

Reviews of ECONJOURNAL-D-22-00040R1

Political turnover and public health provision in Brazilian municipalities

Round 1

Reviewer 1

It is a fine paper, analyzing the rection of the health system in Brazil to political change. ZZ makes a fine job explaining why the Brazilian case is interesting in a broader perspective. It is also a well written, as far as the text goes, but Figures 2 and 3 and Tables 4 and 5 are hard to read. I think that they are done well and can be explained, but it is not done.

Let us look at for the first two graphs for the ratio of SUS workers on Figure 2. The 2 graphs present 2 panels each. They are divided with a slashed line where the discontinuation of the election presumably occurs. The left are the cases where the incumbent wins and to the right there is a change. In the win and change panel there is a line and some gray circles. The whole point of the analysis is that the win and the change line do not meet. I am not sure what the gray circles are, and I am puzzled that the lines sometimes seem to be an estimate of the line through the gray circles and sometime not at all. Also, the number of gray points is not explained.

It is equally bad as regards the complex tables 4 and 5. They both have 9 columns and 3 headings. To be readable they should have one heading per column. I presume that the three terms 'conventional', 'bias correction' and 'robust' are to three standard errors. It is nice that a bias is corrected, but what bias is it? Maybe it would be enough to bring the robust standard error and leave the other two to the Appendix that presumably should be on the net. That is also where the three tests should go.

From 4.4 to the end, it is fine once again.

I think that it is a fine paper and that the calculations are done right and can be explained. ZZ should try once again and check with a new reader, who is not a specialist if he/she understand the figures and tables. Thus, I recommend revise and resubmit.

Small problem:

The table brings the estimated coefficients with too many digits: 0.62381 should be 0.62 etc.

The reference list is too compressed. Check how the normal reference list is made in the journal

The word Unic is not in my dictionary.

Reviewer 2

The paper titled “Political turnover and public health provision in Brazilian municipalities” is well organized and follows a traditional parametric regression discontinuity (RD) measure to find the causal effects of political turnover on municipal health indicators. Overall, the paper looks good and needs some reconsiderations with the health indicators and empirical strategies. A revised version based on the following and other reviewers could make the paper more robust. A few observations and/or comments:

1. The health indicators at the municipal level could be a bit more convincing, if possible, please look for variables where municipalities/municipal corporations have direct effect, e.g., availability of emergency care at the health units, working hours of the health units, availability of the health practitioners at the health units, issuance of birth and death certificates within stipulated time-period, regular health surveys, conducting awareness campaigns on risky health behaviors, medical camps, etc.
2. One thing that is fascinating: the authors have taken the “close races,” which, to some extent, answers the worrying fact of any underlying trends in that year’s election.
3. But the worrying part is this if we can call that a political “turnover” – especially if the race is close there is a random/luck/chance/fluke factor: please cite some of the political sciences literature in this context, as the authors are considering “incumbent party” advantage over the “candidate” advantage. Here, an event investigation may be useful to find out if there was any dominant party wave in favor of political turnover was already in place, at the district/state/national level.
4. On the above point, please see if a non-parametric regression discontinuity produces anything different than the current results.
5. Finally, there could be a better mechanism explaining why a political turnover might appoint SUS municipal managers with university degrees/better educational outcomes. Please cite relevant literature explaining this phenomenon and aspirations behind it. If it occurs only at the managerial level posts but not at the field-level posts, there might be a selection issue of artificially inflated significant differences in the outcome variables

Round 2

Reviewer 1

Political turnover and public health provision in Brazilian municipalities

I have seen this paper before. It is certainly much improved explaining Brazilian institutions better and linking the findings to the international literature. The findings are not impressive in size but still, they are significant.

The key finding is that political turnover did improve healthcare. The paper also suggest that the effect of the change is of a longer duration. This seems to suggest some sort of divergence making the voters turning against the incumbent at every election, and hence making the health system better every time. But then there is probably an upward trend in health provisions as everywhere else, when the economy grows, as the Brazilian economy does - even at a rather uneven pace. However, that is a minor point. Also, the editor may want the paper to be shorter!

The paper is clearly a very careful piece so I think it should be accepted.

I hope that the author(s) will follow up on these findings that seems to indicate the importance of contestable elections, and the resulting political changes, which is a key reason for preferring democracy.