Reviewer’s report

Title: Identifying values in the health policy decision-making processes about health-system financing in Latin America: A critical interpretive synthesis

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Reviewer: Mary A Clark

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As I understand it, the goal of the research is to "...explain how factors may influence the way in which policymakers in Latin America use values to make decisions [in health policy]" p. 8 The authors are to be commended for an incredible amount of detailed review work and the production of a thorough set of variables influencing the policy process (Table 3). The delineation of the technical considerations in healthcare policymaking is especially useful for non-specialists. However, there are three sets of problems that require the project to be rethought:

1. The definition of "value." The definition offered on page 6 is too broad to be useful as an explanation for policy outcomes. The authors defend their choice with a single citation, a 1990 publication in a psychology journal, which might have been an indication that political scientists working in this area aren't using the term to explain the outcomes of interest. Some of the things said to be values are (e.g. efficiency, equality) but others aren't (goals, political institutions). Political scientists often use the terms ideas, normative ideas, and norms for many of the concepts the authors call values. There is an entire literature on the role of ideas in policymaking, including in health. There is also quite a bit written on the adoption of international norms (the right to health and universal health could be considered in this light). These literatures are commonly used in Latin America as well as by English-language writers.

2. The authors assert at various points that values drive the policy process or that policymakers make policy choices based on the values that underlie them. Certainly we all agree that organized thoughts about cause and effect and about the goals of healthcare influence policymakers, but these are not all values (see above) and these ideas (some of which are values) are hardly the only thing that influence decision makers in health or any other field. There is coercion, structural power, the influence of interest groups, bureaucratic politics, and psychological phenomena (e.g. group think).

3. Methodology (literature search parameters) I looked at the search terms used (Annex 1) and see that ideas, norms, and rights are not among them. They should be. There are not many political scientists among the authors listed in Annex 3. Either the databases or search terms or both must be causing this. For example, except for JHPPL, missing are the journals English-speaking political scientists writing about health care policy in Latin America would publish in: LAPS, Comparative Politics, World Politics, Comparative Political Studies, SCID, etc.... Several Latin American countries, esp. Chile, have political science journals that are suspiciously absent here. It is not clear to me why research below the "meso-level" was excluded.
if the point was to understand values or ideas in policymaking. For example, I appreciate that one of my articles was included in the study and selected for in-depth review. But it is short and conceptual only. I have published several articles explaining health policy outcomes in various countries. That is where you would look to see if ideas or values of policymakers were important, but those weren't included.

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