Section 1

Introduction

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Introduction to the Toolkit and the Policy Process

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Introduction to the Toolkit and the Policy Process

The Political Process and Health Sector Reform¹

Many Latin American countries have begun to reform their health sectors. In these countries, a lot of debate, analysis, and assistance has been directed toward the technical content of the reforms. Often, the government determines the direction and outline of health sector reforms. Once there is concurrence on the general direction of reform, responsibility is transferred from the politicians to health sector reform teams or other groups of technical experts within the government, usually in the ministry of health. Although these technical experts are often skilled analysts, they may lack the skills and experience needed to negotiate the complex political process that is at the core of health sector reform. In fact, until recently, few have paid much attention to the political feasibility of reforms.

Now, a growing number of observers and participants have begun to acknowledge and become interested in the political process that underlies health sector reform. Despite this increasing recognition of the role of politics, however, health sector technical experts may not recognize that policy reform is a process that can be managed or consider managing that process to be part of their job. Furthermore, they may not understand *how* to manage the political environment and influence the policy process in order to increase the feasibility and success of proposed reforms.

This toolkit was designed specifically to help health sector reform teams better understand the nature of the political process and develop skills to actively manage that process.

The remainder of this introductory section presents a conceptual framework for understanding the various stages of the policy process as well as for using the guidelines and tools included in this toolkit.

^{1.} The approach to health reform outlined in this introduction draws heavily on the earlier concept paper for this toolkit (Brinkerhoff et al., 1999).

Who Should Use this Toolkit

This toolkit is intended for health sector reform teams and others involved in making and influencing health policy decisions. Health sector reform teams may include mid-level and high-level officials in the ministries of health, planning, or finance; in-country health professionals; members of professional associations; and health economists. Others also may find the toolkit useful, including nongovernmental organizations (NGOs), donors, or managers of health facilities. In short, everyone with an interest in the process and outcomes of health sector reform will benefit from using this policy toolkit because it helps them prioritize and manage their interests and influence the health reform process. (The final section of this introduction describes how various users might apply the guidelines and tools.)

The guidance in this toolkit will be especially useful to policy champions—persons or teams willing and able to lead and manage the policy process. Policy champions proactively promote policy reforms, publicly support the policies, and foster the support of others. They frame discussion of the issue, build consensus, attract resources, and seize and create opportunities to move the reform forward. Ideally, members of all health sector reform teams will act as policy champions.

How To Use this Toolkit

Understand the Policy Process

The first step in using this toolkit is to review and understand the policy process. Health sector reform is an inherently political process that involves the reallocation of limited resources within an ever-changing political environment. The conceptual framework presented in Section2 (see Figure 1.1) describes the stages of the process and is a guide for determining where you are and where you need to be. Table 1.1 outlines the tasks that must be completed at each stage if the health sector reforms are to be clearly defined and effectively implemented (*Crosby 1996*).

Reality, however, is always more complex than models. The stages of the policy process are iterative, not strictly sequential. Therefore, completion of one stage does not guarantee movement to the next (*Porter and Hicks 1994*). Nor is progress in one stage dependent on completion of all the tasks in the previous stage. By simplifying reality, however, the model can help you determine where you and your reform agenda are within the policy process and focus your attention on the tasks you must complete at each stage. This is critical, since the tasks will not be completed without your attention and intervention. It is your job, as a member of the health sector reform team and as a policy champion, to recognize the necessary tasks and contribute to their completion. The conceptual framework can help you assess your political reality, develop strategies to achieve your reform objectives, and strategically manage the reform process by analyzing the situation within the ministry of health (or other organization responsible for reform), assessing what is happening beyond the ministry, and determining the best strategy for achieving your long-term health reform goals.

Policy champions: persons or teams who are willing and able to lead and manage the policy process

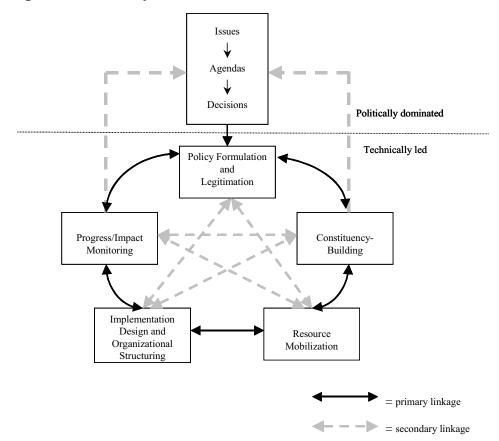
A conceptual framework of the policy process can guide your efforts by helping you determine where you are and where you need to be. The policy process is launched when policy issues, agendas, and decisions come together, and the direction is set for health sector reform. This is a political process that should be informed by technical input. Once the policy direction is set, policymakers hand the policy over to technical health sector reform teams for implementation, and the process goes from being politically led to being technically driven.

