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ADDRESSING POLICY DEVELOPMENT AND IMPLEMENTATION IN SCALE-UP INITIATIVES

Brief

Policy development and implementation in scale-up is the process of incorporating a health intervention into the laws, policies, and structures that govern health systems. It entails assessing the policy environment, identifying policies that pose barriers or enable scale-up, and taking action to ensure enabling policies are in place at all levels of the health system.

To achieve the greatest possible improvement in family planning (FP) and maternal, neonatal, and child health (MNCH) outcomes, successful innovations, practices, and approaches must be "scaled up"—that is, implemented on a larger scale and incorporated into the laws, policies, and structures that govern health systems. In recent years, growing recognition of the importance of scale-up has led to intensified efforts to identify and scale up best practices in FP/MNCH and improve scale-up processes. Policy development and implementation are central to successful and sustainable scale-up.

The Health Policy Project has designed a programming approach to help countries advance the integration and measurement of policy development and implementation into the scale-up of FP/MNCH interventions and best practices.

Scale-up Approach: Policy Development and Implementation

Scale-up and sustainability are achieved when the goals, principles, and operational guidelines contained in policy directives are normalized and consistently supported as part of the everyday practice of health service planning and provision. However, reaching this endpoint cannot be accomplished through a "check-the-box" approach to policy. Policy work should be seen as a continuous process and an integral part of a long-term scale-up strategy.

1. Identify level of policy reform needed

There are three levels of policy that guide the health system, as shown in Figure 1 (Hardee et al., 2012). The highest level constitutes the legal and regulatory framework, including the country's constitution and laws that govern all policies. The second level includes national and state policies (e.g., national population or FP policies that set the direction for programs). Public financing for health also belongs at the top level of policy, as it establishes the size of the government budget and the limit a government can spend. The third level consists of operational policies—the rules, regulations, guidelines, operating procedures, administrative norms, financial rules, and financing schemes that help translate national policies into operational programs and services. Each level of policies affects health systems and all are important to consider in developing and implementing plans for scale-up.
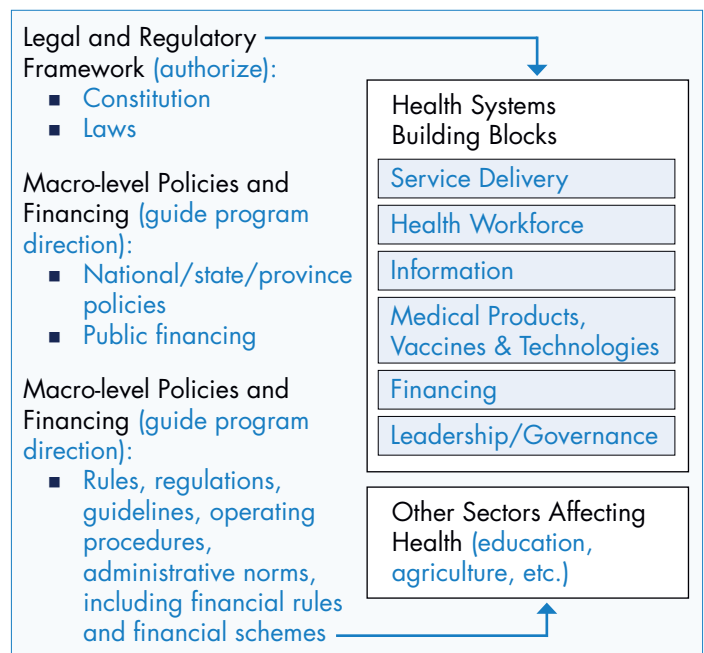
In scaling up a best practice, it is important to understand which level(s) of policy require attention. The following questions related to policy will help guide planning for the scale-up process:

- Are there any laws or social norms that prohibit aspects of the practice to be scaled up?

- Is the practice supported by a national policy?

- Are there any barriers to financing institutionalization of the best practice? Will

it fit within country financing guidelines or be part of the recurring budget rather than a development budget funded by donors?

- Do operational policies or the rules, regulations, guidelines, operating procedures, and administrative norms that guide implementation need to be developed or reformed to enhance implementation and the scale-up of the best practice?

Figure 1: Policy and Health Systems
Policy Levels → Health and Other Sectors

Legal and Regulatory Framework (authorize):
- Constitution
- Laws

Macro-level Policies and Financing (guide program direction):
- National/state/province policies
- Public financing

Macro-level Policies and Financing (guide program direction):
- Rules, regulations, guidelines, operating procedures, administrative norms, including financial rules and financial schemes

Health Systems Building Blocks
- Service Delivery
- Health Workforce
- Information
- Medical Products, Vaccines & Technologies
- Financing
- Leadership/Governance

Other Sectors Affecting Health (education, agriculture, etc.)

2. Identify the decisionmakers responsible for policy reform at each phase of scale-up implementation and at each level of the health system

In addressing policy in scale-up, it is important to understand how scaling up best practices fits within government priorities, plans, and strategies; lines of authority and responsibility; and government, donor, and multilateral organization coordination. Assessments of what it would take to institutionalize best practices, including through policy reform, can complement pilot studies to show the effectiveness of best practices in improving health outcomes.

