

## Chapter 7

# Health Policy Implementation and Its Barriers: The Case Study of US Health System

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### ABSTRACT

*The chapter describes policy implementation components of a health system in United States of America and explains how they affect health outcomes (service delivery). It argues that implemented policies affect various components of a health system in terms of service delivery, workforce, information, financing, medical products, technologies, leadership and governance. Using health system as framework of analysis, the paper explains that the outcome of health policy implementation determines the availability, quality and equitability of program service delivery. The chapter goes on to argue that policy implementation barriers, such as demand-and supply-side barriers, market, insufficient resources, cultural barriers, imperfect communication, information, education, coordination, leadership and governance affect the poor and vulnerable groups in developed and developing countries from benefitting from public spending on public health policies and programs.*

### BACKGROUND

An important factor in socio-economic development of any nation is the extent to which that country is involved in healthcare delivery system. Good health is a vital factor of quality of life as well as a pre-requisite for achieving socially and economically productive lives of a nation. No government can function effectively without an appropriate health care system. Health care system is one of the basic institutions that is universal in nature and without which a society cannot survive. The World Health Organization Report, (2000) defines health system as comprising all the organizations, institutions and resources that are devoted to producing health actions. Health action in this context entails any effort, whether in personal healthcare, public health services or through inter-sectional initiatives, whose primary purpose is to improve health. Healthcare institutions consist of formal and informal organizations

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where preventive, social and clinical services are rendered to the members of the society. Each of the institutions has specific aims and objectives even though they all exist to promote health, to prevent the occurrence of diseases, to bring about a peaceful end for those suffering from terminal disease, and to treat human illness. Most healthcare institutions form an arm of the government. Their social structure, therefore, follows the same pattern as other government institutions. Healthcare institutions form a large social system, and within this system are other large sub-systems. The systems vary from one country to another and even slightly within the same country.

The purpose of this paper, therefore, is to examine policy implementation by institutions of health care service delivery and barriers to effective outcomes. Specifically, the paper attempts to investigate how health policies support program activities of health institutions, such as; elimination of healthcare inequities; access to healthcare facilities, products and services; availability of finance infrastructures and other resources; provision of information and education to individuals and communities to medical products, facilities and services.

Consequent upon this, the paper is structured into five parts. Part one examines the introduction, purpose, clarification of concepts and underpinning theories of health policy implementation. Part two examines the inputs required in healthcare systems, such as; finance, structures and power relationships, equipment, personal and clients. Part three discusses the processes or series of activities that transform resources (inputs) into a desired product, service or output. Part four examines the outputs – direct result of the interaction between inputs and processes in the system, the types and quantities of goods and services produced by an activity, program or project.

Finally, part five identifies the barriers to effective health policy implementation and its implications.

## **CONCEPTUAL CLARIFICATIONS**

### **Health System**

Health system comprises all organizations, institutions and resources that are devoted to producing health actions. Health actions in this context refers to any efforts, whether in personal healthcare, public health services or through inter-sectional initiatives whose primary purpose is to improve health. It is an open system with three components of input, processes and outputs. Inputs required in a healthcare system include: finance, physical structure, equipment personnel and clients. The process refers to a series of activities that transform inputs (resources) into a desired product, service or output. The term output is used to describe the direct result of the interaction of inputs and processes in the system, the types of and quantities of goods and services produced by any activity, program or project. On the other hand, the term outcome refers to the result of the outputs, the effects or impacts. All these depend on how efficiently the system within the operating environment is administered and how the resources are managed.

### **Health Policy**

According to WHO, it is the approach to medicine that is concerned with the health of the community as a whole. Health policy, in other words, 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:

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