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The political and religious impact on the development of school education and health services' provision in Lebanon: A literature review

international social welfare and health policy

Faculty of social sciences

Abstract

Title: The political and religious impact on the development of school education and health services in Lebanon: A literature review

Objective: To get better knowledge and understand the role of political and organizational practices and religious actions in the emergence and implementation of the welfare services to learn for potential improvement or change.

Aim of the study: It aims to examine the political and organizational practices besides religious initiatives to provide school education and health care services in Lebanon. Also, investigates their role in the path of allocation of these services.

Method: A systematic approach to literature review. A conducted integrative literature review to collect relevant data from different publications over 40 years. It was followed by a thematic analysis to analyze the candidate studies.

Results: Findings reveal that the combination of historical political practices and religious interference in social and health services' provision, have contributed to the emergence of the welfare services provision and implementation of the current provision's pattern of school education and health care services.

Discussions: studies agreed on the circumstances back the emergence of the welfare system in Lebanon, and they supported the political and religious actions' role in its start and evolution. But they disagreed on their role in the state institutions' weakness. Further they agreed on the religious actions' role in the emergence and development of welfare services provision, but they disagreed on the motives behind their involvement in service provision, and their role in the path taken in the provision of education and health services in Lebanon.

Keywords: Lebanon, social policy, welfare regime, welfare services, religious welfare, sectarianism, education, health services.

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1.0 INTRODUCTION

1.1 Background for choice of the subject

Welfare services provision in the middle east has a long history that may date back to the time before the modern states' birth. Welfare services' rise and evolution differ between countries by how the states and non-state agents provide services. Non-states providers (NSPs) that are mostly religious agents started to offer welfare services aiming to improve the social and economic status of the population. The voluntary initiatives have been a significant source for offering welfare services and aid in the Lebanese society through social movements and non-governmental organizations. Religious agents' involvement in providing social services has a long history in the previous centuries (Jawad, 2009a). The religious' actions and initiatives toward providing welfare services, besides the religious composition of societies, contributed to the growth of religious welfare organizations (RWOs). Christians and Muslims' missionaries provide welfare services to their communities from the moral obligation of their religions (Haddad, 2020).

The complicated history of welfare services' provision in Lebanon stimulated my curiosity to understand their start factors and circumstances behind their appearance. Also, to understand the role of non-state providers such as religious welfare organizations in the development of these services. Though, I am Lebanese and have worked with non-state service providers and non-governmental organizations. Thus, I have a background about the historical, political, and religious service provision practices. So, at the start of this study, I had experience with the Lebanon's welfare system and the provision ways of school education that is meant here the primary and secondary schools and health care services that encompasses primary and secondary services. However, lacking basic knowledge and details about the rise and development factors.

Based on the prementioned, I choose Lebanon as a developing country (Cammett, 2015) to focus on the rise of the welfare services and the contribution of politics and sects to the provision's pattern of school education and health care services. Focusing on these issues is due to the crucial role and place of the religious welfare in the region (the middle east) and thus, Lebanon. Religious welfare forms a significant part of non-state actors who provide welfare services and influence social policies (Jawad, 2007). Hence, studying the political practices and religious actions is central to comprehend the elements of welfare services' provision in the country. Accordingly,

understanding the allocation path of school education and health care services. Moreover, this may help in any potential planning, change or update of the adopted service provision's pattern.

Lebanon is an upper-middle-income country of 10,452 km2 located in the Eastern Mediterranean Region. It has a population estimated at 6 million people, which counts all residents regardless of legal status or citizenship (The world bank, 2019). The last conducted official census was in 1932 (World Health Organization, 2012).

The shared Lebanon' welfare system between various providers makes it fragmented, accordingly, the welfare service's provision as well (Sen & Mehio-Sibai, 2004). Diverse socio-political, and religious factors besides local and foreign actors may have influenced the emergence, implementation, and evolution of the school education and health care services' provision.

Political practices such as power sharing formula (the way of sharing the administrative authorities among the partners to manage the socio-political affairs into the society) based on sectarian identity has been the rule of governance in Lebanon since the 18th century. The historical Ottoman and French mandatories over Lebanon have built the confessional identity and sectarian system which allowed each community to manage its affairs (Sen & Mehio-Sibai, 2004).

The timeline below shows the progress of political actions such as Ottoman and European occupation of Lebanon. Further, it displays the invention of a consensual power sharing patterns besides geographical division of the country to allow local groups managing their communities' socio-political affairs. Moreover, the timeline shows the evolution of religious initiatives and actions to participate in building schools and health care facilities to help their populations. This timeline aims to make it easier to understand the evolution and development of political and religious actions. Also, it aims to indicate their impact on the provision patterns of school education and health care services in Lebanon from the 18th century to the present.

- 1600 establishment of the ***Emirate of Mount Lebanon*** as a self-governing province in the Ottoman Empire
- 1843 a subdivision of an Ottoman **wilayat into two Qa'im maqamiya** was declared. (a division of the Mount Lebanon into two organizational districts).
- 1860-1943 ***Ottoman and European missionaries provided health services***

- 1861 ***combination of the two Qa'im maqamiyas into a Mutasarrifiya*** (an administrative geographical division).
- 1864, a revised administrative rule ***split the Mutasarrifiya into 7 districts (cazas), ruled by the dominant community in each***.
- 1833 The ***Greek Orthodox built a school*** in the convent of Balamand near Tripoli
- 1834 establishment of ***Maronite school***
- 1835 ***Protestant missionaries open a boys' school in Beirut***
- 1837 Protestant missionaries open a school for girls
- 1840 build ***a school for Druze (Muslim sect)*** girls in Mount Lebanon
- 1865 The ***Catholics founded the Ecole Patriarcale***
- 1866 foundation of the ***Protestant Syrian American College*** (the American University of Beirut now)
- 1874–75 the launch of the Université Saint-Joseph
- 1874 established the Ecole de la Sagesse by the Maronite bishop
- 1878 ***foundation of Jam`iyat al-Makassed al-Khayriya al-Islamiya*** (the Muslim Association for Benevolent Intentions) in Beirut, Sidon, and Tripoli
- 1880 the ***Greek Orthodox established Zahrat al-Ihsan*** (Flower of Charity), a school for girls
- 1883 foundation of the French Jesuit
- 1914, ***the Ottoman Empire terminated the unique status given to mount Lebanon and remerged it into the Ottoman Empire and ruled by a Muslim Ottoman***
- 1914 ***Beirut encompassed 359 public schools related to various sects***
- On 1 September 1920, ***the modern state of Lebanon was declared*** as a Franco-British colonial split of the Middle East
- On 22 November 1943, the ***end of the French mandate in Lebanon, declaration of the Lebanon's independent republic***
- 1943 ***the National Pact (an informal verbal understanding between the Christian president and the Muslim prime minister)***
- 1943 ***development of Ministry of Health and Public Relief***

- 1964 ***foundation of the National Society Security Fund (NSSF), Cooperative of Civil Servants (CCS), and security forces funds***
- 1975 ***outbreak of the civil war***
- 1989 ***The Taiif agreement ended he civil war and the trend of national unity governments started***
- 1975 ***flourishment and institutionalization of Islamic and Christian's health care institutions***
- 1996 ***establishment of collaboration between the health ministry and non-governmental organizations and municipalities***

The Ottoman and European policymakers formed the political sectarianism when they founded a new order based on a geographical district division **(**Mutasarifia**)** along sectarian lines which generated a sectarian system of governance. The Ottoman Empire was the authority that had controlled Lebanon since the 18th century over a long time before the first world war. The administration of the Mutasarifia was a compromise between the French mandate and the Ottoman authority in Mount Lebanon (Traboulsi, 2012a). They started their influence in Lebanon by founding religious schools, shelters, and health institutions (Shorrock, 1970). Thus, the welfare services' provision started through the Ottoman and French colonies and sectarian initiatives taken by local sects of both Muslim and Christian religions. Each sect took initiative to build dispensaries, shelters, and education centers to serve their community members.

The historical Ottoman and French mandatories over Lebanon played a significant role in guarding Muslims and Christians' coexistence with all their ideological, organizational, and practical differences and disagreement. Nevertheless, these differences and disagreement may have contributed to conflicts and tensions between Muslims and Christian's groups/sects. The frequent conflicts pushed the guardians (Ottoman and French) to invent and apply a power-sharing form to control both religions and keep their coexistence through a formula based on a balance between the sects or dominant ruling groups, not on a national/citizenship basis (Ghosn & Khoury, 2011).

The Ottoman politics' religious nature encouraged philanthropic and charitable services as a policy to aid the less fortunate with social and health services. This status encouraged the emergence of

religious organizations and associations. Also, the French colony in Lebanon has significantly impacted the welfare service provision pattern by applying the French model in Lebanon (Kronfol & Bashshur, 1989).

This practice made the sect as the significant component of political and social identity and strengthened the already produced and constructed sectarianism by colonial authorities. Thus, political traditions and practices of colonial authorities in cooperation with local sectarian and political groups have divided the Lebanese society into geographical districts and sectarian lines. This division may have opened the door for religious communities to manage their concerns and provide welfare services to their constituents (Makdisi, 2003).

The various local sects of both Muslim and Christian religions in Lebanon took actions and initiatives to provide welfare services. They may have played a vital role over a long time in history, contributing to provide school education and healthcare services through their religious welfare organizations. They attribute their interventions in service provision to their moral and ethical obligations in the weakness of the state. That may explain the religions' contribution to the current services' provision path (Jawad, 2009a). Abyad (1994) claims that medicine/health services in Lebanon were absent until the 19th century when the medical schooling by western missionaries began. Further, Van Lerberghe et al. (1997) stated that the Lebanese state has a historical marginal role in services distribution; the private non-state sector was the leading provider. Hence, the religious' historical interventions and initiatives in philanthropic and charitable services made them leading services' provision (Haddad, 2020). Consequently, sects, ruling groups, and other non-state actors became the leading service providers and essential partners in the welfare policymaking. They used their non-governmental organizations (NGOs), associations, and networks to build the informal sector/system (Unger et al., 2010). The informal sector/system in this context represents the reliance of people upon community and family relationships not on state institutions to guarantee the acquirement of basic services (Gough et al., 2004, p. 50)

Numerous studies have investigated the welfare services in Lebanon out of different separated elements. However, the absence of a comprehensive study combining and interrelating the historical political practices and religious' actions to display their influence on the development and implementation of the school education and health care services. Hence, this master's thesis

aims to be a comprehensive study addressing the historical and political practices together with the sectarian involvement in welfare services' provision. Further, displays their impact on the allocation patterns of school education and health services.

To investigate and get an insight into the historical political practices besides the religion's actions and initiatives toward welfare services provision. A completed review of the most relevant literature on the topic over the last 40 years through an integrative literature review.

1.2 Purpose and problem

To find relevant research that may help to study the historical political practices and religious' interventions in the evolution and provision patterns of the welfare services.

The following question guides this master's thesis:

How and to what extent have political and religious actions influenced the path taken in the provision of school education and health care services in Lebanon?

1.3 Delimitation

The crucial point of this literature review is to understand the political practices, religious actions, and non-state providers' role in the provision of school education and health care services in Lebanon. Here in the study, the school education means the primary and secondary school levels, and the health care services encompasses primary and secondary care. So, for the study, I choose to focus on these two services as they are considered core elements impacting people's social and health status. Taught, other issues to mention or include in the study, such as poverty, child and maternal planning, efficiency and equity of the welfare system, administration, funding patterns, or comparison with regional systems. However, if political and religious actions' role in service provision identified and understood, this may pave the way to better understand the delivery mechanisms of these services. Also, it may help to understand the positive and negative sides of the adopted way or the pattern to deliver and allocate services basing on sectarian and political considerations, not on a general basis that encompasses all citizens.

