



THE ART OF MOVING FROM POLICY TO ACTION

LESSONS LEARNED FROM THE USAID | HEALTH POLICY INITIATIVE (2005–2010)

This brief summarizes *The Art of Moving from Policy to Action*.¹ The paper aims to demystify “policy implementation” and provide user-friendly advice on translating policies into action. It presents experiences and lessons learned from the USAID | Health Policy Initiative, Task Order 1, organized around the project’s **Policy-to-Action Framework**. The framework recognizes that moving from policy to action is a dynamic, iterative process that unfolds differently in different contexts. In practice, the interdependent elements must be mixed together—sometimes out of sequence, often many elements at once, and over and over again—to achieve effective policy implementation. Also, while implementation involves elements that should be carried out in a more methodical way, bringing all of the elements together is indeed an art. It requires understanding policy issues, the context, and stakeholders; anticipating potential roadblocks; seizing windows of opportunity; and building and sustaining commitment, capacity, and resources over time.

The elements of the Policy-to-Action Framework include the following:

- ◆ **Data analysis and use** refers to the strategic use of information to help stakeholders understand health issues, design appropriate strategies, and monitor policy implementation.
- ◆ **Policy dialogue and advocacy** that engages various sectors and stakeholders gives people a voice in the decisions that affect their lives and health; keeps attention on health issues throughout the process, from policy formulation to implementation and monitoring; and encourages consensus for policy action.
- ◆ **Policy and strategy development** requires attention to policy content (e.g., clear goals, strategic directions, institutional arrangements, indicators of success) and policy processes (e.g., evidence-based, participatory processes).

Moving Policy to Action



- ◆ **Addressing barriers** will be an ongoing process as implementation unfolds. It entails identifying barriers to implementation, devising solutions, revising plans accordingly, and moving forward again.
- ◆ **Leadership and governance** are needed to guide strategic policy development, harness resources, provide oversight and coordination, and ensure accountability and transparency for actions and goals. Strengthening networks of leaders—from parliamentarians to religious leaders to women and marginalized groups—helps to sustain leadership.
- ◆ **Action planning** is a consultative process that seeks to outline *what, how, who, when, and where* resources and efforts are needed to put policies into practice.
- ◆ **Resource mobilization** encompasses the financial, human, and material resources needed to carry out plans and programs. Stakeholders must maximize resources through mobilization of new resources, as well as efficient and equitable allocation of existing resources—that is, “more money, better spent.”
- ◆ **Implementation of strategies** is the actual “doing” of the actions outlined in policies and plans. It typically involves testing and rolling out new or improved services in alignment with policy goals.
- ◆ **Monitoring, evaluation, and accountability** efforts should track service delivery and health outcomes, as well as the process of policy implementation to determine what is and is not working. Monitoring should also engage government leaders, civil society, and other stakeholders to promote accountability, transparency, and ownership of policy initiatives.
- ◆ **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.

Key Considerations

Applying the Policy-to-Action Framework requires (1) understanding the policy environment and (2) building capacity to implement and sustain health policies and programs. All health policies are formulated and implemented within a particular environment, which includes the overall health system; laws and policies in other sectors; policy stakeholders (public, private, civil society); power relationships among these stakeholders;

and sociocultural, political, economic, and other external factors. Part of the art of policy implementation is adapting elements of the Policy-to-Action Framework to the policy environment. Underlying the entire process of moving from policy to action is the need to build capacities for effective, sustainable implementation at individual, institutional, and systems levels.

The Way Forward

There is no one set way to put a policy into practice, hence, the art of moving from policy to action. Also, policy work is never totally complete. In fact, the framework presented here may be viewed as a process of moving from “policy to action, and back”—it requires implementing and monitoring policies and revising strategies to reflect changing dynamics of health issues and implementation experiences. For the way forward, it is important to consider what is needed to sustain policy implementation and success, as well as how policy implementation contributes to strong, sustainable health systems more broadly. Key considerations include the need for

- ◆ Sustained capacity at individual, institutional, and systems levels;
- ◆ Efficient, equitable, and sustainable mobilization and allocation of resources;
- ◆ Linkages between policy work and health systems strengthening initiatives, with clear indicators of the impact of policies on health systems; and
- ◆ Efforts to strengthen country ownership, leadership, governance, and accountability.

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Futures Group
 Health Policy Initiative
 One Thomas Circle, NW, Suite 200
 Washington, DC 20005 USA
 Tel: (202) 775-9680
 Email: policyinfo@futuresgroup.com
 Web: www.healthpolicyinitiative.com

ENDNOTES

¹ Health Policy Initiative, Task Order 1. 2010. *The Art of Moving from Policy to Action: Lessons Learned from the USAID | Health Policy Initiative (2005–2010)*. Washington, DC: Futures Group, Health Policy Initiative, Task Order 1.