



Analysis and evolution of health policies in Iran through policy triangle framework during the last thirty years: a systematic review of the historical period from 1994 to 2021

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Keywords

Health policy • Policy analysis • Health policy triangle • Iran • Time frame lasting 20 years • systematic review

Summary

Background. *Health policy analysis as a multi-disciplinary approach to public policy illustrates the need for interventions that highlight and address important policy issues, improve the policy formulation and implementation process and lead to better health outcomes. Various theories and frameworks have been contributed as the foundation for the analysis of policy in various studies. This study aimed to analyze health policies during the historical period of the almost last 30 years in Iran using policy triangle framework.*

Method. *To conduct the systematic review international databases (PubMed / Medline, Scopus, Web of Sciences, CINAHL, PsycINFO, Embase, the Cochran Library) and Iranian databases from January 1994 to January 2021 using relevant keywords. A thematic qualitative analysis approach was used for the synthesis and analysis of data. The Critical Appraisal Skills Programme for Qualitative Studies Checklist (CASP) was conducted.*

Results. *Out of 731 articles, 25 articles were selected and analyzed. Studies used health policy triangle framework to analyze policies in the Iranian health sector has been published since 2014. All the included studies were retrospective. The main focus of most of studies for the analysis was on the context and process of policies as the elements of the policy triangle.*

Conclusion. *The main focus of health policy analysis studies in Iran over the last thirty years was on the context and process of policies. Although range of actors within and outside the Iran government influence health policies but in many policy processes the power and the role of all actors or players involved in the policy are not recognized carefully. Also, Iran's health sector suffers from lack of a proper framework for evaluating various implemented policies.*

Introduction

Health policies and their potential outcomes are of critical importance since they can affect every individual citizen [1]. Health policy analysis provides valuable evidence for how a policy is put on the agenda, how it is formulated, and how it is implemented and evaluated [2]. Meanwhile, it can provide us with a sound understanding of health sector decisions, programs, and activities. With this respect, knowledge of the strengths and weaknesses of health policies can be obtained through a policy analysis whose results might greatly help policymakers make appropriate decisions. Policy analysis is also a powerful process showing that any policy is subject to controversy over implementation [3]. In this regard, there are a number of factors that influence the health policy formulation and implementation [4].

Researchers and other stakeholders in health sector can analyze a policy using quantitative and qualitative approaches [1]. Policy analysis will help identify potential ways to achieve the best policy. Also, it encourages health professionals and stakeholders to conduct more in-depth researches. In addition, policy analysis can be used to assess the potential role of stakeholders on a policy and understand the interaction among them [5]. This will subsequently help us to decide whether implement a particular policy or not. Given the problems and new challenges in health sector such as new diseases like Covid-19, it is necessary to pursue effective policies to use various resources properly [6, 7]. This should be taken into account in developing countries due to a lack of sufficient financial resources, political opposition to any changes in government, and increasing demand for health services [8].

Developed countries make extensive use of policy analysis to advance their programs in the health sector and the results were satisfactorily in many cases [1]. Through conducting such analyses, they have been able to identify weaknesses of their health policies in order to make a more effective plan [9]. Along the same line, developing countries have also made efforts in recent years to use policy analysis to improve their programs [10]. Although health policies in developing countries are very different from those in developed ones, using the experiences of developed countries might be useful for policymakers in developing countries [11]. Given the complexities of the health system, policymakers and planners should find ways to facilitate the relationships that govern between policy selection and implementation [12]. The use of approaches, models, concepts and patterns of analysis can be very helpful in understanding a policy [13]. Also, it provides a good platform for evaluating evidence and a practical way to understand, explain and plan activities designed to improve health programs. Meanwhile, adopting a framework can make policy analysis easier and more practical [1, 14].

HEALTH POLICY TRIANGLE

One of the most widely used frameworks in health that has been used in different countries is the Health Policy Triangle. In 1994, the framework was designed and introduced by two leading researchers (Walt and Gilson) [15]. This framework has four elements (context, content, actors, and process) related to policy making. In many countries with various health system structures, the framework has been used retrospectively and futuristically to analyze health issues [16-19]. The four elements related to the framework have been defined as follows in Table I.