1.4 Concepts' clarification

In this thesis, it is necessary to explain the following concepts to make them more accessible to the reader and to avoid misunderstandings. Terms may be unfamiliar or have dissimilar meanings

and may be used differently in other contexts. This part will explain the used terms to make them helpful to the study's problem.

Religious welfare organizations (RWOs): refer to non-state welfare organizations affiliated with sects and religions providing social and health services (Jawad, 2009b).

Actors: are partners, suppliers, funders, providers, and participators that are involved in the process of planning, designing, and implementing social policies (Lindstrand, 2006).

Sectors: indicate the private and public areas of welfare services. State organizations, besides formal institutions, form the public sector. The other non-state and informal institutions operating on a market basis include private companies, for-profit religious foundations, and voluntary, not-for-profit organizations forming the private sector (Lindstrand, 2006).

Institutionalization: the introduction/evolution and enforcement of informal arrangements, agencies, branches, offices, and service centers into the state's formal composition (Cammett, 2015).

Political sectarianism: in this context it means the various actions made or taken decisions to establish a sectarian political system in Lebanon. So, splitting the management authority of the country among the dominant sects by reserving the quotes of parliament representative seats for each sect. Furthermore, registering the sectarian identity on the national identity card, thus, implementing the sects in the daily life and the political administration (Cammett, 2019).

Sectarianisation: in the Lebanese context it indicates how the different agents such as state elites, political or sectarian leaders and paramilitaries groups actively deploy and develop sectarian identities. They use different means from political decisions to violent actions if needed to divide society along collective lines for strategic plans. Thus, embedding sectarianism as the background for controlling and managing their communities (Nagle & Clancy, 2019).

Intermediary culture: in this study this means that political parties and religious leaders intermediate or play the brokers role to provide health and social services to their members, and activists. They intermediate between the state’s institutions and the beneficiaries who are often members in their parties or sects. Thus, building a culture of intermediation where the members depend on their brokers to obtain their basic services (Cammett, 2015).

2.0 THEORETICAL PERSPECTIVES AND PREVIOUS RESEARCH

This part will present the theoretical perspectives and research related to the political and religious practices and actions impacting and contributing to the path of welfare services provision. Further, it will brief the two main religions (Christianity and Islam) and indicate their similarities and differences, considering the Lebanon context.

2.1 The political and religious influence on the welfare services' provision

The historical occupation of ottoman and European colonies in Lebanon imposed a political order and geographical division based on districts and areas besides granting the sects local authorities to manage their communities' affairs. They invented a power sharing formula that split power between main sects and allowing them to manage their districts. This formula may have reduced the conflicts and tensions occurred over long time between Christian and Muslims' sects. Consequently, institutionalize sects and making them central partners in the organization and governance of the Lebanon's territories by establishing sectarian quotas (Traboulsi, 2012b). Furthermore, both Ottoman and French practices focused on charitable initiatives and implemented sects in welfare services provision. Ottoman used to subsidize Muslims through their religious institutions, local dominant elites, clerics, and political leaders who intermediated to deliver subsidized services for their in-group members. On the other side, the French mandatory also supported Christian religious institutions, churches, clerics, elite families, and political leaders to provide services (Cammett, 2014). Jawad (2008) claims that moral obligations and religious' ethics motivate the religion's interventions that act from the human to the human. Even though, Haddad (2020) emphasize that when interpreting the service provision by non-state providers, we must consider political factors and intentions.

Both Christianity and Islam as the main religions in Lebanon, they have their welfare organizations that affected the development and implementation of welfare services provision. Both Christians and Muslim's sects started and built their schools and health care institutions to help their communities. Therefore, a need for a brief about these two religions to clarify and elaborate their main characteristics and discrepancies for readers who are unfamiliar with them. Following is a brief on these two religions.

Brooks (2004) states that Muslims follow the religion of Islam, whereas Christians follow Christianity. Both Islam and Christianity are Abrahamic religions attributing their origins to Abraham. They believe in one true God. Christianity started in Jerusalem. Christian groups (Catholics, Orthodox, and Protestants) follow the wisdom of the old and new bibles. They consider that Jesus is God's son rescuing humanity and was born through a virgin birth. They deem that Jesus has suffered, deceased, and was revived from the dead to grant eternal life to persons believing in him.

Islam believes Allah and his last emitted prophet and messenger Muhammad to disseminate the Qu 'ran, concluding and settling the God's word. Islam considers itself the last religion on the earth after Judaism and Christianity. The Sunni and Shia form the two main groups in Islam. Pray five times between sunrise and sunset is a command. Diets containing ham products, blood, carrion, and alcohol are banned. All consumable meat must be halal, which means it originated from an animal eating herbs, not meats or cadavers, and slaughtered by God's name.

Their main disagreement is that Christianity believes Jesus is God's son, whereas Islam considers him a prophet (Issa). Both religions practice fasting and giving alms to the unfortunate. Christians pray in the church, whereas Muslims in mosques. They also make pilgrimages to Mecca and Jerusalem to receive God's blessings (Brooks, 2004).

Despite Islam and Christianity having common traditions and rituals, they have substantial disagreements and differentiated doctrines. That makes them unique with their beliefs, lifestyles, and administrative views of their social and political affairs.

Accordingly, the welfare services in Lebanon emerged between the 18^{th} and 19^{th} century, influenced by the political actions practiced by the Ottoman and French colonies. They established a power sharing formula dividing governance of districts on the base of sects and geographical distribution. These actions introduced the sectarian system and embedded the quotes of sects in the governance system. Moreover, Ottoman and French authorities supported and encouraged the diverse sects to build their welfare infrastructure. The religious welfare associations and non-state organizations provide social and health services for their people through their sectarian schools and health institutions, thus being competitors of the formal authority. Hence, political practices

and religious initiatives play a role and impact the provision path of welfare services out of distinct beliefs, vision, regional connections, and socio-political agenda.

3.0 METHOD

This chapter will describe the method I have chosen and explain the options I have made in the process of answering the research question/s.

3.1 Design

The research question in a study determines the choice of study design and method (Farrugia et al., 2010). Thus, as the case is in this study, the integrative literature review (ILR) method became the practical and applicable means to conduct in this study. It provides the aimed knowledge about the targeted topic. It answers the research question without the need to gather primary data. This method's data results from independent studies on the same topic impact the field's theoretical and practical demands (Souza et al., 2010). Moreover, it provides an overview of the most relevant literature that can appropriately address the research question. Also, it allows combining perspectives to produce an integrative review in a new framework. Finally, it facilitates a new research agenda to draw a road map for the topic (Snyder, 2019).

Thus, the ILR differs from the meta-analysis that combines evidence from multiple primary studies by using statistical tools to enhance the objectivity and validity of the findings. Also, it differs from the systematic review that synthesis all studies linked to a precise question and focuses on investigational studies like randomized clinical trials (Whittemore & Knafl, 2005) Therefore, choosing the ILR to attain a good overview on the politico-religious circumstances behind the birth and evolution of the welfare services in the absence of a comprehensive review on this topic. In addition, various obstacles hinder completing primary data collection through interviews or field observation. (Unstable political situation in the targeted country, travel difficulties, logistical fees, time constraints, and the most recent coronavirus pandemic).

The adopted method will follow a deductive approach in the way it will answer the research question. The study will build on a theory that correlates the historical political practices and religions' actions to the development and implementation of welfare services in Lebanon. Thus,

the theory leads the literature gathering, and the analyzed data will confirm or deny the theory (Braun & Clarke, 2006).

To do an ILR, it requires reflections and an in-depth study of the literature based on the chosen problem. A systematic overview is a complete, up-to-date summary and is well suited for answering the chosen problem. In addition, it must systematically explain the collection and assessment of the literature. A prerequisite for making an outstanding systematic overview is enough studies of decent quality. Finally, one must systematically search, critically examine, and compile the literature on the chosen issue (Torraco, 2016b).

Further, Johannessen et al. (2010) highlight the importance of clarifying one's prejudices for the reader and knowing the interpretation's starting point, besides being aware of the already existing knowledge and opinions. Consequently, I may have formed an opinion that might be right or wrong on the studied topic and use this foresight when making the study's hypothesis. A hypothesis built on an experience or opinion claims that political practices and religious interventions affect welfare services allocation and provision’s patterns. Such a hypothesis may influence and play an essential role in approaching the field of research and the results. By being aware of my prejudices, I can use this further in the work with the literature study and be more open to new knowledge and experience.

3.2 Inclusion and exclusion criteria

I have strived to find research articles in scientifically recommended databases by the Oslomet library and learning center (Medline, Embase, Web of science, and Oria). Included studies contained in their titles words such as Lebanon, welfare system, religious welfare, welfare services, social policy, sectarian providers, and welfare history or service's provision.

English became the only language used in the search because it is the broadest language used by the databases. Even though I read Arabic and French publications, but I did not encompass them here due to limited translation resources (not practical nor applicable). Further, the search produced no literature published in the Norwegian language. Therefore, I have not included any. Though using one language might be a limitation or a weakness of the study (Torraco, 2016a). The literature search included publications from 1980 to 2022.

I exclude publications that did not appear relevant or related to the targeted topic and did not cover its main elements (historical political practices and religious interventions). Thus, literature treats the Lebanese welfare system generally but are out of the focus and interest of the study. Issues such as financing patterns, poverty reducing, child and mother planning, equity, efficiency, and economic obstacles were excluded. For more details, see the attached table of excluded studies appendix 4.

Inclusion criteria	**Exclusion criteria**
Approved databases by the Oslomet	Not approved databases
Addressing the LWS's historical, political, and religious/sectarian role in its formulation and implementation.	Irrelevant to the targeted issues or treating other issues such as financing, administration, or development of social policy
Written in English	Other languages than English
Dated/published from 1980 until present	Older than 1980

3.3 Database selection: The searching process was in these databases

Medline	1 Article
Embase	1 Article
Web of science	4 Articles
ORIA	1 Articles

3.4 searching words

The systematic search consisted of as many as possible comprehensive keywords and terms, as Torraco (2016a) recommends. The search includes words such as Lebanon, welfare services, welfare regime, social policy, welfare history, religious welfare, social and health services, and service provision to look for relevant literature. For a detailed keywords overview used in the systematic search, see the attached Appendices 1, 2, and 3.

3.5 Data collection

The literature/data search was started in October 2019 and continued in the first quartal of 2022 by searching electronic databases (Medline, Embase, Web of science, and Oria) for relevant literature published from 1980-2021.

Following the Torraco (2005) staged reading strategy, I first read the search literature title to identify its relevance. Studies in their title included words about Lebanon, welfare system, religious welfare, sectarian providers, welfare history or service's provision passed to the next stage.

The next step was to read the abstracts and the introductions of the selected articles. Then, articles that treated the emergence and implementation of the welfare services and examined the historical political practices and non-state initiatives to service provision proceed to the full-text reading.

The last stage was to read the articles that passed the previous step. After a complete reading and deep checking, I selected seven articles to present in the study.

To critically evaluate the collected literature, I used checklists from the Norwegian health library. Different research methods require different control questions and checklists adapted to the design in the articles (Nortvedt et al., 2012). The high-quality articles meet all the criteria in the checklist; any weaknesses cannot change the study's conclusion. On the other hand, medium quality articles may miss some criteria or not describe them sufficiently. Example of checklist in appendix 5.