There are five technically driven stages of the process, which generally occur in the following order:

- ► Policy formulation and legitimation
- ▶ Constituency-building
- ► Resource mobilization
- ► Implementation design and organizational structuring
- ▶ Progress/impact monitoring.

This toolkit is meant to be used after the policy process has been launched, health sector reform has been agreed upon, the general direction of reform has been determined, and the policy has moved from being politically driven to being technically dominated. The toolkit is primarily for managing the five technically driven policy stages, when you are working to implement an identified policy, as described in Table 1.1.

Figure 1.1. The Policy Process



Box 1.1.
Politically Dominated Arena
of the Policy Process
Issues → Agendas → Decisions

When issues and agendas come together, policymakers make decisions. These political decisions often result in new policies but rarely specify the details of implementation.

Table 1.1. Policy Stages and Related Tasks in the Technically Led Domain of the Policy Process

Policy Stages

Related Tasks

Policy Formulation and Legitimation

Once politicians have decided to reform the health sector, policy managers need to:

- Formulate the technical content of the policy. Use someone with technical knowledge to detail policy goals and objectives, an operational framework of programs, and a statement of required resources. These elements are often included in initial reform plans but without sufficient detail.
- Make the policy legitimate. Encourage key individuals and groups to take ownership of the policy, especially when health reform efforts are supported by external multilateral donors or international financial institutions. This is the time to identify and/or consolidate the support of policy champions and help ensure that the policy is considered necessary and important.

Constituency-Building

Moving health sector reform forward will depend on your ability to:

- Generate active support from individuals and groups who see the changes created by health sector reform as desirable and beneficial. Identify and mobilize supporters. This is more than gaining legitimacy; it is inciting supporters to action. Convince interest groups that they will benefit from health sector reform and that the benefits are worth the costs of change.
- Reduce or deflect opposition from those who consider the reform measures to be undesirable or harmful. Acknowledge opponents of health sector reform and explore their positions. By understanding opposing perspectives, you can develop messages and strategies that will convince adversaries not to work against reform.

Resource Mobilization

Implementation of health sector reform demands financial, technical, and human resources. Getting off to a good start requires accumulating a sufficient supply of these resources, and successful implementation demands an ongoing flow. Yet these resources often are inaccessible (allocated to someone else's budget), unavailable (assigned to other priorities and programs), or nonexistent (no appropriately skilled staff). This is more than an internal management task of proper budgeting and programming workflow. A policy champion must exercise leadership to:

- □ Galvanize constituencies to lobby for resources
- Create performance incentives to use existing resources efficiently or develop new resources
- Achieve and publicize successes along the way to ensure a continuous flow of resources.

Implementation Design and Organizational Structuring

Health sector reform assigns new objectives and new tasks to organizations that are used to functioning differently. New implementation partners may be introduced into the process by reform efforts, including nongovernmental organizations (NGOs), community groups, commercial health providers, and professional associations. Staff may resist giving up old procedures, routines, and patterns of communication. Given these challenges, policy managers will need to:

- Design new implementation arrangements and structures, or modify existing ones, and ensure that the arrangements and structures function effectively
- Engage a wide range of implementation partners to create and nurture partnerships that can work together
- ➢ Help individuals and groups manage their transitions so they can adapt and function effectively in the changing environment.

Progress/impact Monitoring

Managing the reform process over time requires feedback, which should be used to make adjustments and adapt to changing conditions. Health sector reform typically involves many organizations and ministries. Individual agencies may be paying attention to their own activities, but often no one is paying attention to the overall progress and impact of the reform. Policy managers need to:

- Create and position analytic and monitoring capacity to collect and analyze data for the entire reform effort and make recommendations to decision-makers
- Design monitoring and evaluation systems and set up procedures for "hearing and heeding" feedback to ensure that analysis and recommendations reach the intended audience, i.e., decision-makers who have the capacity to act on the information
- Base ongoing reform efforts on lessons learned and a willingness to adapt so that strategies can be modified as needed.