This framework provides a simple platform for understanding a complex set of relationships and processes in the form of four elements.

Like many developing countries, Iran's health sector has made extensive efforts to implement various activities to promote community health. Meanwhile, policy analysis in Iran has been used for several years and decision makers, researchers, and some stakeholders have been trying to use appropriate analysis to challenge health system programs in order to implement more convenient and cost-effective health programs [20]. In recent years, Iranian researchers have also used the policy triangle framework to analyze health sector policies. In this review study, we investigate health-related issues

in Iran that have been analyzed using Health policy triangle [21]. By reviewing the most relevant papers, we throw new light on the application of different elements of the framework [22]. Meanwhile, results might reveal strengths and weaknesses of using the framework.

AIM

This study aimed to investigate the framework of the health policy triangle in studies published in Iran that have examined health policies. The findings of this study could also make decision-makers more aware of the scientific evidence in the field and encourage them to minimize barriers to implementing health-related programs through past and future analysis. Given the importance of achieving universal health coverage (UHC) across all countries, policy-making aligned with its objectives can prove to be immensely valuable.

Method

In this study, we followed Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines [23].

LITERATURE SEARCH

Two authors of this study (MB, MKG) independently searched international databases (PubMed / Medline, Scopus, Web of Sciences, CINAHL, PsycINFO, Embase, The Cochran Library) and Iranian databases (MagIran, Elmnet, Scientific Information Database (SID)) from January 1994 to January 2021. Search strategy using related keywords was used in the following databases.

“Policy analysis” OR “policy process” OR “health politics” OR “health policy” OR “policy” OR “public policy” OR “agenda setting” OR “document analysis” OR “health advocacy” OR “analysis” OR “stakeholder analysis” AND “health policy triangle framework” OR “health policy triangle model” OR “health policy triangle theory” OR “Walt AND Gilson framework” OR “Walt AND Gilson model” OR “Walt AND Gilson theory” OR “policy triangle framework” OR “policy triangle model” OR “policy triangle theory” OR “framework” OR “theory” OR “model” OR “health policy analysis” OR “policy framework” OR “concept” AND “Iran”.

Also, we searched the list of references of the retrieved papers to find potentially related articles. Google

Tab. I. The four elements related to the framework.

Item	Definition
Context	Context refers to social, systemic, economic, political, cultural, and other environmental factors. These issues are being addressed nationally and internationally, which may affect health policies
Content	Content addresses issues such as policy objectives, policy-related action plans, regulations, rules and guidelines
Actors	Actors refer to influential national and international individuals, groups, and organizations
Process	Process refers to the ways in which policy is initiated, formulated, negotiated, communicated, implemented, and evaluated

Scholar and Directory of Open Access Journals (DOAJ) were also searched to ensure a comprehensive search of all possible sources. Meanwhile, we contacted experts in the field to identify additional research and grey literature. Any disagreement between the two authors was resolved through discussion and referring to a third person (SJE) as the judge.

INCLUSION AND EXCLUSION CRITERIA

Inclusion criteria

The inclusion criteria in this study are as follows:

- articles that used the triangle framework to analyze health policies in the Iranian health sector;
- articles published in Persian and English language;
- articles published in peer-reviewed journals;
- articles whose full texts were available;
- articles whose methodologies were valid and well-described;
- studies published between January, 1994 and January, 2021.

Exclusion criteria

We excluded studies according to the following criteria:

- articles that did not fully utilize the four elements of the framework of the Health policy triangle;
- abstract of articles in congresses and seminars.

DATA EXTRACTION

After selecting the studies, two authors independently extracted the data, including first author name, year of publication, the language of the article, study population, data analysis, subject of analysis, place of study, methods of collecting studies, and the most important findings of the studies based on the elements of the framework (context, content, actors, and process). Any disagreement between the two authors was again resolved through discussion and referring to a third person (NLB) as the judge.