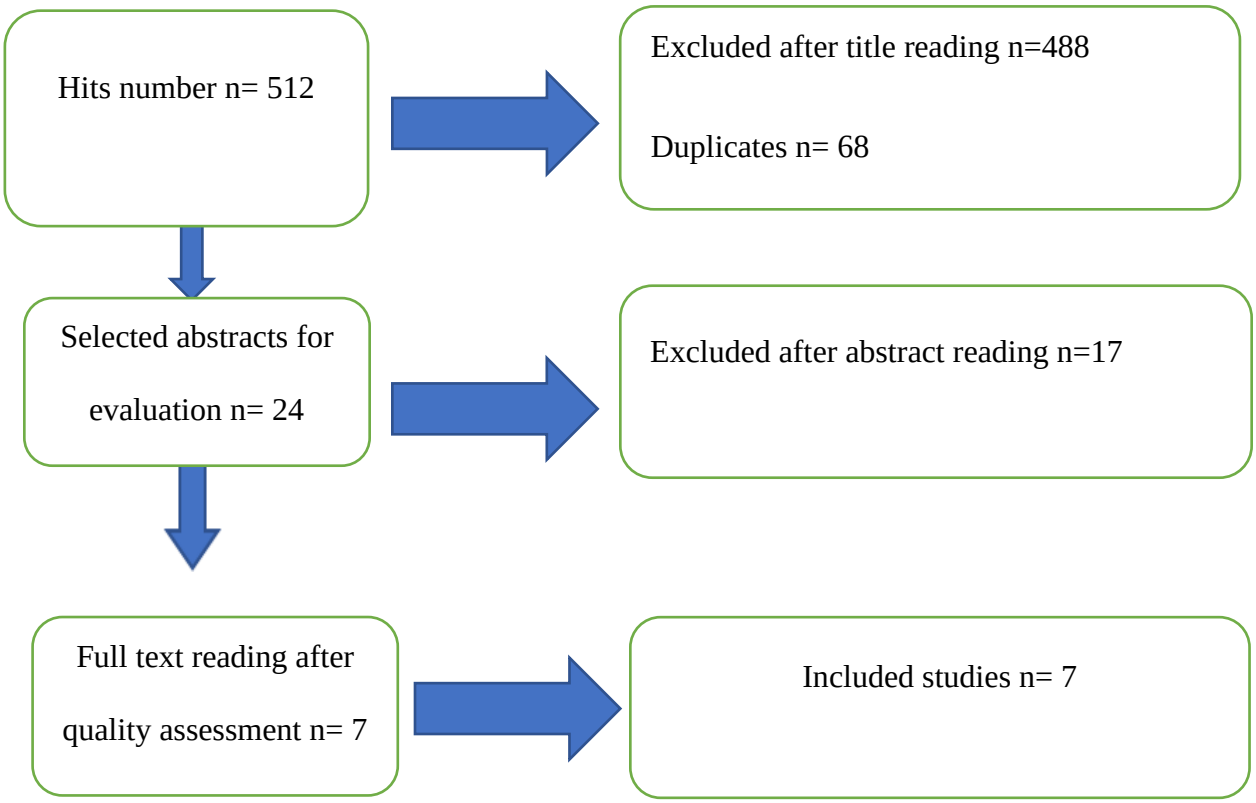


Figure 1, Flow chart of the selection process

3.6 Citation management

The EndNote reference software was used to import, organize, and follow up the references. APA 7th style.

3.7 Ethical considerations

Before conducting any social research associated with a health institution, personnel or patients' information, it should have ethical clearance from a research ethics committee (Bryman, 2012, p. 144). This literature review is not associated with any personal or institutional information. So, it does not need any special approval from the regional committees for medical and health research ethics. Nevertheless, I will choose decent quality studies, account for all articles, and present all results.

3.8 Method discussion

The strengths of literature study are that one can make available already existing knowledge specifically related to current issues. The discussed strengths and limitations can primarily be related to the inclusion and exclusion criteria, choice of databases, choice of keywords, selection process, the chosen system for quality assessments of the articles and choosing mixed qualitative and quantitative articles.

In this study, I tried to follow rigorous, transparent methods during the entire process and utilize acknowledged databases besides using the EndNote reference program to guarantee the tracking of all articles and citations during the process.

During the work with the literature study, I have learned to apply systematically and evaluate research. However, having no previous experience with this and working alone with a literature study may be a limitation for the study.

The search may have missed relevant studies. Investigating other databases could provide additional relevant studies published in a language other than English (Pham et al., 2014).

Also, being selective and cultural background may have affected the literature search and selection. This may affect the targeted sample by missing relevant literature and other keywords in the main search. Moreover, wrong evaluation, identification of gaps, or deficiencies in gathered literature may have a specific effect on the conclusion based on false assumptions (Snyder, 2019).

There are potencies and restrictions related to using both quantitative and qualitative articles. The study has not performed a meta-analysis of quantitative articles or a meta-synthesis of qualitative articles. This process requires advanced methodological knowledge. However, it may be a strength to use mixed-method articles and a thematic analysis of the included studies concerning the study's problem. It is popular to use thematic analysis in systematic overviews that analyze qualitative and quantitative data (Berg & Munthe-Kaas, 2013).

Also, being conscious of the strengths and limitations of the findings included in the literature review is crucial. It may miss essential nuances if only including studies of superior quality. One must be aware of the study's limitations by including studies with medium or medium high quality. None of the included studies is of low quality or has significant shortcomings.

The literature study has tried to make it transparent by presenting the detailed search strategy, process, and search history and explaining the choices. A limitation is that I curried the study alone and had no other persons to discuss and evaluate the articles. If someone else replicated this study, the result would probably not be the same. Therefore, the study will not be 100% reproducible.

4.0 RESULTS

4.1 Presentation of included studies

The literature study is divided into subcategories that describe the findings in the various articles. As a part of the critical assessment of the studies, the assessment encompassed the researcher's role, the study's publication place, the study purpose presentation, and the chosen method.

During the article's analysis, a deep read of the results section**,** then terms or sentences describing the welfare services emergences circumstances, political actions, and religious initiatives in school education and health services provision were inserted under themes and categorized.

A supplementary table of included articles will present the purpose of the study, problem statement, primary findings, and quality. Included articles are qualitative and mixed studies to get the broadest possible breadth on the topic.

Table 1: studies including evaluation criteria and quality

Writer's name, publication place, and year.	Title	Method	Main question	Finding	Quality
Tania Haddad,2019. American University of Beirut, Lebanon,	Religious Welfare Organizations, Citizenship, and the State in Lebanon.	Based on interviews conducted in the field	what is the role of religious welfare organizations in Lebanon? In what ways does Lebanon's political and social environment affect the role and the nature of those organizations.	The historical political system of the state paralleled with the locally adapted and the decentralized structure of RWOs in Lebanon have contributed to the development of these organizations. these latter in return have grown more	High

				powerful than the state.	
RANA JAWAD, 2008 Cambridge University Press. UK.	Religion and Social Welfare in the Lebanon , treating the causes of Poverty	Case study Based on focused interviews and field observations; the research involved 140 participants, the Ministry of Social Affairs (MSA) and five of the most prominent FBOs in Lebanon.	to what extent policy implementation adequately defined the object of its interventions and, thus, responded to the causes of human impoverishment as opposed to its symptoms?	Human need, the social case and poverty are three core concepts directing the formulation of social policy to engage more directly with the ethical implications of contemporary social welfare concerns. a much larger universe of local and international non-state actors as well as cultural, moral, and political forces; and faith-based welfare is still relevant to social policy	high
Cammett, Melani. 2015. Harvard university.	Sectarianism and the Ambiguities of Welfare in Lebanon	Qualitative Interviews with beneficiaries and political parties' members and field observations	How non-state sectarian welfare providers emerge from and contribute to constitute political sectarianism throughout different practices?	sectarian groups by sectarian organizations may fill in gaping holes in the Lebanese welfare regime, although mediating access to	high

				essential services may meet the needs of some poor and vulnerable components of society, however, this may reinforce the existing social inequalities due inclusion and exclusion boundaries in their patterns of welfare outreach	
Rana Jawad (2007), Tandfonline.	Human Ethics and Welfare Particularism: An Exploration of the Social Welfare Regime in Lebanon	The method adopted for this research was a large qualitative case study involving service providers and users at the Ministry of Social Affairs and five leading Christian and Muslim religious	What role plays moral values in social policy? how moral values motivate religious organizations in Lebanon to engage in social welfare, and how these same values shape the conceptualization of social welfare?	ethical responsibility and moral obligation determine relations between service providers and service users' shapes and all dimensions of the policy-making process: from the impetus for social action, to the conceptualization and implementation of social policy, to the measurement of welfare outcomes.	Rana Jawad (2007), Tandfonline.

		welfare organizations in Lebanon. there were 140 research participants. In-depth interviews were conducted with senior and junior staff members in the MSA and FBOs, as well as with a variety of service users			
Melani Claire Cammett, 2011, springer science, New York.	partisan Activism and Access to Welfare in Lebanon	Based on analyses of an original national survey (n= 1,911) as well as in-depth interviews with providers and other elites (n= 175) and	How do welfare regimes' function when state institutions are weak and ethnic or sectarian groups control access to basic services?	political activism and a demonstrated commitment to a party are associated with access to social assistance; and second, higher levels of political activism may facilitate access to higher levels or quantities of aid	high

		beneficiaries of social programs (n= 135)			
MELANI CAMMETT and AYTUG˘ SASMAZ*. Harvard University, Cambridge, USA, 2017	Political Context, Organizational Mission, and the Quality of Social Services	Case study Based on evidence from an original set of surveys in primary health centers affiliated with diverse public and non-state actors in Greater Beirut, Lebanon. 1) survey interviews with the chief medical officer and medical staff, and direct observation of clinical examinations. also, exit interviews with patients	Who exhibit welfare advantage in providing welfare Goods, secular groups, or sectarian organizations?	despite the religious and sectarian actors' domination of politics and the welfare regime and command the most extensive resources, secular NGOs exhibit better measures of health care quality rather than religious, political, or public sector providers.	High

		at the selected facilities. and medical vignettes administered to general practitioners at each facility to assess their medical knowledge and advice			
Bradley Chen and Melani Cammett, 2012, USA.	Informal politics and inequity of access to health care in Lebanon	This study uses a mixed-methods approach, combining findings from a household survey (n = 1789) and qualitative interviews (n= 310) in Lebanon.	What a micro-politics and informal institutions affecting the access to health care?	Individuals with higher political activism have better access to health services than others. Informal, micro-level political institutions can have an important impact on health care access and utilization, with potentially detrimental effects on the least politically connected.	high

4.2 Findings from the articles

I have obtained the following meaningful findings through a comprehensive review of the articles. Here, presenting the main findings in the included studies with quotes from the text and findings.

- *Religious Welfare Organizations, Citizenship, and the State in Lebanon (Haddad, 2020).*

Religious welfare organizations became a substantial actor at the national level due to the historical practices of foreign authorities encouraging confessional solutions on the administrative and service levels. The division of territories by the foreign guardians (Ottoman and French mandatories) who occupied and divided the country into districts to fit the dominant components that are mostly the local sects. Also, the practice of power and service provision by those sects and their welfare organizations involving in various socio-political issues seeking to extend the granted role by the foreign authorities. Consequently, religious welfare organizations of the dominant local sects developed and grew to substitute the formal state institutions' role to provide welfare services for their communities. However, they exceeded the state capacity in some places. Hence, efforts made and the taken initiatives by their civil associations starting from religious or sectarian identity may have reinforced social fragmentation and weakened the citizenship basis in the practiced services provision path.

Quotes:

'' Religious welfare organizations (RWOS) in Lebanon are the leading providers of the social and humanitarian services that are typically government-provided'' *(Haddad, 2020, p. 1).*

''Since the Lebanese state does not provide minimum social services for its citizens, civil society associations are stepping in to provide community services and regularly using their public influence for political aims'' *(Haddad, 2020, p. 1).*

'' the political system of the state paralleled with the locally adapted and the decentralized structure of RWOs in Lebanon have contributed to the development of these organizations; these latter in return have grown more powerful than the state'' *(Haddad, 2020, p. 1).*

- *Religion and Social Welfare in the Lebanon , treating the causes of Poverty (Jawad, 2009a).*

Faith-based organizations (FBOs) in Lebanon are central actors in welfare services' provision. They have their complex ideological and political identities besides their affiliation to local and international non-state actors and cultural, moral, and social forces. Local and external practices fueled and encouraged their foundation and flourishment. The political decisions taken by the external guardians splitting the country into sectarian districts coupled with the sectarian nature of the local society and communities. Thus, the religious welfare agencies and organizations justify their involvement in services provision to participate in poverty reduction and life quality improvement in their communities. They also attribute their charity activities to their moral obligation and the altruistic nature of their religions. A complicated composition may explain the correlation between service provision and religious intentions. Thus, diverse local and external factors affect the policy-making process in such a context. Therefore, faith-based welfare is one factor to consider when planning welfare services.

