

## Commercial determinants of health: 'Moving from the bottom to the top of the cliff'

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#### Overview...

- The commercial outlook today
  - (in business and in health)
- Influencing the policy agenda when a 'policy window' opens?
  - If policy influence is the goal
- How might we think differently about health funding?
  - If we want to improve equity in an increasingly commercial health delivery environment (noting health markets are inequitable)

#### 1. Commercial outlook



# Commercial environment today... Business

- We live in a market economy where business is crucial
- A business evolution is in process
- Sustainability and ethics questions are driving this
- The leaders are primarily focused on people and planet
  - Profit remains important but purpose is fundamental
- How long until businesses in various consumption areas start to directly tackle determinants of health?
  - There are many yet the corporates and multinationals are key



# Commercial environment today... Health

- Expanding use of private services
- Growth in private hospitals
- Move of specialists to the private sector
- Increase in those holding/providing private insurance (incl Iwi)
- ASMS members seeking private cover
- Growing unmet need
- Does the commercial model undermine equity and access goals?



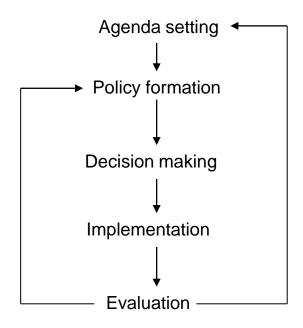
# Commercial environment today... Health

- Are we satisfied with the situation?
- Would we like to pursue change?
- How do we influence policy?
- Policy is complicated
- Need to be ready for action when opportunity arises

### 2. Influencing the policy agenda



#### 'Stages' model of the policy process





## Agenda setting

 Process by which certain issues make it onto policy agenda from much larger number of issues worthy of political attention

## Agenda setting (2)



- Kingdon model (1984): Three policy streams:
  - Problems: are there perceived problems that require attention?
  - Policy (solution): ideas and policy work exist, to be picked up and placed on the agenda
  - Politics (political will): driven by changes in govt, national mood, interest group campaigns, etc.



## Agenda setting (3)

- Kingdon...
  - revolving around the three policy streams are 'visible' and 'hidden' participants
  - Visible: politicians, organised interests
  - Hidden: researchers, academics in policy stream
- Policy entrepreneurs, media, interests, a serious failure, change of govt, new piece of research, new technology, etc will help open a policy window

#### **Problems**

(e.g. epidemic, natural disaster, economic crash)

#### **Policies**

(New technologies able to solve old problems, practical policies proven to work on the ground)

#### Policy Entrepreneurs

### Policy Window

(Issue on agenda, knowledge becomes important)

#### **Politics**

(e.g. change in government, creation/break up of supra-national government)



#### What's needed when the window opens?

- Research evidence into policy; having the evidence packaged correctly
- Practical solutions workable models of delivery that can be swiftly articulated into policy
  - An implementation plan
- A sustained coalition of the willing, ready to step in with assistance

3. Thinking differently about funding...



#### We have...

- Always had tax-based funding for health along with other funding streams
- There are other methods
- None is perfect; each has complexities and flaws
- If <u>universal access and equity</u> are key goals then only one method achieves this...

### ...Social insurance



#### Social insurance

- Similar to ACC
- In Germany and other EU countries; also Japan, South Korea, Taiwan
- Is focused on the same level of coverage and accessibility to services regardless of socio-economic status
- Often seen as a means of building solidarity within the community and delivers on equity
- ACC could run this
- Would make access provider-agnostic
  - Public and private sectors still exist but private no longer just for better off and insured



### Kā mihi!

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