QUALITY APPRAISAL OF INCLUDED STUDIES

The Critical Appraisal Skills Programme for Qualitative Studies Checklist (CASP) was conducted by three authors in this study (MB, LD and SA) to measure the quality of studies [24]. The CASP contains ten questions, each question with three alternatives (Yes, No, and Unclear). For the answer Yes, score 1 and for the answer No, score 0 were awarded.

ANALYSIS

Three authors in this study conducted the analysis of the included studies using the framework of Health policy triangle. The full texts of the articles were studied and classified based on the elements of the framework. We used a thematic qualitative analysis approach for the synthesis of data [25]. Thematic qualitative were coded from the findings of the elements of the framework. Each of the four elements was examined separately by three authors. Disagreements among them were resolved through discussion.

Results

SEARCH RESULTS

The selection process for the studies is in Figure 1. Based on the search strategy, a total of 731 articles were identified and 269 duplicates were removed. After that, 462 titles were reviewed and 283 unrelated articles were removed. After reviewing the titles and abstracts of 179 articles, 155 articles did not meet our criteria. Finally, 25 articles were selected and analyzed [26-50].

CHARACTERISTICS OF INCLUDED STUDIES

Since 2014, the health policy triangle framework has been used in Iran to analyze policies in the Iranian health sector. The characteristics of 25 studies included are summarised in Table I. 23 studies used document review and interviews and 2 studies used only document review to collect data. For data analysis, all studies used a qualitative method. All studies included were retrospective.

QUALITY ASSESSMENT

Using the CASP checklist, the quality of the studies included methodology was assessed. The scores of 25 studies included are in Table II.

MAIN FINDING

Based on the health policy triangle framework, the main finding studies included findings are summarised in Appendix 1.

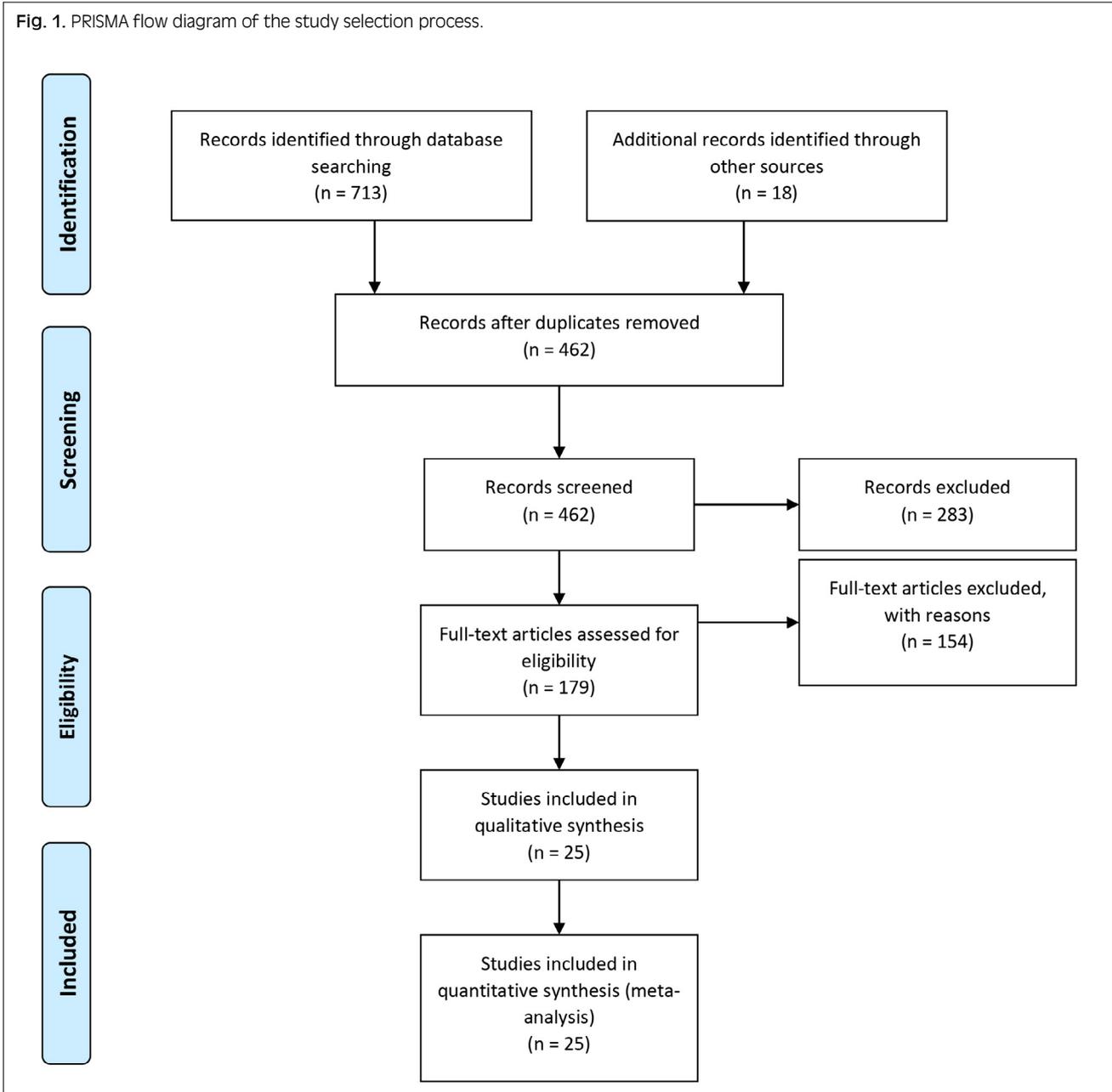
With respect to context, the health system is under the influence of economic, social, political, cultural, and international issues. Also, these issues have a role in formulating and implementing the health policies. In a number of published studies on policy issues, the role of context in policy decisions has not been fully explored. In this regard, WHO is the most important international organization that has had a great impact on Iran's health programs.