3. **Identify and cultivate allies and champions who will work to garner political and financial support for the scale-up initiative**

These leaders—from parliamentarians to religious leaders to advocates for women and marginalized groups—and their networks should be strengthened so that they work to keep the issue on national and local policy agendas. These leaders should also work to strengthen governing systems related to the scale-up initiative, including ensuring that they are transparent and inclusive.

4. **Pay attention to timing and sequencing**

It is important to align the timing of scale-up to the political context (e.g., elections) and budget cycles. Experience has shown that gaps in funding—often created by delays in disbursements—can stall or put a sudden end to expansion efforts. It is also important to be on the lookout for and seize windows of opportunity: a change in political parties, for example, could make way for new commitment and resources for health. Ideally, a roll-out strategy for any initiative should be linked to the country's budget and planning cycles.

5. **Foster communication and coordination among stakeholders on an ongoing basis**

It is important to ensure that stakeholder communication and coordination occurs on a continuous basis, not just during a one-time event such as a national conference. In most countries, both public and private sector stakeholders need to be involved: politicians; government officials, and staff from the relevant ministries and departments (including finance); local government representatives; and representatives of international organizations, civil society groups, and private medical organizations; and advocacy groups and other nongovernmental organizations. A major challenge will be to ensure that women, vulnerable groups, and others impacted by the policy are at the table and meaningfully involved throughout the process.

Country Example: South East Asia

The USAID-funded Gender, Policy, and Measurement Program (GPM) is facilitating a technical exchange between the Royal Government of Cambodia and the Lao PDR to enhance gender integration in health policies and structures for improved health outcomes. Through structured peer-to-peer knowledge exchange, this activity aims to raise the profile of the leadership role of national gender mechanisms (e.g., gender units within ministries of health and standalone gender ministries) in integrating gender into health policy processes and instruments.

6. **Identify and address policy barriers**

It is important to identify policy barriers to scale-up, whether a lack of existing policies (national and/or operational policies) or barriers that result from the misapplication of existing policies. It is important to identify all policy changes needed and at which level of policy and to identify barriers to policy development and implementation. Addressing policy barriers in scale-up includes (1) understanding the policy environment governing the health system and the structure of the health system in the context of the government structure; (2) identifying and assessing implementation barriers and their policy roots; (3) assessing the appropriateness of the proposed solution; (4) fostering inclusive stakeholder buy-in and commitment to take action; (5) determining resources required for the proposed solution; (6) implementing a solution to remove the barrier; and (7) enacting accountability

mechanisms to ensure that barriers have been addressed (Bhuyan et al., 2010; Cross et al., 2001).

7. **Monitor and evaluate implementation and use data to inform the scale-up process**

Scale-up strategies should have monitoring and evaluation plans with clear indicators of progress, along with systems to track service delivery and agreed-on outcomes. These systems, in turn, should be linked with the group of stakeholders (described above) that is monitoring progress. It is important to feed monitoring and evaluation data back into the policy process to determine what is working and what is not and to identify additional need for policy reform. Good monitoring and evaluation data promote accountability, transparency, and ownership of policy initiatives.

Monitoring policy development and implementation is an integral component of the scale-up process. The first step in policy monitoring is to identify indicators measuring key activities related to the development and implementation of specific policies of interest (i.e., the policies related to the scale-up initiative). The next step is to collect, analyze, and disseminate data on those key indicators. These data can guide the development of new, timely, and relevant policies and help health system managers to better implement existing policies that support the scale-up effort.

Evaluating policy development and implementation. Once scale-up has been implemented, its effect can be determined. This can be achieved through an outcome evaluation of service utilization, which could also measure improvements to the health system, or an impact evaluation of a change in policy or program design resulting from the scale-up effort on health behaviors and outcomes (Hardee et al., 2012).

Country Example: Nepal

GPM is collaborating with the Suaahara project in Nepal to adapt the government's existing Health Facility Operation and Management Committees capacity-strengthening program. GPM and Suaahara will integrate and operationalize the health sector Gender Equality and Social Inclusion (GESI) strategy into the capacity-strengthening program with the overall goal of improving the quality of health services for women and disadvantaged groups. As part of the scale-up effort, GPM will develop indicators measuring progress toward implementation of the GESI strategy and routinely collect, analyze, and use data to inform the scale-up process.

For more details, see the longer report, *Approach for Addressing and Measuring Policy Development and Implementation in the Scale-Up of Family Planning and Maternal, Neonatal, and Child Health Programs*. Available at www.healthpolicyproject.com.

References

Hardee, K., L. Ashford, E. Rottach, R. Jolivet, and R. Kiesel. 2012. *The Policy Dimensions of Scaling Up Health Initiatives*. Washington, DC: Futures Group, Health Policy Project. Available at: http://www.healthpolicyproject.com/pubs/83_ScaleupPolicyJuly.pdf