Quotes:

'' Today, religious organizations are a fixture of the NGOs sector in Lebanon, accounting for 80–90 per cent of the local voluntary sector'' *(Jawad, 2009a, p. 144).*

''the Lebanese government actively encourages local FBOs to offer welfare services'' *(Jawad, 2009a, p. 144).*

'' The spiritual and moral dimensions of human needs were introduced by the FBOs as a result of their basic religious philosophy'' *(Jawad, 2009a, p. 146).*

'' FBOs were primarily 'relieving service users of a burden', meaning that they were merely alleviating the pressures of poverty and deprivation on the lives of poor people as opposed to solving the causes of poverty'' *(Jawad, 2009a, p. 153).*

- *Sectarianism and the Ambiguities of Welfare in Lebanon (Cammett, 2015)*.

Welfare programs started after a historical tradition of religious charity and progressed into institutionalized agencies and social services centers. Sectarian groups might cover a part of the various needs in the Lebanese welfare system. They can offer social and health services to their members and consider this as a positive role in their lives. However, their efforts may preserve or possibly even create those needs by adopting sectarian or particular ways in offering services, thus they may contribute to favor someone on behalf of others. By doing so they may keep the unfair practiced services delivery pattern and force persons and groups to seek help and protection through the safety nets of these sectarian and dominant ruling groups. So, individual and groups will not have the choice to be independent or able to choose other channels such as formal public institutions for safety, protection, and get service. Those various webs for social services provision and security funds affiliated with political and sectarian organizations offering health, education, food, and financial assistance favoring in-group members. Thus, creating and embedding more fragmented welfare system operated by divers' actors seeking to guarantee their portion in the administrative and service arenas to keep controlling their communities and intermediate to access their entitlements. Thus, separating the society along sectarian lines.

Quotes:

''A wide variety of local actors offer basic services and help people to manage lifecycle risks. These range from more formalized institutions, such as private firms and local NGOs, charities, and faith-based organizations, to more informal arrangements, such as the family and friendship networks, middlemen who broker access to services from third party providers, and hometown associations, among others'' *(Cammett, 2015, p. S000)*.

'' sectarian parties emerge out of a long historical tradition of religious charity in the Middle East'' *(Cammett, 2015, p. S000).*

'' some social welfare programs initiated by militias evolved into institutionalized welfare agencies with branch offices and networks of social centers'' *(Cammett, 2015, p. S000).*

'' sectarian parties provide aid for health and educational needs and food and financial assistance, and they act as intermediaries to facilitate access to citizen "entitlements." *(Cammett, 2015, p. S000).*

'' Core activists, who organize and attend meetings and demonstrations and participate in the life of the party, receive the most generous and continuous packages of benefits'' *(Cammett, 2015, p. S000).*

'' they favor in-group members'' *(Cammett, 2015, p. S000).*

'' political parties have incentives to create their own welfare institutions or to take control of public programs through intermediation and brokerage roles. The creation of multiple networks of social provision linked to a different political organization leads to fragmented welfare regimes'' *(Cammett, 2015, p. S000).*

- *Human Ethics and Welfare Particularism: An Exploration of the Social Welfare Regime in Lebanon (Jawad, 2007).*

Ethical duty, moral responsibility, and a sense of shared humanity govern relations between non-state service providers such as the religious welfare organizations and the beneficiaries who are almost members of sects that own and manage these organizations. The various sects have built their education and health institutions to apply and implement their convictions and message through these religious institutions. Sects practicing their activities in aid and services' provision is based on their ethics and commitments toward their sects' members. Sectarian groups seek to encourage correct moral values in society, sustain the unity of the family and guard the unfortunate against deviance. Then, religious welfare acts on an altruistic basis and with good intentions. So, traditionally, historically, and currently religious services provision actions such as charities and philanthropy are coupled with morals, altruism, and ethics.

Quotes:

''Welfare providers in Lebanon seek to influence human behavior and believe fundamentally that their work is based on a sense of common humanity with service users. The religious ethics which guides social welfare practices is based on Islamic or Christian doctrines, depending on the FBO in question'' *(Jawad, 2007, p. 124).*

‘’ welfare actors employ a mixture of principles to make moral decisions. These include individual moral agency, religious tradition, practical reasoning, and affective feeling’’ *(Jawad, 2007, p. 125).*

’’ moral values motivate religious organizations in Lebanon to engage in social welfare, and the relations of ethical responsibility and moral obligation pan out between service providers and service users’’ *(Jawad, 2007, p. 126).*

’’ In the religious context of Lebanese welfare, the mind, and the heart work in synchronicity as they are both attuned to following God’s will and the basic instincts of pure human nature (Fitra in Islam), which is essentially good’’ *(Jawad, 2007, p. 130).*

’’ the problematic of social policy in Lebanon is not merely an issue of underdevelopment. It is also hinged firmly upon historical and cultural’’ *(Jawad, 2007, p. 142).*

- *partisan Activism and Access to Welfare in Lebanon (Cammett, 2011).*

Usually, receiving social aid in Lebanon is coupled with political or religious activism. The weakness of formal institutions and the historical interventions of foreign missionaries and religious agents have introduced and implemented a sectarian system. This system motivates sects and other non-state providers to substitute the formal sector and become central service providers. Thus, man must be either a member in a political party, sect or in a ruling dominant group that offer a safety net and protection. Having a contacts and connections is crucial to ensure protection and to obtain services. Though, in Lebanon the political parties are often associated directly or indirectly to sects, and they complete each other. Political parties use their sects to gain popular support, the sects in turn use their political parties to achieve their religious and authoritarian goals. Diverse levels of political activism are associated with different quality quantities of welfare services. More active followers receive more significant quantities of assistance. Persons supporting a particular political or sectarian party and joining their political or sectarian activities obtain higher and diverse services (education, health, food, financial) than no political or religious active ones. Thus, politics can openly facilitate access to social profits, even those that ought to be citizens’ entitlements.

Quotes:

‘’Where the state is virtually absent or citizen social rights are effectively denied, some types of providers may use political considerations to shape access to basic services’’ *(Cammett, 2011, p. 1)*.

‘’ Declining or underdeveloped public welfare functions leave wide scope for non-state actors such as international or domestic non-governmental organizations (NGOs), religious charities, and even political parties and movements to supply basic social services’’ *(Cammett, 2011, p. 1)*.

’’ The minimal direct state role in assuring social protection has long historical roots. During the Ottoman and colonial mandate periods, religious organizations such as churches, missionary groups, and Muslim organizations were important providers of social assistance and basic services’’ *(Cammett, 2011, p. 4)*.

‘’ Religiosity might also facilitate access to welfare provided by non-state organizations, many of which are linked to religious institutions and may favor those who seem more pious or at least demonstrate a greater commitment to their place of worship by participating in religious events outside of regular services and celebrations’’ *(Cammett, 2011, p. 12)*.

- *Political Context, Organizational Mission, and the Quality of Social Services (Cammett & Şaşmaz, 2017).*

Religious charities and, particularly, sectarian parties must offer higher quality services than other types of non-state providers. They are expected to provide services in an effective and organized way. They are politically associated and may have access to public resources. They have their own welfare organizations and institutions and control their territories and communities. They have their schools and health care centers where their group’s members receive these services. They present their selves as safety nets and guarantors of their members and communities, and they attribute that to their commitment and ethical considerations. They mediate access to social and health services and allocate services after their plans and socio-political intentions. Nevertheless, they are related to the corrupt sectarian power-sharing formula besides the socio-political context that may mediate and affect the performance of different welfare institutions.

Quotes:

‘’ secular NGOs demonstrate an apparent welfare advantage over other provider types in both objective and subjective measures of health quality’’ *(Cammett & Şaşmaz, 2017, p. 120)*.

’’ the political context affects both the objective and subjective quality of care by secular, religious, and political groups through supply and demand processes’’ *(Cammett & Şaşmaz, 2017, p. 120)*.

‘’ citizen dissatisfaction with religious and sectarian organizations, which are often viewed as corrupt and self-serving in polities where they are involved in national politics, may result in inferior evaluations of welfare programs run by these types of groups and, conversely, more favorable assessments of services provided by organizations that explicitly dissociate themselves from political sectarianism’’ *(Cammett & Şaşmaz, 2017, p. 120)*.

- *Informal politics and inequity of access to health care in Lebanon (Chen & Cammett, 2012).*

The path of accessing social services basing on political participation and informal politics at the individual and household levels. The dominant sects and political groups as local ruling agents in their districts mediating access to basic entitlements through affiliated political or religious associations. Then, it is common to be affiliated to these associations and have connections to obtain social and health services. Political and religious agents claim that they offer services for their communities out of good intentions and commitment toward their members. Even though they offer services primarily in their local districts with few exceptions. They may use this practice to gain support by controlling and limiting choices of beneficiaries and forcing them to choose this way to ensure obtaining basic services.so, by doing so they encourage using the informal rather than formal channels to get essential services. They push individuals to choose their connections to sectarian or political leaders to gain services effectively rather than seeking them in the bureaucratic and ineffective state institutions. Further, they market that the public service is inefficient and outdated to direct people to use their informal institutions, and thus they seek to maintain their inefficiency for the sake of their own institutions. The informal service provision’s path adopted by political and sectarian groups that are often associated to each other might produce inequities and impact accessing services. The political parties or sectarian leaders as mediators deciding who can receive those services and strengthen current disparities along socioeconomic lines and undermine the formal institutions.

Quotes:

‘’ political institutions can have an important impact at the individual level through informal practices’’ *(Chen & Cammett, 2012, p. 1).*

‘’ political organizations use access to health care as a strategy to gain and reward support, leading to potentially detrimental effects on the most vulnerable and exacerbating health disparities’’ *(Chen & Cammett, 2012, p. 1).*

‘’ informal practices, whereby access to social services, including health, is used as a deliberate strategy by politicians and political parties to gain and reward support, can affect access to health care and exacerbate health inequalities in the population’’ *(Chen & Cammett, 2012, p. 1).*

After making a thematic analysis of the previous meaningful statements/quotes from the articles, I have arrived at two themes: historical political practices and religious actions, presented in the table below.

Analysis means to divide into pieces or elements. What the researcher examines is composed of certain constituents. The goal is to uncover the message or meaning and find a pattern in the data material (Johannessen et al., 2010).