Regarding the policy process, in the studies selected for this systematic review, the researchers provided information on the creation and implementation of various policies. They outlined a set of complex actions and decisions to formulate and implement the policies they analyzed.

In general, in relation to the content of policies in these studies, researchers recorded the rules and regulations that have been adopted for a policy at different times, and to show that there are concerns about these rules made by policy makers. Also, they attempted to keep the policies up to date and based on the needs of the community.

Regarding the actors, in the selected studies, a wide range of actors within and outside the government was introduced who could influence policies. Most studies have identified the Iran's Ministry of Health and Medical Education as the most important player in health policy. In relation to the policies analyzed in these studies, most were government actors with a great financial and legal effect.

Fig. 1. PRISMA flow diagram of the study selection process.



Discussion

The findings of our study are discussed in four main dimensions including context, content, process and actors.

CONTEXT

The use of appropriate and scientific evidence can justify the choice of a policy issue, but in some selected studies, the choice of the issue was based solely on the recommendations of the WHO. Although international organizations, including the WHO, report health issues, concerns, and recommendations to various countries, the recommendations should be based on the country context and on issues that challenge their system [18].

Evidence implies that contextual factors significantly influence the health policy process and health [51]. In some studies, there is little or no evidence that a policy issue is on the policy agenda. Most of the selected policy topics were related to diseases; in this regard, one of the most basic foundations needed for analyzing a topic is knowing their epidemiological status [52]. It seems that one of the major problems in the Iranian health system, as in many developing and less developed countries, is lack of epidemiological studies conducted in the general population. One of the challenges mentioned in several studies was lack of access to national data by researchers, and lack of appropriate data related to various health issues [10].

Paying attention to economic issues, and the impact they have on the health sector is emphasized in every country;

Tab. II. The characteristics of the included studies.