Use the Guidelines and Tools to Manage the Policy Process

After reviewing the various stages of the policy process and the accompanying tasks, use the guidelines and tools to develop critical skills in the areas of stakeholder analysis, advocacy, conflict negotiation, and strategic management:

- ➤ The Stakeholder Analysis Guidelines (Section 2) help you identify the interested parties and assess their support for a particular policy, their underlying interests, and if and why those interests should be taken into account.
- ➤ The Advocacy Guidelines (Section 3) help you determine your advocacy objectives; identify target audiences; take stock of available support and information resources; determine a strategy that makes the best use of your resources to achieve your objective; and develop, target, and deliver messages that provide relevant and timely information and persuade policymakers to take the desired actions.
- ➤ The Conflict Negotiation Guidelines (Section 4) help you, with careful preparation, anticipate, contain, and resolve disputes that arise when parties with different interests need to work toward mutually acceptable solutions.
- ▶ The Introduction to Strategic Management (Section 5) helps you achieve your policy goals by systematically evaluating opportunities and threats in your external environment; assessing strengths and weaknesses in your structure and resource base; and developing, implementing, and monitoring a strategy that effectively applies your resources to address your challenges. This is not a how-to guide, but rather an introduction to a way of thinking about or tackling problems. It requires that you understand the context of the policy process and apply the guidelines and tools included in this toolkit.

Each of the guidelines and tools is closely associated with one or more stages of the policy process. Because the nature of the policy process is iterative, however, the tools should be used in the order and manner most appropriate for the reform process and should be modified in response to unforeseen circumstances. Throughout the process, you must continually assess the extent of support for and opposition to your reforms, develop strategies to advocate and communicate effectively with your target audiences, and negotiate the myriad of conflicts, large and small, that you encounter along the way.

Tips for Various Users

As noted, the primary intended users for the toolkit are members of health sector reform teams. However, others with an interest in reform can also profit from using the tools and approaches presented here. These include NGOs that provide community health services, donors whose resources contribute to funding reforms, or facility managers whose operations may be changed as a result of the reforms. This section provides tips for each of these groups on using the toolkit.

Health Reform Teams

For members of a health sector reform team, the toolkit helps, first of all, understand and master the policy process, which is critical for effectively managing reform. As a champion for reform, you need to develop an effective strategy for change. Depending on your position within the health sector, you may be familiar with some or all of the policy process, but there may be gaps in your knowledge and/or understanding.

Stakeholder analysis (Section 2) helps you identify the key players. Because you are a member of the reform team and have been working in the health sector in your country for a long time, you can probably readily identify the people important to the process. But stakeholder analysis, by systematizing and deepening your list of key players, helps you also discover who has what interest in the reform, who will win and who will lose, and what stakeholders might do to help or harm the reform's progress and prospects.

Advocacy (Section 3) helps you better persuade key people that the reform is worthwhile. This tool helps your reform team craft strategies to collect data and influence decision-makers to support the reform. It helps the team develop the most convincing set of messages for advocating the reform and its various components. This tool helps you package information to influence the various groups identified by your stakeholder analysis.

Conflict negotiation (Section 4) helps the team deal with groups or individuals that have conflicting interests. For example, many reforms call for measures that will change how health sector workers are paid and/or evaluated. This can cause serious conflicts, particularly if these groups are unionized. These guidelines help you manage such conflicts and negotiate acceptable solutions.

Nongovernmental Organizations

Your NGO may have experience with health services delivery and community mobilization but may be relatively new to health sector reform. This toolkit helps you grasp the important features of the policy cycle that lead to reform design and implementation. Since many health sector reforms include new roles for nongovernmental actors, it is important that you understand your place in the policy process and how you can exert influence.

Stakeholder analysis (Section 2) helps you identify your new partners, learn what their interests are, and assess what resources they can muster. This information helps you manage your new role and meet your new partners' expectations for your performance. Stakeholder analysis also can assist you in developing a more in-depth map of key stakeholders in the communities where your NGO is currently working or may work in the future, including identifying stakeholders who may be unfavorably disposed toward you.