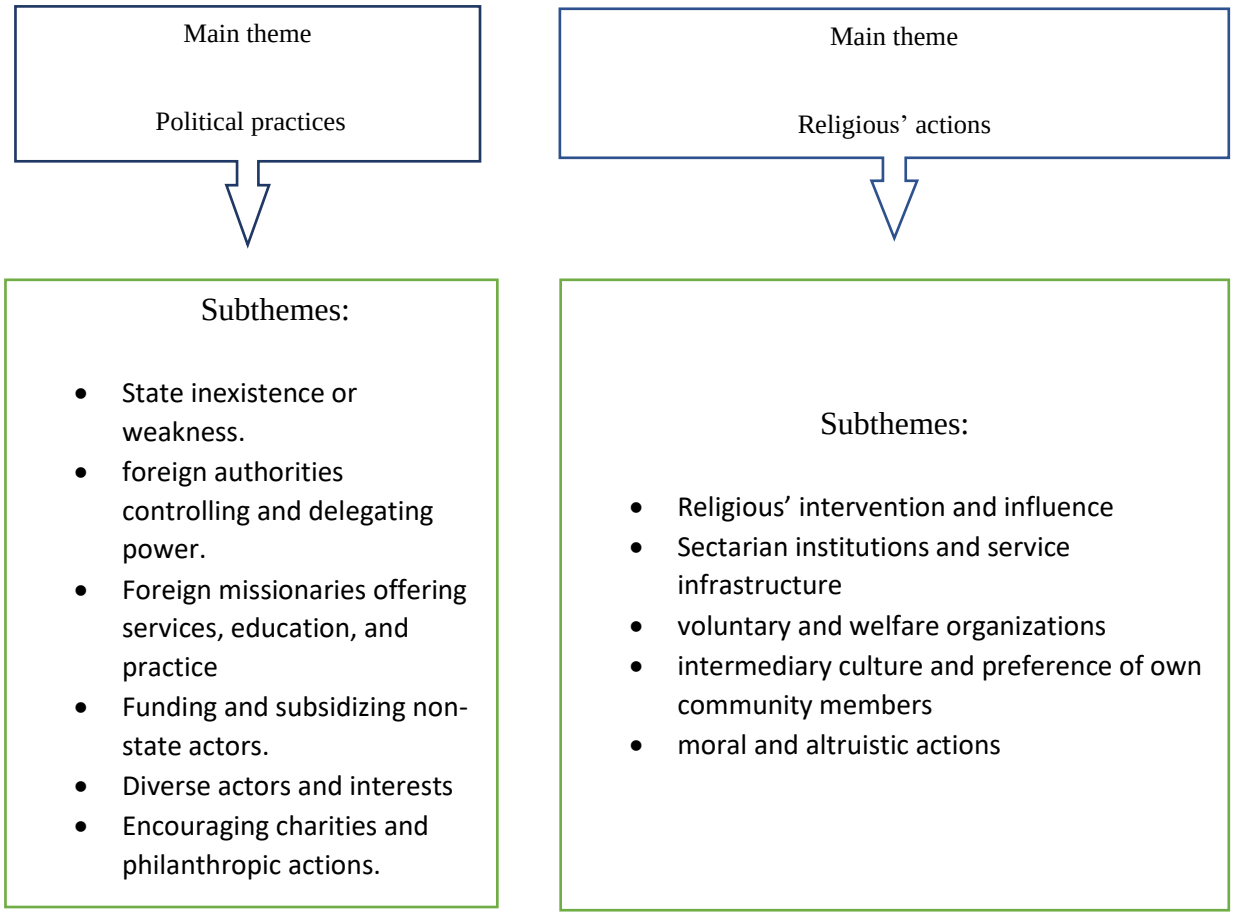
The thematic analysis is a flexible approach that makes it practical and adaptable in different contexts. It allows for describing and sorting data by categories, themes, ideas, and topics and identifying repeated patterns of meaning (Bryman, 2012). The analysis uses a deductive analytical approach for the study based on theoretical or analytic interest in the area (Braun & Clarke, 2006).

The analysis process followed the Braun and Clarke (2006) six phases. It started by deep reading and immersing in the data content, highlighting sentences and words (codes) in the literature that addressed the targeted subject, collating and sorting the gathered codes into themes, and reviewing the themes to check their coherence and eligibility to further analysis. Then, after identifying the candidate themes and naming them to be presented in the analysis. Finally, the analysis can be described, written, and reported.

The interpretation may affect the result in this process, and possible misinterpretation may exist (Torraco, 2005). For the thematic analysis’ process and example, see appendix 5.

4.3 Thematic analysis

An overview of main themes and sub-theme in the thematic analysis.



4.4 Political practices

Welfare services were absent before the western missionaries began. The Ottoman and French authorities had their military medical officers localized in main cities and provided basic health services. Further, Ottoman and French mandatories made a compromise to divide Lebanon into districts based on sectarian and geographical considerations. The historical weakness or inefficiency of the local formal authorities, and lack of control over territory coupled with the

historical interventions and initiatives made by foreign authorities. They divided the country into geographical districts and distributed the governance power among the local components on a sectarian basis. These essential practices and actions led to the appearance of religious welfare organizations offering school education and health care services to their constituents.

Example/statement:

‘’ the political system of the state paralleled with the locally adapted and the decentralized structure of RWOs in Lebanon have contributed to the development of these organizations; these latter in return have grown more powerful than the state’’(Haddad, 2020, p. 1).

The sectarian parties and religious welfare organizations started their activities early in the 18th century. They founded institutions that offered services during the Ottoman and French colonial rule.

Example/statement:

‘’ sectarian parties emerge out of a long historical tradition of religious charity in the Middle East’’ (Cammett, 2015, p. 2).

So, the Lebanon’s welfare system started by the foreign authorities that had control over the essential components of the country. Both ottoman and French authorities encouraged and subsidized a geographical and sectarian division of districts and granted local authorities to local ruling groups that are the dominant sects. The invented power sharing formula based on balance between sects and their shares in the governance system. Thus, introducing and implanting the sectarian political system. These practices and traditions in politics and governance may have enforced the sectarian intentions to control and manage their communities’ affairs. Thus, the various sects took initiatives to provide welfare services such as school education and health care to their community members via their religious welfare organizations and associations. Furthermore, this pattern and the inherited traditions in services provision have continued even after the independence and the building of the state. The dominant ruling groups have implemented

and institutionalized the path taken in delivering services and controlling their communities. Thus, they may like this pattern and work constant to keep it to reserve their material gains besides political and administrative interests at the expense of the state and its institutions.

4.5 Religious' actions

Sects in Lebanon were essential welfare services' providers in the absence or weakness of formal authorities and governance. They defend their involvement in service provision by referring to their existence before the organized state, besides their moral obligation and commitment to aid people. They facilitate services access through their religious institutions, associations, and organizations. They may prefer their community members or those who are more active members. Thus, religious welfare organizations became central partners in the welfare services provision influencing the quality, quantity, and allocation patterns.

Examples/statements:

'' The minimal direct state role in assuring social protection has long historical roots. During the Ottoman and colonial mandate periods, religious organizations such as churches, missionary groups, and Muslim organizations were important providers of social assistance and basic services'' (Cammett, 2011, p. 4).

'' Religiosity might also facilitate access to welfare provided by non-state organizations, many of which are linked to religious institutions and may favor those who seem more pious or at least demonstrate a greater commitment to their place of worship by participating in religious events outside of regular services and celebrations'' (Cammett, 2011, p. 12).

The religious welfare organizations became the leading providers of welfare services over time, and they constitute a crucial component of the local civil society in Lebanon. They provide assorted services substituting the weak formal authorities and filling the need gap. Each of the dominant sects have their own schools and health care centers serving their people primarily.

Examples/ statements:

’’ Religious welfare organizations (RWOS) in Lebanon are the leading providers of the social and humanitarian services that are typically government-provided’’ (Haddad, 2020, p. 1).

’’ Today, religious organizations are a fixture of the NGO sector in Lebanon, accounting for 80–90 per cent of the local voluntary sector’’ (Haddad, 2020, p. 3).

In summary, the religious welfare activities in Lebanon, particularly Muslims and Christian charities and philanthropy, have existed before the formation of the organized state. They have provided social and health services to their communities from their religious ethics, and moral obligations. Though, they may constitute a safety net and protecting a part of persons and groups in the Lebanese society. However, their adoption of sectarian and informal ways to deliver services may have negative role on the rest of the society and weaken the formal institutions. They offered services with support and coordination from their external guardians (Ottoman and French authorities). These external authorities subsidized and encouraged sectarian actions and initiatives to provide education and health services through religious welfare organizations and institutions. Thus, the various dominant sects and their affiliated organizations became vital service providers with their infrastructure and participated in social policy and welfare services administration.

4.6 Summary of the articles and their findings

The seven included articles have addressed the welfare services emergence and history. They presented the historical political practices of foreign authorities in coordination with local non-state/religious actors. And they addressed the religions' intervention and involvement in welfare services provision. The articles addressed the political practices and religious action’s impact on the welfare system’s rise and development. Also, their contribution to the start, implementation, evolution, and the path taken in the school education and health care services provision.

The included studies indicate the historical political practices of the Ottoman and French authorities who controlled Lebanon over an extended time. They established a political and organizational order based on sectarian lines and delegated power to the dominant local ruling groups that are religious components (Muslims and Christians sects). Moreover, they granted them supported authorities to manage their socio-political affairs in their communities. On the other side, the various Christian and Muslim sects founded and used their religious welfare organizations to provide education and health care services in their communities. Consequently, the sectarian

system resulted of the prementioned practices who made sects become central providers of welfare services. Hence, this may have been the main factor back the earlier and recent sectarian allocation's path of school education and health care services. The sectarian welfare organizations favor their members and distribute services among the Lebanese citizens out of their communal and sectarian belonging, not from their citizenship. This pattern in practicing politics and religious actions over long time have resulted in the current taken path to allocate and provide education and health care service and impacted its outcomes. This can be referred as path dependency which we can understand with Pierson (2004) by the progressive paths that are intrinsically challenging to change. So, actions occurred in a previous time will influence the potential effects of a series of actions happening at a later time.

5.0 DISCUSSIONS

In this literature study, the purpose has been to systematize current knowledge about the welfare services' emergence and progress in Lebanon. The selected studies were thematically analyzed according to the problem/research question. The main emphasis in the discussion will be on the historical politics and organizational practices of local and foreign actors besides the sectarian intervention and involvement in the school education and health care services provision. Further, the discussion will display the contribution of the political practices and sectarian interventions to the current path of allocation and provision of education and health services.

5.1 political practices

The analyzed literature revealed that Lebanon's welfare system dates to the second part of the 18th and the start of the 19th centuries when the Ottoman empire and the French colony controlled the area. They agreed that the historically and currently taken political actions and decisions besides the geographical division of the country have played a significant role in the implementation and shape of the current welfare system. Subsequently, they actively impacted the path of providing welfare services including school education and health care services.

The French and Ottoman mandatories have governed Lebanon and made a compromise to split Lebanon into geographical districts that fits the distribution of sects on these areas. Shaping the areas according to the majority of the population inhabiting this area. Areas with Muslim majority get their districts, and areas with Christian majority get theirs. Nevertheless, in places like in mount Lebanon there was mixed areas of both sects where it was impossible to create homogenous districts. These districts formed the origin for tensions and conflicts between the different inhabitant sects. The geographical division started from Emirate early in the 18th century to Mutasarrifiya and Qaim Maqamiya, to the independence and establishment of the great Lebanon and its independence from the French in 1943. These two foreign authorities have controlled and governed Lebanon over a long time (Makdisi, 2003). The two key religious components in Lebanon are the Muslims and Christians' sects (Sunni, Orthodox, Catholic, Maronite, Druze, and Shia). They disagree on the governing style of the state and services provision patterns. They seek to apply and practice governance and management of their communities' socio-political affairs according to their affiliation to various agendas, regional and international countries, religious, ideological, and cultural references who play the guardians role of these components.

