplish intended actions) that usually leads to underperformance.

Portuguese Health Plan as a Public Policy Process

- 3) Policy Implementation:

Lack of Alignment	• The implementation of the Plan suffered from a lack of alignment between strategy, decision-making and implementation;
Lack of accountability	• The Plan has failed to clearly define institutional responsibilities for managing change; • The Plan has failed to define formal mechanisms to link strategy and decision-making in the Ministry of Health, across government and for the Regions;
Problem of Bureaucracy	• Bad bureaucracies are not only inefficient but also harder to control incompetence; • Bad bureaucracies diminishes their incentives to implement the policies politicians describe in legislation;

Conclusions

- 1) The Portuguese development correlated with the international progress and promotion of **inter-sectoral health policy**;

- 2) The **Portuguese political - administrative culture and traditions** are not favorable to fostering inter-sectoral collaboration;

- 3) At the central level, there seems to be a tendency to work in a **fragmented way**, which in itself is not conducive to inter-sectoral action in health

- 4) The policy did not manage to open the way to involve actors in **other policy sectors** and was not clear about their **responsibility** in relation to the PHP policy.

Conclusions

- 5) There is **low political weight** in the overall **coordination of politics**. There are no effective incentives to support the inter-sectoral and health impact assessment development in a more bottom-up manner

- 6) To date **civil society** linkages to ensure the effectiveness of policy implementation and accountability seem **not to be in place**.

Conclusions

Consequently, it may be assumed that actors from either **high or low politics** areas are **not** yet fully **involved** in the realization of the **public health policy** in order to achieve its aim.

Thanks for your attention.

Elvira Méndez & Maria Asensio