

# Politics identification, development, and implementation process in

[Economics](#), [Budget](#)



Politics is mainly defined by Lasswell, as classically as who gets what, when and how, Lasswell define that who affects the origins, formulation, and implantation of public policy in the health sector, Politics in many dictates, for example who all the people entitled to services, and who will provide services with what are the priority areas, who all of them will be subsidized, and how the allocation of budget would be done and the budget ought to be allocated and spent. The implementation of reforms is basically associated with new administration and the political crises, while reforms can also affect the stability of political administrations, In spite of its acknowledged importance, there is also broad agreement that politics and political issues are rarely analysed and frequently ignored at all stages of the policy identification, development, and implementation process in the health sector, particularly in the interactions between international donor agencies, recipient developing country governments, and their domestic political context. There is ample documentation that politics frequently trumps evidence as a driver of policy priorities and reforms and there are calls for both prospective and retrospective analyses of the politics of public health policy to improve the probability of policy implementation and impact and to understand more fully the political environments in which reforms operate. The political will or technocratic model assumes that decisions by political leaders or a reform champion are necessary and sufficient for policy change and that these leaders are rational actors maximizing the public interest (Alesina, 1992). Reform can occur from outside the political system, it is a policy-making model that is frequently referenced in the public health literature as the mechanism via which to effect change in the sector. The political factions

or partisan or pluralist model assumes that politicians seek to serve the desires of different groups, including interest groups, bureaucratic agencies, and political parties. It encompasses the interest group approach to policy-making, with its emphasis on the political competition of groups and ideas (Kingdon, 1984), as well as the bureaucratic politics approach, with its emphasis on how government organizations and employees seek to protect and promote their own narrow sectarian interests.

Reform occurs when incentives and benefits to preferred constituencies are sufficiently large. The political importance of health care is apparent today in the spate of clinics sponsored by movements and parties. Some political groups use health services merely as a form of patronage, but in most instances the motive is to mobilize popular support by using health as an issue of popular empowerment. In India, the persistent gap between promised proper policies such as the National Rural Health Mission (an initiative to deliver primary care to the poor intended to increase the national health budget by 1% of GDP) and budget allocation and execution is attributed in part to the practices of the Indian civil service, where frequent rotation among ministries is common, driven by political party affiliation, and expertise in a particular area, such as health, is infrequent, leading to poor follow-up and little ownership. If governments make policies that are strongly disliked by the public or particular groups, they know that these may well be resisted with the result that their policies may not be implemented. In most countries, there are a growing number of groups outside government, referred to as interest or pressure groups, which want to influence government thinking on policy or the provision of services in a direction

favourable to their point of view, social group, or material position. They use a range of tactics to get their voices heard, including building relationships with those in power, mobilizing the media, setting up formal discussions, or providing the political opposition with criticisms of government policy. Although the existence of interest groups indicates that political power is not the monopoly of any one group, it is clear that some interest groups are far more influential than others.

In the health field, the medical profession is still the most significant interest group outside government in most countries