Subsequently, the discrepancy between the ideological, cultural, and practical characteristics of these sects, have contributed to tensions and conflicts between them. These conflicts urged the guardian authorities (French and Ottoman) to come to a compromise to apply a power sharing formula dividing the managerial authority among the dominant sects to reduce these tensions and conflicts and secure their coexistence (Cammett, 2014). The power sharing formula delegated the seats of administrative councils and divided them among the geo-sectarian lines by reserving quotas for each sect to control and manage their socio-political affairs in their communities. Thus, the confessional identity was the basis to allow each community to manage its affairs and fueled the rise of informal institutions. That encompass agents and actors outside the sphere of the state's official institutions such as families, sects, political parties, and civil society organizations who substituted the formal role of the state's institutions. Though, they justify their interventions in services provision to the absence of the formal authority. Sen and Mehio-Sibai (2004) in their article write that informal agency had mediated welfare services provision as fragmented components in the society during the Ottoman and French mandates. Applying the adopted power sharing formula and governance practice have been since the presence of foreign authorities and even after the independence. out of what mentioned before, we can see that the external and internal partners together played a key role in the application of these governance and power sharing formulas. The external mandatories developed this formula while the local dominant partners/sects applied, implemented, and institutionalized it and the inherited pattern without making efforts to change or update them. Even more, sects and dominant ruling groups have embedded the consensual system and governance formula by making compromises and agreements such as the national pact in 1943 right after the independence, and the Taiif agreement in 1990 which ended the civil war that lasted from 1975 to 1989. Consequently, building and implementing the sectarian system through political sectarianism and practices that enforce the sects' volume, presence, and role. This system granting them quotas in the political institutions (Parliament, government, and presidency of the state) on behalf of the official authority/state or government. Furthermore, the dominant ruling groups took violent actions by military and arms actions to prove their power, existence, volume, and control over their territories. Thus, their legitimacy to keep control and manage services allocation in their communities (Makdisi, 2003).

The foundation of the non-state organizations, such as religious welfare organizations (RWOs) and faith-based organizations (FBOs), flourished after issuing the Ottoman associations' law in 1918. They continued to grow and expand all the way until today, they became the most active multi-faith non-state organizations in the region and become more powerful than the formal authority in Lebanon. This flourishment was fueled by the religious nature of the Lebanese society and the historical composition of the political authority (Haddad, 2020). Both Ottoman and French practices focused on charitable initiatives and deployed religions and their sects to provision welfare services. Cammett (2011) claims that Ottoman used to subsidize Muslims through their religious institutions, local dominant elites of ethnic groups, clerics, and political leaders. These in turn intermediated to deliver subsidized social and health services for their in-group members. On the other side Jawad (2002) claims that the French colony has significantly impacted the state administration, including social and health services provision's pattern by applying the French model in Lebanon. They centralized ministries and governmental offices and implemented the bureaucracy. Further, the French mandatory supported Christian welfare services (health and education) through religious institutions, churches, clerics, elite families, and political leaders. In addition, the local authorities by its weakness and absence in services provision may have played a role in their emergence by encouraging them to provide welfare services to their communities (Jawad, 2009a). Hence, non-state religious organizations and non-state services providers supported by the Ottoman and French mandatories and indirectly by the formal local authority due to the weak state capacity and its irregular diffusion of national territories. Consequently, the various NSPs and NGOs together have launched, managed, and implemented the sectarian welfare system (Salti et al., 2010). Nevertheless, the various non-state providers (NSPs) have constructed charitable and sectarian networks acting outside the public sector aiming to deliver or facilitate assorted services' access to their community members. Such a practice may positively and negatively affect individual and collective levels. Further, this may weaken the state's institutions capacity and implement the sectarian system (Cammett, 2015). Jawad (2009a) argues that charitable actions and initiatives may have played a vital role in helping people. They provide a part of their basic needs and protection. NSPs offer social and health services in the absence or weakness of formal authorities and governance that could offer these services to the population. However, Cammett (2011) in her article writes that these initiatives may have played a negative role when they have focused on their communities and members by favoring them and allocating

services on a sectarian and political basis. This practice may contribute to discrimination and exclusion of people who are not members or do not affiliate with the community. Even more, the more active members in a sect or a political party may get higher and more diverse services. In contrast, inactive members or those who do not participate in sectarian or political activities may receive lower and fewer services. This practice may have pressed the persons and groups to seek contacts and connections to political and sectarian leaders to ensure their protection and services access (Cammett, 2011)**.**

The sectarian organizations affiliated with the dominant sects and ruling groups as central partners in the welfare system and politics may have emerged due to the historical sectarian politics. All the historical political practices starting from the geographical division of the Lebanese territory to the power sharing among the dominant ruling groups, have conducted to the current shape of the sectarian system in Lebanon. Even tough, the dominant sects and ruling groups maintain political sectarianism in the state. They revive the historic religious institutions and the inherited political traditions from the ottoman and French mandatories. Furthermore, they do not take any reform actions to change to another governance system or update to a more appropriate one. Thus, they may have contributed to establishing political sectarianism and politicizing the allocation of social benefits. They dominate informal channels that mediate access to public benefits in a discriminatory pattern, through partisan and religious shapes (Cammett, 2015). However, Salti et al. (2010) claim that non-state religious organizations and non-state services providers received support from the Ottoman and French mandatories. This support responds to the absence or the weakness of the state's capacity and its irregular diffusion of national territories. Consequently, they have launched, managed, and implemented the sectarian welfare system that may have covered a part of the need in the welfare system and substituted the state's role. The current path in practicing power sharing and governance style is a continuing path of the old inherited one from the ottoman and French mandatories. This may be referred to the dependency path of Pierson (2004)So, the, where the previous actions impact the following ones by implementing them and make it difficult to change, something that influences the outcomes of the taken actions.

The welfare system and welfare services emerged between the 18th and 19th centuries influenced by the external authorities (Ottoman and French mandatories) in cooperation with local agents who represent the various dominant sects and ruling groups. The various historical political actions, such as geographical division and power sharing patterns based on sectarian and political lines.

This pattern may have influenced the rise, implementation, and development of the welfare system in general and the path taken in providing education and health care services. The literature agrees upon the historical political circumstances and conditions behind the emergence and development of the welfare services. However, a disagreement on the factors behind the flourishment of the non-state providers and sectarian welfare organizations. Whether the state's absence, weakness, and missing control on its territories produced their rise, development, and dominance, or the diverse historical political practices implemented and embedded them as key partners in the welfare system and service's provision, thus, weakened and marginalized the states institutions' role. Jawad (2009b) claims that state's absence, weakness, and missing control on its territories produced their rise, development, and dominance. On the other side, (Cammett & MacLean, 2014) accuse the diverse historical political practices implemented and embedded the NSPs and religious organizations as key partners in the welfare system and service's provision, thus, weakened, marginalized, and hampered the rise of the states institutions' role.

5.2 Religious' actions

The mentioned literature addressed the role of religious organizations providing welfare services even before the state or the formal authority's establishment. Thought, their role has occurred and continued in all the phases: before independence from the 18th century to the start of the 19th century; after independence in 1943 when Lebanon gets its independence from the French mandate; and after the end of the civil war in 1990 to the present. They still exist and offer their social and health services, and they became bigger with more institutions and broader infrastructure. Nevertheless, the literature disagreed on the motives and factors behind the involvement of religious welfare organizations in the provision of social and health services. Jawad (2008) claims that religious interventions and initiatives in providing welfare services have occurred because of the religions' moral obligation and altruistic nature. However, Cammett and MacLean (2014) and Haddad (2020) claim that when discussing agents' intervention in services provision, we should consider the political, social, and economic factors. These factors may have influenced the providers' choices and intentions.

Religions in Lebanon have historically existed and practiced their religious welfare services, which preceded the state's existence. They take various actions and initiatives to provide social

and health services for their people. Jawad (2008) claims that they have their diverse arrangements, schemes, old policy types and religious welfare institutions, such as WAQF (endowments) and ZAKAT (an obligatory 2.5% tax levied on assets). Religious organizations offer welfare services based on faith, values, and following God's will besides their ethics and moral obligation. These principles motivate them to engage in welfare services from a charitable, altruistic activity, emotional bonding, and solidarity point of view, not from a political machine view as in states and formal systems (Jawad, 2009a). The various sects have practiced these actions and old schemes. Jawad (2008) stating that they attribute their involvement and existence to their moral obligation, following the gods' will to help and being available for those who need any help. Both French and Ottoman missionaries have offered education and health care services to the local sects through churches, mosques, elites, political parties, and non-state organizations. These organizations were founded and operated by local cooperation partners who used to be the dominant sects and religious groups. Sectarian organizations and other non-state services' providers have built their infrastructure that encompasses schools, health care institutions, and social services offices and branches in their politically and geographically controlled districts and areas (Makdisi, 2003). Nevertheless, Haddad (2020) indicate to political intentions and power-sharing agendas, not just moral and altruistic obligations, may have impacted the emergence of the non-state organizations; thus, education and health care services provision. The confessional power-sharing system divides power and public occupations among the fragmented sectarian components. This practice may encourage the sectarian groups to provide services for their in-group members through religious welfare organizations to keep control of their territories and communities.

This historical practice may have given the sects motives and power to keep and maintain the inherited power-sharing formula that granted them their popular presentation’s quotas in the system and secured their continuity. Sects maintain political sectarianism by occupying public offices and manipulating public resources’ allocation to their service agencies and beneficiaries. Also, they dominate the informal channels to play the guarantor role and mediate services' access and decide who can benefit from them. Subsequently, they may use this to keep control and power over their territories and communities to exchange these services for political benefits (Cammett, 2011).

Practicing the service provision and help on this basis may have positive and negative sides. On the one side, this may offer a part of the needed help and alleviate the poverty or improve the social and health status of groups in the society. On the other side, this may contribute to more division and differences among the people just because they neither affiliate with one of the providing sects nor one of their welfare programs or policies. Thus, providing welfare services on sectarian and political considerations, not on a general basis, will result in a deviated path that does not offer the same chance for everyone to gain and benefit from the public services. Though, Jawad (2009b) claims that religious actions, interventions, and initiatives in welfare services provision have occurred before the appearance of the modern state and have played a positive role in providing diverse services. Therefore, she writes that this does not threat the formal institutions' role as they were weak and remained regardless of the religious welfare actions. Although religious and sectarian parties engaged in the welfare market, laying on sectarian identity and membership in religious communities or sectarian parties. They may provide their members with the needed safety net to deal with health or social issues. However, this may have contributed to preferring in-group members and consolidated social inequalities. They favor those with high activity or participation in these communities or parties, practicing the intermediator or guarantor roles and encouraging social division along religious and partisan lines. Thus, promoting the welfare service's hyper politicization (Cammett, 2015).

This historical pattern of religious intervention in welfare services provision may have built a sophisticated system. The pattern linked essential welfare services such as education and health to sectarian agents and dominant local ruling groups. They will hardly accept hand over these services to the state or governmental institutions to offer and allocate these services. However, a dependence relation may occur between non-state providers, beneficiaries, and the state. The withdraw or retraction of any of the active non-state welfare service providers may create a vacuum in the system as it was a key partner for a long time. Thus, it will impact the beneficiaries by missing the possibility to get services through weakening the implemented informal sectors agencies. Nevertheless, this may provide an occasion to enforce and use the formal institutions and authorities that must complete their responsibility toward all citizens, not just a part of them.

In summary, all the historical and current religious actions in providing welfare services from the 18th century to the present have played a crucial role in the emergence of welfare services and impacted the adopted provision path of school and health care services. The active religious welfare actions made the access criteria to the social and health services to be sectarian that allocate services on the base of sectarian background.

6.0 CONCLUSION

This review aimed to examine the emergence and development of welfare services provision in Lebanon by focusing on the foreign authorities' historical political and organizational practices. The Ottoman and French authorities have controlled the country from the 18th to the 19th century where Lebanon became an independent state in 1943. Foreign authorities organized and divided the country geographically and delegated power to local ruling groups, the dominant local sects. Also, the review focused on the religious actions and interventions' role in the implementation, evolvement, and allocation path of welfare services such as school education and health care services.

Choosing this topic is motivated by the crucial role and impact of the political and religious interventions in the welfare services' provision over a long time. These interventions started even before the building of the current Lebanese state and continued in practice all the way until today. Moreover, understanding the basis of welfare service's emergence and evolution can help plan and estimate the appropriate means when updating or developing the welfare system.

The review started from the theory that the historical political practices and religious interventions in the welfare system's implementation, shape, and performance. Thus, impacting welfare services' provision, subsequently influencing the school education and health care services allocation's path.

Obtaining school education and health care services in Lebanon is by sectarian and political lines. Persons and groups can have better access to a better school and healthcare institutions if they are members of the dominant sects and political parties or have good connections to political and sectarian leaders that intermediate for them to access these services.