Advocacy (Section 3) is a tool NGOs can use with a number of potentially important stake-holders in the health sector. For example, you may need to convince ministry of health decision-makers that NGOs can be effective partners for implementing reforms or that the needs of local communities should figure more prominently in the reform package. You may want to advocate with donors on your behalf. Or you may want to train community leaders to become effective advocates for reform among local politicians or health service providers. You will likely

need several kinds of messages to fit various audiences, from community members to senior ministry officials.

Conflict negotiation (Section 4) is important to NGOs because they often serve as mediators between communities and public sector officials, usually when these groups do not agree on priorities, actions, or results. NGOs may wish to train community groups in conflict negotiation, as in advocacy, and this tool assists in such capacity-building efforts.

Donors

Your donor agency probably has worked extensively with senior officials to elaborate and/or review the technical components of the reform package. Your agency may be funding the entire reform, or it may be part of a donor consortium that is funding one or more components of reform. Your agency is also likely to be providing some technical assistance to the reform team and other partners in the reform, such as NGOs or private-sector providers. While you are already familiar with the policy design and formulation steps in reform, you may be less familiar with the management-intensive steps of the policy process. The toolkit's focus on the policy process helps you focus on policy management tasks that may require technical assistance.

Stakeholder analysis (Section 2) helps you clarify the key players in the reform. Because you likely participated in the reform design, you probably already know the senior decision-makers and the members of the country reform team. You may be less familiar, however, with reform partners who will be involved in implementation or societal groups that have an interest in health reform. As a donor, you may be able to help the reform team influence both the supporters and opponents of reform identified through the stakeholder analysis.

Advocacy (Section 3) is a tool the reform team must know and use, and you can provide technical assistance to ensure that this capacity is created and reinforced.

Conflict negotiation (Section 4) is useful in the likely event that tensions and conflicts arise among the various stakeholders or between the stakeholders and the reform team. In many reform efforts, donors are called upon to serve as neutral mediators, and the conflict negotiation guidelines help you fulfill this role.

Facility Managers

You and your facility may be affected by health sector reform. The toolkit helps orient you to the policy process and helps you better understand and manage the changes going on around you. For example, you may be called upon to strengthen your focus on customer satisfaction. You may be asked to disseminate information and participate in social marketing campaigns to modify people's perceptions of health and health care. Or, you may find yourself in new partnerships with public agencies, NGOs, the private sector, or community groups for service delivery.

Stakeholder analysis (Section 2) helps you identify all the actors important to your facility at all levels of the health system, including some you may not know. It also helps you gather information on the feelings of your current clients and collaborators about the changes that health reform will bring and about how they might respond. This helps you deal more effectively with those of your clients who will not benefit from the changes (the losers) and who may therefore

oppose new practices. It also helps you encourage those who will benefit (the winners) to continue their support for reform. The stakeholder analysis also will help you better understand and work with a key group of stakeholders — your own staff.

Developing an advocacy strategy (Section 3) can help you convince key actors that the reform-induced changes in your facility are desirable and worth the cost. This tool helps your staff develop a strategy to educate and influence your customers and helps your service delivery team develop the most appropriate messages. Again, your staff may be the first target for these efforts, given the experience in many countries that health service providers themselves do not always have complete information about reform objectives, components, and activities.

Conflict negotiation (Section 4) will be an essential tool if you confront labor issues resulting from health reform measures such as changes in health worker salaries, working conditions, and procedures for performance assessments. Conflict negotiation helps you deal with disputes (i.e., from angry unions or upset facilities users) in ways that avoid disrupting your facility's operations.

Bibliography

Brinkerhoff, Derick W., Barbara O'Hanlon, and Susan Scribner. January 1999. "Strengthening Health Reform Policy in Latin America: A Concept Paper." Bethesda, MD: Abt Associates Inc.

Brinkerhoff, Derick W. 1994. "Looking Out, Looking in, Looking Ahead." *PA Times.* Vol. 17, No. 12, p. 11.

Crosby, Benjamin L. 1996. "Policy Implementation: The Organizational Challenge." *World Development*. Vol. 24, No. 9, pp. 1403-1417.

Porter, Robert W., and Irvin Hicks. October 1994. "Knowledge Utilization and the Process of Policy Formation: Toward a Framework for Africa." Washington, DC: Support for Analysis and Research in Africa Project and Health and Human Resources Analysis for Africa Project, for US Agency for International Development.