First author	Year of publication	Health policy filed	Data collection	Participants	Study design
Markazi-Moghaddam	2014	Establishment of autonomous hospitals and the barriers	Interviews and document review	Key informants (n = 23)	Qualitative
Faraji	2015	Prevention and control of diabetes	Document review	All related documents	Qualitative
Akrami	2016	Iranian children play as a social determinant of health	Interviews and document review	Key informants (n = 21)	Qualitative
Goshtaei	2016	Nutrition policy process challenges	Interviews and document review	Key informants (n = 59)	Qualitative
Moshiri	2016	The formation of primary health care in rural Iran	Interviews and document review	Key informants (n = 35)	Qualitative
Abolhassani	2017	The establishment of the Drug Naming	Interviews and document review	Key informants (n = 31)	Qualitative
Azami-Aghdash	2017	Road traffic injury prevention	Interviews and document review	Key informants (n = 42)	Qualitative
Yousefinezhadi	2017	Hospital accreditation policy	Interviews and document review	Key informants (n = 30)	Qualitative
Ansari	2018	Palliative Care	Interviews	Key informants (n = 22)	Qualitative
Mehtarpour	2018	Family physician plan and referral system	Interviews and document review	Key informants (n = 6)	Qualitative
Mohamadi	2018	Health insurance benefit package	Interviews and document review	Key informants (n = 42)	Qualitative
Sajadi	2018	Iran's health transformation plan in therapeutic services	Interviews and document review	Key informants (n = 38)	Qualitative
Al-Ansari	2019	Alcohol policy in Iran	Document review	All related documents	Qualitative
Doshmangir	2019	The Iranian health transformation plan in primary healthcare	Interviews and document review	Key informants (n = 23)	Qualitative
Edalati	2019	Nutrition labeling	Interviews and document review	Key informants (n = 10)	Qualitative
Gharaee	2019	Public-private partnership in providing primary health care policy	Interviews and document review	Key informants (n = 21)	Qualitative
Khodayari-Zarnaq	2019	HIV/AIDS	Interviews and document review	Key informants (n = 39)	Qualitative
Loloei	2019	Salt reduction in bread	Interviews and document review	Key informants (n = 37)	Qualitative
Mohseni	2019	Malnutrition among children under 5 years old	Interviews and document review	Key informants (n = 23)	Qualitative
Behzadifar	2020	The hepatitis C	Interviews and document review	Key informants (n = 21)	Qualitative
Doshmangir	2020	Setting health care services tariffs	Interviews and document review	Key informants (n = 22)	Qualitative
Ramazanzadeh	2020	Natural childbirth promotion	Interviews and document review	Key informants (n = 20)	Qualitative
Raofi	2020	COVID-19	Document review	All related documents	Qualitative
Heidari	2020	The national phenylketonuria screening program	Interviews and document review	Key informants (n = 38)	Qualitative
Kabiri	2021	Gastrointestinal cancer prevention	Interviews and document review	Key informants (n = 22)	Qualitative

however, the implementation of many health policies has been faced with several problems due to limited financial resources [53]. With regard to the Iranian health sector, in selected studies, the role of financial issues on selected topics has not been addressed. Incomplete or unsuccessful implementation of many of the issues proposed by the policy makers is due to the financial problems of the health sector in Iran [42]. An important

issue in this regard that has had a great impact on the health sector is the international sanctions imposed on Iran in recent years that have led to less resources being allocated to the health sector. Researchers need to seriously consider the role of financial issues in policy making and policy analysis; however, international economic aid has also been declined by Iran policy makers [31]. Due to lack of financial resources, Iranian

health policy makers are unable to implement many of their programs fully and effectively. Cooperation with neighboring countries and regional organizations has also received less attention [46].

Another issue that needs to be considered with respect to context is the political issues; in the selected studies, the researchers had placed the greatest emphasis on the political support of governments in implementing some policies; however, in several studies, how political issues are formed and their role in the health sector were not emphasized. In fact, the political nature of the Iranian government has been less analyzed compared to other governments [15]. One of the major political issues is the interest that various governments showed in implementing their plans. Meanwhile, in selected studies, political changes of governments have been noted as an important influential factor [48].

Social issues have a significant effect on health in any society [14]. Social determinants of health such as income, level of education, occupation, nutrition, and social class are more likely to cause diseases compared to biological factors [54]. In this regard, the social conditions in which people grow up, live, and work affect their health status. Inequality in these conditions leads to health inequalities [52]. Success in improving health and reducing these injustices depends on paying attention to the underlying social causes [54]. Thus, achieving health justice is almost impossible without considering social determinants [55]. In selected studies in this systematic review, the role of social issues was underestimated. The various diseases that were analyzed were the result of social effects; however, a sound analysis of their effects was not seen in the studies.