A literature review was conducted to gather relevant data on the topic to answer the research question. This was followed by a conducted thematic analysis to analyze the candidate studies' content.

The included literature agreed that the political and religious circumstances affected the emergence and development of the welfare system. Further, they supported the paper's hypothesis that political and organizational actions of foreign authorities coupled with religious interventions in service provision have affected the emergence of welfare services and the allocation pattern of school education and health care services in Lebanon.

The study concluded that political practices such as governance and power-sharing formulas invented and implemented by the external mandatories of Ottoman and French colonies. They have occupied and governed Lebanon in cooperation with local dominant groups. Also, the organizational practices and decisions made by these mandatories by dividing the Lebanese territories into districts and areas after sectarian and geographical considerations.

Further, religious actions and initiatives such as building welfare institutions and services network and practicing sectarian politics to maintain their volume that guarantee their political representation. They control service provision allocation, thus keeping control over their communities for distinct reasons. These various religious practices combined with the previously mentioned political actions have contributed to the current welfare system's implementation, evolution, and performance. Consequently, affecting the adopted path in the provision of school education and health care services.

The religious organizations who are often associated with political parties govern and control the welfare system. The religious welfare organizations as non-state providers lead the allocation and provision of welfare services through having their schools, health care institutions, and social services centers. Thus, sectarian, and political agents participate actively in the planning and applying of the local welfare policy.

The adopted path in services provision is a sophisticated design because of the involvement of multiple agents. It has become like that because of the combined historical, political, and sectarian factors that interacted over a long time and continued in the same way until the present. Also, the weakness or absence of the formal authorities may indirectly participate in this path. Thus, this path is an outcome of various complicated factors that interact over long time to produce it.

The adopted services provision pattern is based on sectarian and political considerations that favor the community members of the local dominant sectarian and political groups. The more active, strongly affiliated members with their sects or political parties can receive higher and more varied services than less active members. This pattern led to a deviation in service provision allocation because not all members of the society have the same chance, access to gain, and enjoy essential services.

Further, this pattern may produce and implement inequality among individuals and groups in the same society. It emphasizes sectarian and political identities and neglects other citizens who lack connections or membership in one of the dominant sects or political parties.

Although, the studies agreed on the political and religious intervention in services provision and their role in the emergence and development of the welfare system in Lebanon. However, they disagreed on the motivations behind the involvement of religious welfare organizations in services provision. Further, they disagreed on the sectarian role in the path taken in providing school and health care services, and its role in weakening of the formal institutions.

6.1 Implication for practice and further research

This paper may form a step toward future research and studies that might focus on the incentives that can reassure the sects, political parties, non-state providers or any other ruling groups to change their practices and the path taken in school education and health care services provision.

Future research may display a clean comparison between the Lebanese welfare system and the adopted path in the allocation of education and health care services with another welfare system in the world. A system who succeeded to operate the education and health services' provision on a general basis that covers all citizens equally. Also, it may focus on the success and failure factors that may have advanced or hampered the application of the compared systems. Furthermore, future studies may focus on how non-state services providers may progressively accept handing service provision over to the formal authority to provide equal, sustainable, and efficient services for everyone based on citizenship, not political or sectarian considerations.

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Attachments

Appendix 1: overview over the search process in Embase

Appendix 2: overview over the search process in Medline

Appendix 3: overview over the search process in Web of Science

Appendix 4: table of excluded studies

Appendix 5: example of thematic analysis

Appendix 6: checklist for thematic analysis of a qualitative study:

Religious Welfare Organizations, Citizenship, and the State in Lebanon

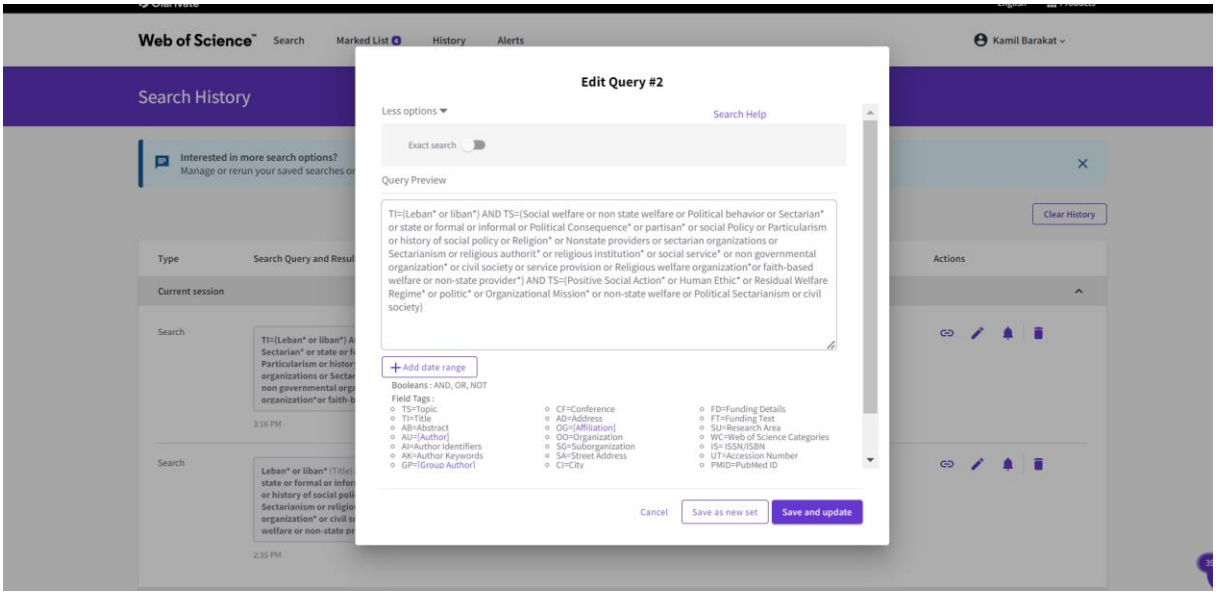
Appendix 1: Overview over the search process in Embase

#	Searches	Results
1	(leban* or liban*).mp. [mp=title, abstract, heading word, drug trade name, original title, device manufacturer, drug manufacturer, device trade name, keyword heading word, floating subheading word, candidate term word]	10164
2	(Social welfare or non-state welfare or Political behavior or Sectarian* or state or formal or informal or Political Consequence* or partisan* or social Policy or Particularism or history of social policy or Religion* or Nonstate providers or sectarian organizations or Sectarianism or religious authorit* or religious institution* or social service* or non-governmental organization* or civil society or service provision or Religious welfare organization*or faith-based welfare or non-state provider*).mp. [mp=title, abstract, heading word, drug trade name, original title, device manufacturer, drug manufacturer, device trade name, keyword heading word, floating subheading word, candidate term word]	1620437
3	(Positive Social Action* or Human Ethic* or Residual Welfare Regime* or politic* or Organizational Mission* or non-state welfare or Political Sectarianism or civil society).mp. [mp=title, abstract, heading word, drug trade name, original title, device manufacturer, drug manufacturer, device trade name, keyword heading word, floating subheading word, candidate term word]	127226
4	1 and 2 and 3	61

Appendix 2: Overview over the search process in Medline

#	Searches	Results
1	(Leban* or liban*).mp. [mp=title, abstract, original title, name of substance word, subject heading word, floating sub-heading word, keyword heading word, organism supplementary concept word, protocol supplementary concept word, rare disease supplementary concept word, unique identifier, synonyms]	8242
2	(Social welfare or non-state welfare or Political behavior or Sectarian* or state or formal or informal or Political Consequence* or partisan* or social Policy or Particularism or history of social policy or Religion* or Nonstate providers or sectarian organizations or Sectarianism or religious authorit* or religious institution* or social service* or non-governmental organization* or civil society or service provision or Religious welfare organization*or faith-based welfare or non-state provider*).mp. [mp=title, abstract, original title, name of substance word, subject heading word, floating sub-heading word, keyword heading word, organism supplementary concept word, protocol supplementary concept word, rare disease supplementary concept word, unique identifier, synonyms]	1383304
3	(Positive Social Action* or Human Ethic* or Residual Welfare Regime* or politic* or Organizational Mission* or non-state welfare or Political Sectarianism or civil society).mp. [mp=title, abstract, original title, name of substance word, subject heading word, floating sub-heading word, keyword heading word, organism supplementary concept word, protocol supplementary concept word, rare disease supplementary concept word, unique identifier, synonyms]	106357
4	1 and 2 and 3	67

Appendix 3: Overview over the search process in Web of Science



Appendix 4: Excluded studies

Author, journal,	Title	Method	Exclusion's reasoning

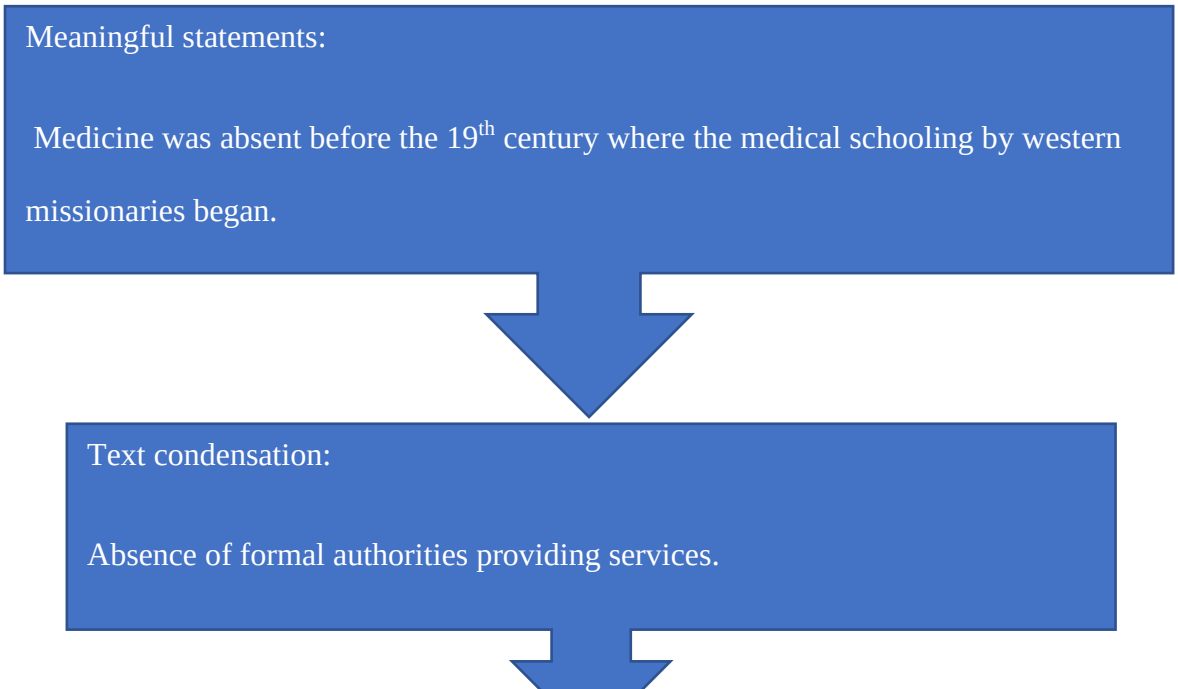
country and year.			
Melani Cammet, 2014, Cornell University Press	Compassionate communalism: welfare and sectarianism in Lebanon	Book chapter	Does not cover the targeted topics directly, it covers the welfare regime in general.
A ABYAD, 1994, Britain, Oxford university.	The Lebanese Health Care System.	qualitative	Treating the welfare regime in different periods and does not focus on the historical patterns or religion's role.
Kronfol, Nabil M. Bashshur, Rashid , Autumn1989, England.	Lebanon's Health Care Policy: A Case Study in the Evolution of a Health System Under Stress	Qualitative/ review	Focusing on the welfare system after the independence time
Van Lerberghe, W Ammar, W El Rashidi, R Sales, A MECHBAL, A , 1997, Oxford	Reform follows failure: Unregulated private care in Lebanon	Quantitative	Treating the private care evolution and the consequences of different causes to public sector weakness.

