



The political economy of health - Update

Executive board meeting September 2018



Team

AUB: Fouad Fouad, Marilynne Menassa

Cambridge: Simon Deakin, Larry King, Nicola Buckley, Adam Coutts, Adel Daoud

Imperial: Kalipso Chalkidou, Sharif Ismail, Miqdad Asaria

Post docs: AUB and Cambridge to be hired

Imperial: Adrian Gheorghe – senior health economist

What is the political economy of health in conflict?

A working definition...

“The influence of public policy, political decisions, individuals and networks in shaping the social and economic determinants of health and how these operate in conflict, humanitarian and development contexts”.

- **We don't know how health and social protection systems actually operate, who makes the decisions, how they are financed, where the money goes and what are the networks of governance.**

Background, context and development

- Limited understanding of the public policy process and the political determinants of health (PDHs) and health care services in the region.
- Academic and policy obsession with sectarianism, security, corruption and the cuisine!
- **We don't see more health surveys of refugees and host communities!**
- Lack of reliable quantitative data on political economy of health/PDH, social welfare and public opinion on these issues.
- **RESULT:** policy misconceptions + affects ability to properly understand country contexts and deliver effective responses to the crises (refugees, conflicts), design future donor driven development initiatives.

Aims

- Help policy makers working in these contexts to understand the links and impacts between public policy and humanitarian sectors – e.g., ministries of health, social affairs and Treasuries for example.
- Develop research capacities in terms of setting up political economy of health undergrad/graduate courses – theoretical and methodological
- Provide evidence-base, data and guidance for donors+ national policy makers to support formation of sustainable national health and research systems in partner countries.
- Promote better understanding of translating context-specific evidence of what works into actionable policies + how current knowledge is finding its way into policy and practice extremely slowly or not at all.
- Generate the first political economy of health public opinion / social attitudes dataset for the region – Lebanon, Jordan, Turkey, Palestine.

Progress and achievements

- Audit of Lebanese health system underway – stakeholder interviews with decision makers – GoL, UN, INGOs, academics.
- AUB IRB in progress.
- Mapping and gap analysis of political economy of health academic courses in the UK, US, Europe and MENA – Imperial (Miqdad, Adam), AUB (Fouad, Marilyne, Post doc)
- Established MENA health policy fellows programme with the Centre for Science and Policy (CSAP) Cambridge and KCL: **running October 2018.**
- **Seminar series 2018 – 2019 in Cambridge: Challenges of experimental government and public policy** – high profile speakers – UN DGs, UK gov, World Bank, famous academics!
- **Attacking health workshop (March 2017): The end of International Humanitarian Law?** – Dr David Nott, Sir Stephen O'Brien, Toby Cadman, Saleyha Ahasan, Hamish de Bretton Gordon.

Academic

Publications

- Defence and Peace Economics - Guns and butter? Military expenditure and health spending on the eve of the Arab Spring – Coutts et al
- Women's health and well-being in low-income formal and informal neighbourhoods on the eve of the armed conflict in Aleppo- Int J Public Health. 2018
- Health workers and the weaponisation of health care in Syria. The Lancet 2017
- What are the best societal investments for improving people's health?. BMJ 2018

Presentations

Political economy of health in conflict – International Health Economics conference special session, Boston 2017.

MENA health policy fellows – October 2018

- [Dr Asem Mansour](#), Director, Cancer Centre Jordan
- [Nour Kik](#), Policy and Advocacy Coordinator, Ministry of Public Health, Lebanon
- [Dr Ibrahim Bou-Orm](#), Consultant, Ministry of Public Health, Lebanon and PhD student, Queen Margaret University Edinburgh
- [Dr Meltem Sengelen](#), Lecturer, Dept of Public Health, Hacettepe University, Turkey
- [Dr Samah Jabr](#), Head of Mental Health, Ministry of Health, Palestinian National Authority
- [Hilda Harb](#), Head of Dept of Statistics, Ministry of Public Health, Lebanon
- [Dr Mohammed Rasoul Tarawneh](#), Secretary General, High Health Council, Jordan
- [Rana Nashashibi](#), Director, Palestine Counselling Centre

What did not work?

- Middle East Airlines departure times and inflight service quality!
- Difficulties in hiring post docs – lack of suitable candidates – now re advertised.
- Communication between different RCUK components – would be good to know what each is doing or planning on a more regular basis (MONTHLY) to avoid replication/duplication and contacting same stakeholders. **NEED MORE TRANSPARENCY HERE**
- Integrate other partners and better communication between regional partners. Set up monthly conference calls with Turkey, Lebanon, Jordan and Palestine?
- Speed up local IRB process?

Year 2 objectives

- Set up + implement health and social welfare public opinion / attitude national surveys - pilot in Lebanon.
- 1) National aggregate level survey - willingness to pay, health expenditures (last HE survey in Lebanon was 20 years ago)
- 2) Micro level – discrete choice / thought experiments on attitudes to health services, financing and delivery – **Do people actually want UHC?**
- Collaboration with Nisreen Salti (AUB health economist)
- Set up policy stakeholder workshops in partner countries involving gov representations, UN, INGOs, academics.
- Set up and implement pilot study with MSF/MDM- **The Use of Wearables, the Internet of Things (IoT), and Digitized Patient Health Records to Treat Those Affected by Iatrogenic Disease and Death** - Can utilization of biometrics and the Internet of Things bring about a paradigm shift in patient care amongst those affected by crises?
- Set up RCUK post doc workshop / mini conference in Cambridge / London.
- Set up in country 1 to 2 months visiting fellowships for post docs with partners to spend a term at AUB, Jordan, Palestine or Hacettepe – will improve post doc experience, research networks and their career development.

Overview of longer-term deliverables

- Roll out public opinion and attitude survey to partner countries - end of year 2 if possible.
- Establish MENA health policy fellows programme to run in years 3 and 4 – funding needed.
- Replicate CSAP methodology to design and implement **UK-MENA policy fellows programme** – UK based policy/decisions makers (DfID et al) attend one week in MENA partner country host to engage with local policy makers and academics.
- Organise regular RCUK post doc workshop and meetings with all partners.
- Ensure post doc visiting fellowship programme continues.

Risks

- Political and security barriers to setting up research in partner countries.
- Armed conflict in partner countries.
- Staff attrition, brain drain...
- Travel and Visa Restrictions
- Lack of success in further funding applications to scale up RCUK work.