One of the influential issues in the context of the Iranian health sector is the diversity of cultures in various provinces in Iran. The role of religious diversity and different ethnicities in Iran has been investigated in fewer studies [2, 56]. In order to prevent several diseases, the health culture and people's attitudes toward cultural issues in health should be considered. The implementation of various programs in the health sector is also closely related to cultural trends; thus, cultural thoughts on a health-related issue should be identified, and effective mechanisms should be used in order to promote or correct cultural beliefs [16, 57].

THE ROLE OF INTERNATIONAL ISSUES

Iran's location in the Middle East and its proximity to war-torn countries with underdeveloped health systems poses some challenges on the country such as the transmission of some diseases into the country [18, 44]. In recent years, international aid to Iran has declined, and researchers have paid less attention to the role of international affairs. Situational factors must be considered in the context of the policy triangle. War, earthquake, drought, or other natural disasters can affect different parts of a country. Iran is a country that experiences many natural disasters every year, however, none of the selected articles addressed the impact of situational factors [41].

Regarding structural factors, the researchers of the selected studies paid less attention to issues related to the Iranian political system, and the role of open or closed political opportunities. Also, civil society participation was not examined in the selected studies [11]. In terms of demographic characteristics of Iran due to its young age, except in a few studies such as HIV and hepatitis C, less attention was paid to structural factors [42, 46]. Also, the structure of the MoHMe in Iran has received less attention. The structural problems that exist in the body of this ministry have in some cases made it difficult to implement health policies [50]. In Iranian society, there is a great deal of ethnic and linguistic diversity that may influence health policies. Although the health system has attempted to ensure justice in health services for all people. Unfortunately, the diversity of people's needs has not been taken seriously, and it is necessary to highlight these issues for policy makers and decision makers in policy analysis [43].

CONTENT

Our study showed that in the Iranian health system, policy makers had considered the initial programs and laws that could play an effective role in their implementation; however, they have not deeply analyzed and pathologized past programs and policies. In this regard, the existence of rules and guidelines is also essential for the implementation of health policies and strengthens regulatory capacity in order to implement policies and programs more effectively [26]. Existence of health-related regulations obliges governments to pay attention to various health events and diseases and to implement various programs and policies in order to prevent, control, and promote health. Although, attempts have been made to use national and international evidences to formulate appropriate policies, the effectiveness of policies adopted in the past has not been comprehensively and accurately considered [58]. Thus, policy makers should pay more attention to health-related organizations and groups. However, little attention has been paid to the integration of laws and health programs, and their alignment with the upstream goals [18].

PROCESS

The process of a policy indicates how a policy turns into the policy agenda, its formulation, implementation and evaluation. Inherently, the formulation of health policies is complex and this complexity includes various social, political, ethical, and financial considerations [39]. There are many different influential aspects at this stage that make it more difficult to clarify a policy. An analyst must pay attention to these complexities and be able to make a logical connection between them and politics in order to provide an appropriate view of the challenges and problems in the course of politics [59]. In general, the findings of our study showed that the Iranian health sector is facing with major weaknesses; thus, it is necessary to have up-to-date knowledge about policy implementation which should also be in line with the global challenges of implementation science [35].

PROBLEM IDENTIFICATION AND ISSUE RECOGNITION

The findings of our study showed that most studies on the inclusion of a policy in the policy makers' agenda used the Kingdon framework. Only the outbreak of a disease that had caused concern in a society was cited as the main reason for policy makers to pay attention to a policy, and it was influential in prioritizing activities in response to the problems [42]. While a set of evidence must be considered to prioritize a policy, the formulation of policies was based solely on the concerns of a group or group of actors rather than the will of society [43]. The main challenge of policy analysis studies in Iran was lack of a precise statement of the impact of the issue being analyzed [28]. In this regard, the analyst must clearly state its impact on society in the absence of appropriate policy implementation for a health problem; however, knowing the impact that policy challenges have on people's health is the first step in the policy development process [34].

POLICY FORMULATION

In the selected studies, not much detail was mentioned about the formulation of the policies they analyzed [46]. Different decision making strategies were mentioned in some policies. In connection with the formulation of policies in the health sector of Iran, less attention was paid to the role and importance of the parliament and other legislatures in all policies. Political actors in terms of power and their great influence on policies must be considered and properly analyzed. In relation to policy formulation, there are various actors who have formal and informal powers, and can influence the details of policy content [20, 47, 58]. How they affect this part of the policy process was not fully explored in the reviewed studies in which researchers attempted to identify all those involved in policy making, however, some of them were not fully identified due to their shadowy nature. In the case of some policies, the mechanisms for how these policies were made were not clearly stated [29]. Meanwhile, there was no comprehensive information on the agreement between all those who should be influential at this stage. In most policies, the Iran Ministry of Health played a key role in communicating among the policy makers [26]. In studies conducted in Iran, researchers have not established a proper relationship with policy development; they have only considered this stage very simply and systematically, while in the real world this stage may be from a logical flow [20]. Usually, various policy options should be identified and introduced by policy makers and analysts. However, the reviewed studies did not mention many different options in their analysis and also limited the policy-related options. The development of health policies often reflects a choice between different options and priorities that must be clearly articulated in policy analysis [41].

POLICY IMPLEMENTATION

Policy formulation alone is not enough to change policy. Implementing policies selected from different options is the process of turning policy into the action. In policy

implementation, the content of a policy is conducted through different strategies and programs [30]. In this regard, the most forgotten stage of policy analysis is the implementation of the policy, which is considered separately from the previous stages. In the analysis of policy analysis in Iran, there was a great emphasis on the introduction of implementation stage; however, there were not enough explanations for the complexities of implementing the policies [22]. Also, these complexities were underestimated in the reviewed studies because of lack of proper knowledge about the implementation of the policy and the political, administrative, and financial dimensions that caused these complexities [33].

Most health policy analysis studies in Iran indicate that the policy implementation process is top-down [44]. Most decisions are also made at the macro level, and in most cases without consultation with lower levels, especially street-level bureaucrats. In this regard, several studies also showed that the adopted policies have followed a top-down approach [37].

POLICY EVALUATION

The last step in the policy development process is the evaluation of health policies. At this stage, a systematic review of running programs should be performed based on predetermined goals [17]. Lack of appropriate criteria for evaluating policies was mentioned in selected papers in this study. The success or failure of implementing a policy for different people can have different meanings, but what we noticed in these studies is that a little or no attention was paid to policy evaluation [33]. In some studies, instead of fixing the policy implementation issues, policy makers sought to change the policy, and had little faith in policy evaluation [49]. We believe that a very important point that has been forgotten in the Iranian health system is the correct evaluation of policies [37]. Analysts, decision makers, and policy makers need to know that evaluating a policy is not about determining its failure or success, rather is about identifying the strengths and weaknesses of the policy. Iran's health sector suffers from lack of a proper framework for evaluating various policies and programs. Iranian policy makers are somewhat afraid of evaluating policies; they have to understand that evaluation is not a sign of policy maker weakness in policy implementation [15].

ACTORS

Some independent groups or non-governmental organizations were also effective in policy making; however, they were also under the influence of government as a main actor. In the published studies on policy analysis in Iran, there were not many names of pressure groups that could be clearly explained in the policy and its implementation, but the role of Iranian parliament in some policies was prominent, however, health policy makers have attempted to interact well with all actors and somehow attract their attention [30]. Meanwhile, the role of organizations and groups outside the government is not clear, and their connections with various policies have received less attention. Lobbying

Tab. III. The Quality assessment of the included studies.

First author	Year of publication	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Score
Markazi-Moghaddam	2014	1	1	1	1	1	1	1	1	1	1	10
Faraji	2015	1	1	1	1	1	1	0	1	1	1	9
Akrami	2016	1	1	1	1	1	1	1	1	1	1	10
Goshtaei	2016	1	1	1	0	1	1	1	1	1	1	9
Moshiri	2016	1	1	1	1	1	1	1	1	1	1	10
Abolhassani	2017	1	1	1	0	1	1	1	1	1	1	9
Azami-Aghdash	2017	1	1	1	1	1	1	1	1	1	1	10
Yousefinezhadi	2017	1	1	1	1	1	1	1	1	1	1	10
Ansari	2018	1	0	1	1	1	1	1	1	1	1	9
Mehrpour	2018	1	0	1	1	1	1	1	1	1	1	9
Mohamadi	2018	1	1	1	1	1	1	1	1	1	1	10
Sajadi	2018	1	1	1	1	1	1	1	1	1	1	10
Al-Ansari	2019	1	1	1	1	1	1	1	1	0	1	9
Doshmangir	2019	1	1	1	1	1	1	1	1	1	1	10
Edalati	2019	1	1	1	1	1	1	1	1	1	1	10
Gharaee	2019	1	1	1	1	1	1	0	1	0	1	8
Khodayari-Zarnaq	2019	1	0	1	1	1	1	1	1	1	1	9
Loloei	2019	1	1	1	0	1	1	1	1	1	1	9
Mohseni	2019	1	1	1	1	1	0	1	1	1	1	9
Al-Ansari	2020	1	1	1	1	1	1	1	1	1	1	10
Behzadifar	2020	1	1	1	1	1	1	1	1	0	1	9
Doshmangir	2020	1	1	1	1	1	1	0	1	1	1	9
Ramazan-zadeh	2020	1	1	1	0	1	0	1	1	1	1	8
Raofi	2020	1	1	1	0	1	1	1	1	1	1	9
Heidari	2020	1	0	1	1	1	1	0	1	1	1	8

among different actors is another issue that did not attract the attention of researchers in health policy analysis in Iran, lobbying was not mentioned at all in policy analysis in Iran. In some studies, the social network of the actors was investigated, which can play an important role in creating a correct view of the relationships among the actors [16]. In the context of the policy triangle, the main element is the actors who are the heartbeat of the policy process [60]. Given their role and position, a proper understanding of them must be obtained. In this regard, we need to determine where the actors get their power from, and how they exercise it [36]. In political analysis studies in Iran, the factor of power was seen only in the political dimension, and how power was exercised by different actors was not given much attention. In selected papers we reviewed in our study, actors were considered as a separate item, and their role in the various dimensions of the framework was less analyzed [26]. Actors can, directly and indirectly, affect other dimensions, and their relationship to other dimensions must be considered [15, 61]. In Iran like other countries the ministries of health and state health departments are at the heart of governance of the health system [62].

Conclusion

Studies on use of the policy analysis triangle framework

have been published since 2014. All these studies were retrospective policy analysis and have been reported characteristics, quality and standards of various policies based on the context, content, actors and process of policy. The main focus of health policy analysis studies in Iran was on the context and process of policies. Analysis of stakeholders relates to a policy decision or action has not been considered comprehensively and the power and the role of all actors or players involved in the policy are not recognized carefully. MoHME was the main actor of Iran's policies. Evaluation is the neglected circle in the process of Iran policies. Overall, Iran's health sector suffers from lack of a proper framework for evaluating various implemented policies. Given the importance of achieving UHC across all countries, policy-making aligned with its objectives can prove to be immensely valuable.

Conflict of interest statement

The authors declare that they have no competing interests.

Funding

Not applicable.

Ethics approval and consent to participate

The study received required approvals from the Lorestan University of Medical Sciences (Protocol ID: IR.LUMS.REC.1400.025).

Authors' contributions

Conceptualization: MB, SS, SA, AB, LD. Data collection: MB, LD, AB, MB. Formal analysis: MB, LD, SA, AB, MB, AS. Investigation: MS, LD. Methodology: MB, LD, MM, NLB. Project administration: MB, LD, SS. Validation: MB, SA, LD. Writing – original draft: MB, SJE, NLB, LD. Writing – review & editing: MB, SJE, NLB, LD, SA, AB, SS.

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