N.M. Kronfol, 2006, Beirut	Rebuilding of the Lebanese health care system: health sector reforms	Quantitative	Treating the initiatives to rebuild the health sector after independence and civil war. Does not relate to whether historical practices or religious role
Kasturi Sen and Abla Mehio-Sibai. 2004, Los Angeles, CA	transnational capital and confessional politics: the paradox of the health care system in Lebanon	Quantitative	had more focus on financing health services and neoliberal strategy and market mechanism in service provision
Jade Khalife, Nadwa Rafeh, Jihad Makouk, Fadi El-Jardali, Bjorn Ekman, Nabil Kronfol, Ghassan Hamadeh & Walid Ammar. 2017, Taylor & Francis, online	Hospital Contracting Reforms, The Lebanese Ministry of Public Health Experience	Mix methods	It addressed the financing mechanisms between the state and the private hospitals, fees for services and flat rate fees as examples. Irrelevant for the selected topic.
Walid Ammar, 2003, Beirut	Health System and Reform in Lebanon	Mix methods	the book addressed the different reform steps on various levels in social and health services provision, besides financing, administration, and development. It does not correlate historical patterns to religious actions and initiatives.
Rana Jawad, 2002, University of Nottingham, UK	A Profile of Social Welfare in Lebanon, Assessing the	Qualitative	is more about poverty and social dynamics. Not directly related to the targeted topic.

	Implications for Social Development Policy		
Sen, Kasturi and Sibai, Abla (2004), Los Angeles, CA	Health care financing and delivery in the context of conflict and crisis, the case of Lebanon	Quantitative	Focusing on health financing mechanisms besides other central factors hindering, population's access to the health sector. Does not approach whether historical or sectarian issues.
World Health Organization. Regional Office for the Eastern Mediterranean. Lebanon 2012	Health system profile 2012	Quantitative report	an annual report by the WHO. Encompassing various aspects in health sector. does not include any historical revision or sectarian assessment in the welfare system.
Rana Jawad 2009. Bristol University Press	social welfare and religion in the middle east: a Lebanese perspective	Book chapter	A book chapter treating the religions' role in the social policy development and recommend that any coming update of social policy, must involve religions.
John Nagle and Mary-Alice Clancy on 07 March 2019. University of Aberdeen, Aberdeen, Scotland	Power-sharing after Civil War: Thirty Years since Lebanon's Taif Agreement	Case study	a case study about the power-sharing formula, and how the power is divided between the main components. How they administrate the state offices. however, it does not focus on the studied issues.
Nisreen Salti and Jad Chaaban, 2010.	The role of sectarianism in the allocation of	Quantitative	is about the allocation of social services and how the sects involve in this process, but it treats the subject from after the independence and civil war not before the

international Journal of Middle East Studies Cambridge University Press	public expenditure in post-war Lebanon		independence, thus, irrelevant to show any information about history and religions.
Walid Ammar. 2009. World Health Organization, Regional Office for the Eastern Mediterranean	Health Beyond Politics	Book	The book summarizes the health system in Lebanon, how it was built up, and mention the health policies interacting with different stakeholders and conflicting interests. Does not cover the aimed issued directly.
Rana Jawad university of warwick, UK. 2008.	possibilities of Positive Social Action in the Middle East	Book's review	Mentions several factors supporting the religious welfare and ancient actions that can be built on to make a better policy.

Appendix 5: Example of thematic analysis



Example of thematic analysis of the process from identification of delimiting meaningful statements as text is condensed and after coding placed in a subcategory which in turn is placed in one of the main categories.

Appendix 6: Checklist for studies' quality

Sjekkliste for vurdering av en kvalitativ studie

Hvordan brukes sjekklisten?

Sjekklisten består av tre deler:

A: Innledende vurdering

B: Hva forteller resultatene?

C: Kan resultatene være til hjelp i praksis?

I hver del finner du underspørsmål og tips som hjelper deg å svare. For hvert av underspørsmålene skal du krysse av for «ja», «nei» eller «uklart». Valget «uklart» kan også omfatte «delvis».

Om sjekklisten

Sjekklisten er inspirert av: Critical Appraisal Skills Programme (2018). *CASP checklist:10 questions to help you make sense of qualitative research*. https://casp-uk.net/casp-tools-checklists/ Hentet: 15.10.2020.

Sjekklisten er laget som et pedagogisk verktøy for å lære kritisk vurdering av vitenskapelige artikler. Hvis du skal skrive en systematisk oversikt eller kritisk vurdere artikler som del av et forskningsprosjekt, anbefaler vi andre typer sjekklister. Se www.helsebiblioteket.no/kunnskapsbasert-praksis/kritisk-vurdering/sjekklister

Har du spørsmål om, eller forslag til forbedring av sjekklisten? Send e-post til Redaksjonen@kunnskapsbasertpraksis.no.

Kritisk vurdering av:

[Religious Welfare Organizations, Citizenship, and the State in Lebanon]

Del A: Innledende vurdering

Er formålet med studien klart formulert?

☒ Ja – ☐ Nei – ☐ Uklart

Tips:

Hva ville forskerne finne svar på (problemstilling)?

Hvorfor ville de finne svar på det?

Er problemstillingen relevant?

Kommentar:

Er kvalitativ metode hensiktsmessig for å få svar på problemstillingen?

☒ Ja – ☐ Nei – ☐ Uklart

Tips:

Har studien som mål å forstå og belyse, eller beskrive fenomen, erfaringer eller opplevelser?

Kommentar:

Er utformingen av studien hensiktsmessig for å finne svar på problemstillingen?

☐ Ja – ☐ Nei – ☒ Uklart

Tips:

Er valg av forskningsdesign begrunnet? Har forfatterne diskutert hvordan de bestemte hvilken metode de skulle bruke?

Kommentar:

Er utvalgsstrategien hensiktsmessig for å besvare problemstillingen?

☒ Ja – ☐ Nei – ☒ Uklart

Tips: Når man bruker for eksempel strategiske utvalg er målet å dekke antatt relevante sosiale roller og perspektiver. De enhetene som skal kaste lys over disse perspektivene er vanligvis mennesker, men kan også være begivenheter, sosiale situasjoner eller dokumenter. Enhetene kan bli valgt fordi de er typiske eller atypiske, fordi de har bestemte forbindelser med hverandre, eller i noen tilfeller rett og slett fordi de er tilgjengelige.

Er det gjort rede for hvem som ble valgt ut og hvorfor?

Er det gjort rede for hvordan de ble valgt ut (utvalgsstrategi)?

Er det diskusjon omkring utvalget, for eksempel hvorfor noen valgte å ikke delta?

Er det begrunnet hvorfor akkurat disse deltagerne ble valgt?

Er karakteristika ved utvalget beskrevet (for eksempel kjønn, alder og sosioøkonomisk status)?

Kommentar:

Ble dataene samlet inn på en slik måte at problemstillingen ble besvart?

☒ Ja – ☐ Nei – ☐ Uklart

Tips: Datainnsamlingen må være omfattende nok i både bredden (typen observasjoner) og i dybden (graden av observasjoner) om den skal kunne støtte og generere fortolkninger.

Ble valg av setting for datainnsamlingen begrunnet?

Går det klart frem hvilke metoder som ble valgt for å samle inn data? For eksempel intervjuer (semistrukturerte dybdeintervjuer, fokusgrupper), feltstudier (deltagende eller ikke-deltagende observasjon), dokumentanalyse, og er det begrunnet hvorfor disse metodene ble valgt?

Er måten dataene ble samlet inn på beskrevet, for eksempel beskrivelse av intervjuguide?

Er metoden endret i løpet av studien? I så fall, har forfatterne forklart hvordan og hvorfor?

Går det klart frem hvilken form dataene har (for eksempel lydopptak, video og notater)?

Har forskerne diskutert metning av data?

Kommentar:

Ble det gjort rede for bakgrunnsforhold som kan ha påvirket fortolkningen av data?

☒ Ja – ☐ Nei – ☐ Uklart

Tips:

Har forskeren vurdert sin egen rolle, mulig forutinntatthet og påvirkning på:

utforming av problemstilling

datainnsamling inkludert utvalgsstrategi og valg av setting

analyse og hvilke funn som presenteres

På hvilken måte har forskeren gjort endringer i utforming av studien på bakgrunn av innspill og funn underveis i forskningsprosessen?

Kommentar:

Er etiske forhold vurdert?

☒ Ja – ☐ Nei – ☐ Uklart

Tips:

Er det beskrevet i detalj hvordan forskningen ble forklart til deltagerne for å vurdere om etiske standarder ble opprettholdt?

Diskuterer forskerne etiske problemstillinger som ble avdekket underveis i studien? Dette kan for eksempel være knyttet til informert samtykke eller fortrolighet, eller håndtering av hvordan deltagerne ble påvirket av det å være med i studien.

Dersom relevant, ble studien forelagt etisk komité?

Kommentar:

Går det klart frem hvordan analysen ble gjennomført? Er fortolkningen av data forståelig, tydelig og rimelig?

☒ Ja – ☐ Nei – ☐ Uklart

Tips: En vanlig tilnærmingsmåte ved analyse av kvalitative data er såkalt innholdsanalyse, hvor mønstre i data blir identifisert og kategorisert.

Er det gjort rede for hvilken type analyse som er brukt, for eksempel grounded theory, fenomenologisk analyse, etc.?

Er det gjort rede for hvordan analysen ble gjennomført, for eksempel de ulike trinnene i analysen?

Ser du en klar sammenheng mellom innsamlede data, for eksempel sitater og kategoriene som forskerne har kommet frem til?

Er tilstrekkelige data presentert for å underbygge funnene? I hvilken grad er motstridende data tatt med i analysen?

Kommentar:

Basert på svarene dine på punkt 1–8 over, mener du at resultatene fra denne studien er til å stole på?

☒ Ja – ☐ Nei – ☐ Uklart

Del B: Hva er resultatene?

Er funnene klart presentert?

☒ Ja – ☐ Nei – ☐ Uklart

Tips: Kategoriene eller mønstrene som ble identifisert i løpet av analysen kan styrkes ved å se om lignende mønstre blir identifisert gjennom andre kilder. For eksempel ved å diskutere foreløpige slutninger med studieobjektene, be en annen forsker gjennomgå materialet, eller få lignende inntrykk fra andre kilder. Det er sjeldent at forskjellige kilder gir helt like uttrykk. Slike forskjeller bør imidlertid forklares.

Er det gjort forsøk på å trekke inn andre kilder for å vurdere eller underbygge funnene?

Er det tilstrekkelig diskusjon om funnene både for og imot forskernes argumenter?

Har forskerne diskutert funnenes troverdighet (for eksempel triangulering, respondentvalidering, at flere enn en har gjort analysen)?

Er funnene diskutert opp mot den opprinnelige problemstillingen?

Kommentar:

Del C: Kan resultatene være til hjelp i praksis?

Hvor nyttige er funnene fra denne studien?

Tips: Målet med kvalitativ forskning er ikke å sannsynliggjøre at resultatene kan generaliseres til en bredere befolkning. I stedet kan resultatene være overførbare eller gi grunnlag for modeller som kan brukes til å prøve å forstå lignende grupper eller fenomen.

Har forskerne diskutert studiens bidrag med hensyn til eksisterende kunnskap og forståelse, vurderer de for eksempel funnene opp mot dagens praksis eller relevant forskningsbasert litteratur? ja

Har studien avdekket behov for ny forskning? Ja

Har forskerne diskutert om, og eventuelt hvordan, funnene kan overføres til andre populasjoner eller andre måter forskningen kan brukes på? Ja

Kommentar: