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## **A Guide to Applied Political Analysis for Health Reform**

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### **India Health Systems Project**

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## **Preface to the Working Paper Series**

The India Health Systems Project is motivated by the goal of advancing health system reforms in India to provide equitable access to good quality of care and financial risk protection for its citizens. The Project adopts a system approach to assess the strengths and weaknesses of India's current health care system, identify underlying causes, propose potential solutions drawing on best practices within India and international experience, and, finally, to monitor and evaluate progress and impacts of reforms.

The Working Paper Series presents products from the project. They include research papers, country cases, and analytical tools for conducting health system and reform analysis. The intended audiences are researchers, health policy analysts and practitioners of health systems reform in India—at the national- and state-level—and worldwide. The Working Papers are available at <https://sites.sph.harvard.edu/india-health-systems/>.

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M.R.R. and P.A.C.

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## Introductory Message

Bringing about sustainable and deep-seated health reform, or for that matter reform of any kind, is a challenging task. Governments are many layered, with different levels of expertise and opinion, and with entrenched silos and turfs. Getting enthusiastic endorsement from all stakeholders is often a long, drawn out process, with many iterations. The government also has to be mindful of its mandate, the acceptability of the reform among the citizens and many more factors. The policy needs not just ministry-level political endorsement, but is also firmed up further through cabinet discussions. That apart, political buy-in is needed both at the top levels, as well as in political representatives at the grassroot institution or village level. Thus, a broad spectrum of support is required, and, in fact, is essential for a policy to become universally accepted and robust, in sync with the ground reality.

Thus, policy making for reform is not just a paper exercise—it must consider different shades of opinion, do multi-criteria decision making, and find the best fit with the objectives. The process also needs to be efficient and system centric. Very often, the political analysis and design of strategy becomes diluted for want of a systematic approach. It is here that the “Guide to Applied Political Analysis for Health Reform” by Michael Reich and Paola Abril Campos fills the gap. I had the good fortune of being a student of Prof. Michael Reich, and feel honoured writing the foreword to what is an essential input for any policy maker. Like a good guide, it leads us on the journey of political analysis in a manner that overcomes obstacles, while giving a holistic overview and providing excellent navigational tools. Political analysis and buy-in is an exercise that is critical to the success of any reform. This practical guide helps policy makers do that with rigour and thoroughness.

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# 1 Introduction

Creating health system change requires a combination of technical solutions and political skill. Understanding the political context of health policies is crucial to improving the chances of effectively designing, adopting, and implementing health reforms that can achieve their intended objectives.

This guide seeks to help reformers navigate the political processes involved in changing and implementing health policies that will improve societal health and well-being. Policy reform is a profoundly political process, and advocates need to manage the politics of change, through careful political analysis and innovative political strategies.<sup>1</sup> It is important to note that this guide is aimed to assist in *applied* political analysis—not in advancing theory, but in supporting practitioners. We seek to provide guidance that will help in the art of policy reform, through step-by-step suggestions for analysis. (See Appendix 1 for a glossary of some terms used in this guide.) In this way, the guide is about the “how” of reform and not the “what.”

Various forms of applied political analysis exist. This particular form is a core component of the Flagship Approach to Health Reform that has been developed since the mid-1990s by a team of researchers at Harvard University in collaboration with the World Bank and other institutions.<sup>2,3</sup> This guide can be used in conjunction with the Flagship Approach, but it is also designed to be used independently, to provide policy makers and policy analysts with instructions on how to manage the political processes of reform. The guide helps identify political, fiscal and institutional constraints that need to be addressed by strategies that can improve the design and implementation plan for reform.

## 1.1 What is applied political analysis?

This guide’s approach to applied political analysis is a systematic investigation of the interests, positions, and power of stakeholders regarding the formulation, adoption, or implementation of a policy, and includes the development of political strategies to assist in managing change. This form of applied political analysis helps decision-makers improve the chances that a policy will be politically feasible and achieve its intended effects. This recognizes that “political feasibility” has to be created through specific and intentional actions by political actors. In short, policy reformers need to design political strategies that influence each step in the policy cycle, in order to move the health system toward improved performance.

Political analysis plays different roles at different points in the policy cycle, and can aid the reform process, by helping to:

- Design strategies to put a particular topic on the policy agenda (topics such as: introduce new cadres of health workers, create new forms of health insurance, or control pharmaceutical prices).
- Increase the likelihood of support of important groups for a proposed policy, and decrease the opposition of other groups.
- Manage key stakeholders affected by a proposed policy (such as the physicians association, health workers union, association of pharmaceutical companies, and patient groups).
- Identify implementation risks early on.
- Assist in communication among different organizations (by working with journalists and creating regular press conferences).

- Contribute to building consensus around difficult issues and conflicting values.
- Improve the political acceptability of decisions related to a proposed policy.
- Provide strategies for implementation after a policy has been adopted.

This guide is intended to assist policy reformers on the use of prospective political analysis to manage policy processes in the real world (and is not intended to support academic research and writing; that would require a different approach and different instructions).

## **1.2 Why do applied political analysis?**

Technical evidence alone rarely is enough to create successful policy reform. Designing, adopting, and implementing policies are profoundly political processes, because they all involve a redistribution of resources and power to achieve the policy goal. The short answer to “why do political analysis?” is that it helps improve your chances at success in changing public policies.<sup>1</sup> Applied political analysis can be used retrospectively to understand why and how policies were adopted or not; and it can be used prospectively to help shape reform trajectories in real-time.

Applied political analysis has been used to support health reform in diverse national contexts in low- and middle-income countries for different purposes. It has been used to help advocates promote maternal health as a political priority in Nigeria<sup>4</sup> and India.<sup>5</sup> Political analysis has been used to help reformers manage the processes of adopting health financing reforms in Mexico<sup>6</sup> and Turkey<sup>7</sup>—with success. In these cases, policy leaders used analysis to design political strategies that helped them introduce, adopt, and implement major health system changes. But analysis does not always lead to change. For example, political analysis was used in a project to support health reform adoption in the Dominican Republic,<sup>8</sup> but without success.

Applied political analysis has been done in some cases as retrospective analysis to understand a reform process and outcome. For example, it has been used to explain how a new health policy (Rashtriya Swasthya Bima Yojana) was adopted as a national policy in India,<sup>9</sup> and why health financing reforms have not been adopted in Malaysia.<sup>10</sup> It has been used to identify the political strategies used in Mexico to achieve legislative adoption of the landmark reform of Seguro Popular.<sup>11</sup> And political analysis has also been used to explain the lack of implementation of tobacco policies in low-income countries.<sup>12</sup>

A number of large countries with federal systems are now grappling with major health reforms, including India, Brazil, Mexico, Nigeria, and the United States. When health reform occurs in a decentralized system (and in situations with devolved decision-making authority), the political context at both the national and the sub-national levels affects all aspects of the policy cycle: from how problems are defined and agendas are set, to how policy is designed, adopted, implemented, and evaluated. The interaction of political factors at the national and state levels shapes reform trajectory, often in ways that result in significant differences at the sub-national level.

## **1.3 When to do applied political analysis?**

Political analysis is not a one-off exercise. Instead, it should be done early and often in the policy cycle. Repeated analysis is needed because political challenges and possible opportunities evolve and change. Figure 1 provides one model for the policy cycle; each stage in this model creates a different set of political dynamics. Let us briefly consider the political dynamics for the six stages in this model.

[Figure 1 here]

*Problem Definition:* In this stage, reformers seek to define the problem in a way that places it on the social agenda for change and the government agenda for policy. Governments typically can address only a limited number of major public problems at any moment in time. Public issues thus compete for high-priority attention, and often budgets, by governments. The processes of problem definition and agenda-setting thus are critical for shaping how much attention both society and government pay to a particular issue. How problems are defined reflects key ethical and social values and affects the responses of different social groups, mass media, and decision makers.

Reformers can look for events and studies to help shape the policy agenda. For example: studies showing high out-of-pocket payment for health can sometimes help put health financing on the policy agenda; or resistance by physicians to work in rural areas can give visibility to a proposal for a new cadre of junior physicians; or a study showing that medicine prices are higher in your country than neighbors can focus government attention on pharmaceutical policy.

*Diagnosis:* Identifying the causes of a social problem and proposing interventions to address those causes is often viewed as a technical process. But the technical aspects of diagnosis need to be viewed in a broader political context. Different interventions have different levels of political feasibility, due in part to stakeholder interests, institutional contexts and social values. The political feasibility of a reform will be determined in large part by the choice of specific technical interventions.

*Policy Development:* Deciding what to include in a policy proposal is often a political negotiation with key stakeholders, with substantive policy components used as bargaining chips to raise the probability of policy adoption. In short, the technical work of developing a policy needs to occur at the same time as a political feasibility assessment to increase the likelihood of policy adoption.<sup>3</sup>

*Political decision:* The process of making a political decision is often viewed as something that happens with a single individual—a political leader—but it is usually more complicated. This point of political decision is typically when policy adoption happens, and it can occur in different institutions: a legislature, a cabinet, a single government ministry, a semi-autonomous public agency, a judicial agency, or even in a private organization. Understanding the decision process is critical: where and how the policy adoption process occurs, who is involved, and how the decision is made (by individual decision, by vote, or by consensus, for example). This usually requires detailed “local knowledge” about the policy process. Sometimes policy reformers have a choice about the institutional location for adoption; that choice can be based on a combination of political analysis and technical requirements.

*Implementation:* Despite limited literature on the politics of health policy implementation, it is an inherently political process.<sup>13</sup> Whether implementers participate in the policy design and adoption processes can affect the politics and probability of success. Sometimes, compromises made to assure adoption (in order to gain the support of specific interest groups) can complicate and undermine the chances of implementation. Understanding the political challenges of implementation early on can improve the processes of actually putting the policy into action.

*Evaluation:* Decisions about what is evaluated, who does the evaluation, which evaluation methods are used, and when the evaluation occurs all are influenced by political choices. When an election brings in a new political party to government, the evaluation of policies supported by the previous government can be politically driven, with limited analysis and evidence.



In conclusion, systematic political analysis should be conducted throughout the policy cycle, and sometimes repeated even within a given stage of the cycle in the case of change. At the same time, it is important to identify which stage of the policy cycle you are located in, and the associated political challenges to address. In Figure 2, we present a summary of the different purposes that an applied political analysis can have at different stages of the policy cycle. The methods will also vary depending on the purpose of the analysis.

[Figure 2 here]

Deciding on the right time to do an applied political analysis depends on a clear statement about the purpose of the analysis. If the goal is to ensure that the results of the applied political analysis and the related political strategies are useful, then timing is critical. The technical team and the political analysis team need to be in good communication and harmonize their timelines to ensure that the technical and the political work go hand in hand.

Before beginning a political analysis, the team should also consider the need for ethical review (for example, through an Institutional Review Board). If an external consultant or academic researcher is involved, they may be required to submit the proposal for ethical review within their institution if the research involves human subjects (such as interviews). This process may also be necessary if the analysis team is considering publication in an academic journal. In most cases, the project could qualify for an exemption (once submitted to review), as long as the participants are public officials (or their work is part of the public record), informed consent of participants is obtained, the individual identities are masked (unless participants agree to disclose their names and positions), and the risks to participants are minimal. The rules for exemption will depend on the particular institution and its review criteria. If the political analysis is intended for internal use only by a government agency, then review and approval of the protocol by the agency's leadership may be sufficient.

## **2 Six Steps for Applied Political Analysis**

This guide proposes six steps in conducting an applied political analysis:

1. Define the audience (client) and the problem
2. Identify the policy/solution to promote
3. Describe the context of the policy
4. Conduct a stakeholder analysis
5. Design a set of political strategies
6. Assess the political feasibility of your policy, using the political strategies

Next, we describe the analytical actions to be taken at each step.

### **2.1 Step 1: Define the audience (client) and the problem**

To start, who will be using the results from the analysis? In conducting an applied political analysis, it is important to have an identified client, or customer, or decision maker. Who has asked for the analysis, and who will be seeking to apply the recommendations? In some cases, this client could be the Minister of Health, or the Director of Planning in the Ministry. It could also be a non-governmental advocate, for example, the head of a group seeking to improve primary care services in rural areas in a particular state. Having a clear client is important for defining the problem to be addressed (since different people may have markedly different ideas of what the

problem is) and for designing political strategies, since the relevant question then is, what could the client do to change the political circumstances around this policy proposal?

Another critical part of the first step is to define the problem to be addressed. In health reform, this definition typically focuses on a health system performance problem related to health status, patient satisfaction, or financial risk protection.<sup>3</sup> For the purposes of applied political analysis, we recommend thinking more broadly about the political context in addition to the performance problem.<sup>14</sup>

Having clarity about the problem to be addressed and about the purpose of the applied political analysis requires extended discussions with the audience or client, and consultations with key actors. It takes time to define the right audience, purpose, and policy to analyze, and this time should be included in project timelines, even if political analysis timelines are difficult to control.

Another important aspect of defining the problem is to identify the stage of the policy cycle. Is this at the point of problem definition and agenda-setting? Or policy adoption in the legislature? Or policy implementation after the policy has been officially adopted by the government? A clear statement on the stage in the policy cycle will help set the main purpose and key parameters of the analysis.

It is important to note that applied political analysis is not intended to tell decision-makers where they should go (that is, what their policy objectives should be), but rather how to get there from here. Political analysis thus is not the same as ethical analysis. As a result, political analysis needs to go hand in hand with the development of technical policy solutions and with an assessment of policy goals and social values. Policy makers decide on where they want to go, and political analysts provide guidance on options on how to get there. Analysts also need an awareness of their own social values, so that they do not up helping to create public policies that disagree with their personal normative positions.

At this point, you should have clarity on the following items:

Audience/Client: Who will be putting into action the results from the applied political analysis?	
Problem to be addressed:	
Stage(s) of the policy cycle:	

## **2.2 Step 2: Identify the policy/solution to promote**

The second step is to define the policy you are seeking to introduce or implement. As part of this step, analysts should understand how the major elements of the policy are intended to address the problems identified both from a technical and a political perspective. This process underscores that formulation of a policy requires both technical and political expertise. However, it may seem surprising that reformers sometimes do not have a clear idea of what the policy will include. Policymakers may be focused on the problem (for example, high maternal mortality) or a given objective (for example, achieving universal health coverage), without a strong notion of how to address the problem through policy action. Or policymakers may be focused on eliminating the policy introduced by a predecessor, for political reasons (because of different political parties) or for value reasons (as too market-oriented, or giving too much discretion to states, or too government-oriented). These broad motivations, however, may not be followed by specific details of what the new policy should include.

It is worth spending sufficient time and effort on this task to make sure that the details of the policy content are set and appropriate for the identified problem. What is “sufficient” will depend on the particular circumstances and is ultimately a judgment call. Sometimes, policy reformers will spend years to diagnose the causes of the problem and delineate a detailed course of action. In other cases, the policy content may be rapidly defined to meet a window of political opportunity. Sometimes, policy entrepreneurs prepare a policy proposal in detail, and then wait for problems to arise and windows of opportunity to open, so that they can push their proposal onto the agenda.<sup>15</sup>

It is important to develop some details on the policy, because this is what stakeholders use in deciding their position. This is in many ways the “solution” to the “problem” identified in the first step. A policy development team would typically conduct a diagnostic journey, to identify causal factors that contribute to the health system performance problem, and then would ask why (five times) until proposing specific control knobs that could be used.<sup>3</sup> This analytical process helps define the elements of the proposed policy reform. Knowledge of the details of the policy and an assessment of the understanding of the policy by different actors are key in preparing for the stakeholder analysis. For example, if you include abortion in a family planning program you can expect strong opposition from the Catholic Church, but if you only have contraceptive methods and include natural methods you might reduce their opposition. This assessment of likely reactions to specific proposals can be done through direct interviews with key individuals or informal stakeholder consultations where actors are asked about their knowledge of the policy. In some cases, the stakeholder analysis may have the dual role of educating stakeholders about the contents of the policy and identifying their positions and interests regarding the policy. Stakeholders may need time to think about how a certain policy could affect them. Stakeholder positions on specific elements of the policy can influence decisions about what to include in the policy proposal. In this way political analysis can shape policy development.

Not all policies are amenable to applied political analysis. If a policy is already set and has no flexibility in its design, an applied political analysis won’t be as helpful. Furthermore, the policy needs to be specific enough so that stakeholders can anticipate how the changes may affect them. Finally, the proposed policy is not always the adopted policy. As the policy enters political negotiations over adoption, certain elements may be dropped and other elements may be added, in order win over specific stakeholders and create political feasibility. As we discuss below, political strategies can include adjustments in policy content, sometimes in major ways and sometimes in contradictory ways.

At this point, you should have clarity on the following items:

Policy proposal: What is the proposed solution to the problem you have identified?	
Key elements of the policy proposal:	
Assessment of stakeholder’s knowledge about the proposal and its details:	

### **2.3 Step 3: Describe the context of the policy**

At the beginning of a political analysis it is helpful to understand the context of the proposed policy. It is important to learn about whether similar policies have been debated before, whether there have been past attempts at solving the problem at hand, and if yes, why they did or did not

work. This review of the policy context can include a description of the interests, institutions, ideas, and ideologies involved.<sup>16</sup> This historical description can present important political events, such as elections or conflicts or natural disasters, and suggest their relevance for the problem to be addressed. The depth and scope of this review will depend importantly on the audience for the political analysis, especially whether the primary audience is someone deeply familiar with national history (such as a political leader) or is someone with limited local knowledge (such as an official with a multilateral agency or aid organization).

The main objective of this description of context is to place the problem and the policy within the local political moment and culture, to explain why the problem is politically salient and why the proposed policy is socially important, from the perspective of the primary audience. This description can be succinct and to the point; indeed, the shorter the better. The description of context helps explain to the primary audience why the policy reform is needed and what the political analysis seeks to accomplish. In describing the political context, analysts can use the academic literature in political science and public policy that exists for many countries on how political authority is exercised and how policy choices are made. To this end, the team of analysts can review: published literature; unpublished government or policy documents; news articles; and evaluation reports of previous policies. The team can also conduct informal stakeholder consultations to fill in gaps in the literature.

At this point, you should have clarity on the following items:

Political salience: What are reasons why the problem is political salient at this time?	
Main arguments for and against the proposed policy:	
Social importance of the proposed policy:	

## 2.4 Step 4: Conduct a stakeholder analysis

A stakeholder analysis creates a description of the political landscape surrounding a proposed policy, by examining the relevant groups and individuals inside and outside government who might influence the overall process of policy reform.<sup>13</sup> This portrait of the political landscape identifies key stakeholders, their position on the policy under analysis, and the power of each stakeholder to affect that policy.

Stakeholders are actors (persons or organizations) with a vested interest in a specific policy and the potential to influence related decisions. They can be individual actors and organizations (i.e., a government ministry or a particular labor union). In the context of universal health coverage policies, common stakeholders include the ministries of health and finance, provider associations, insurance companies, unions, business, beneficiaries, and donor agencies.<sup>15</sup> Stakeholders can also include units or groups within organizations or institutions, which may themselves hold different positions on the policy.<sup>17</sup>

Over the past two decades, various approaches to stakeholder analysis have been developed in the field of health policy. At the end of this guide, we include a list of different publications that present these approaches to stakeholder analysis. They share similar features, including the identification of key stakeholders and their positions and power (or influence) with regard to a specific health policy. The different approaches have not been systematically evaluated or assessed. The approach used in this guide draws on the prior work related to political analysis by one coauthor (MRR) over several decades, including the *PolicyMaker* software for political

analysis developed by Reich and Cooper.<sup>18</sup> This approach has been widely taught and used around the world in various policy environments. One distinctive feature of this approach is that it combines stakeholder analysis with strategy development in order to assess the impacts of actions on the political feasibility of a policy.

The methods of stakeholder analysis are also similar in the various approaches.<sup>19</sup> The methods generally combine document review of published and unpublished material, with media analysis and in-person interviews with stakeholders. The materials and interview transcripts are analyzed with qualitative methods<sup>20,21</sup> to assess the position and power of each stakeholder on the policy under consideration.

Stakeholder analysis inevitably involves subjective judgments about all of the key factors: who are the stakeholders, their position on the policy, and their level of power to influence the policy. The analyst needs to decide which individuals and organizations are most affected by a policy, and whether to include organizational leaders as distinct from organizational members. For example, should the medical association president be identified as a key stakeholder in addition to the medical association members? Deciding on a position involves a judgment whether a stakeholder is for or against a policy, and how strongly, or not currently mobilized (no position). This question can be decided by directly asking the person or group, or by assessing the position based on public statements or actions. Making these critical judgments can also be done by a team of analysts who discuss the data collected and different options and come to a collective decision; this can help reduce subjectivity or at least create shared subjectivity.

These decisions about key stakeholders, and their position and power on the proposed policy change, are the key data points for this analysis, because they are the inputs into determining the assessment of political feasibility. One way to assess political feasibility is through discussion of the “political map” produced by the data on stakeholders, position, and power, as shown in examples in Figure 3 (produced using the *PolicyMaker* software<sup>18</sup>).

[Figure 3 here]

### **2.4.1 Select an analyst**

The stakeholder analysis can be done by a team of analysts or by an individual analyst depending on the resources available. For example, the stakeholder analysis can be done by the reform team seeking to change a policy, often working directly for the decision maker in charge as the client; or the analysis can be done by an external analyst, for example, a person from an academic institution or international organization. Usually the analyst would have prior training and experience in applied political analysis. However, in cases where this is not possible, this guide provides a step-by-step set of instructions on how to conduct an applied political analysis.

It is also important to think about the implications of selecting an internal or external analyst. Internal analysts, working within an organization that has a stake at the change in question, may bring some biases to the analysis. Furthermore, the relationship that the analyst already has with the stakeholders to be interviewed may also introduce bias. Stakeholders may not feel comfortable disclosing their interests and position. However, an internal analyst holds in-depth knowledge of the local context and may be able to identify important information quickly and interpret it with nuance. External analysts, who do not have a stake in the change proposed, may bring a more impartial perspective and may be better positioned to inquire about stakeholders’ positions in interviews. However, they may lack knowledge of the local context and culture, which may lead them to miss important information or misinterpret what they collect. A team that includes both

internal and external analysts may work best if information is triangulated and if there is good communication to assess biases and assumptions in the interpretation of the findings. The organizational context of the project matters. Forming the right team of internal or external analysts trained in political analysis is important. Effective and regular communication is key among team members, and with the audience/client. Having a shared understanding of the purpose of the analysis is critical so the client can best use the political strategies that result from the analysis.

### **2.4.2 Develop a list of stakeholders**

Stakeholder analysis depends on creating a list of actors, groups or institutions that have a stake in the adoption or implementation of the policy. Who is likely to be affected by the change? Who believes they will be affected by the policy change? Actors at different levels need to be considered: at the national, state, and community levels. Campos and Reich<sup>13</sup> propose six categories of stakeholder groups that are likely to influence health policy (shown in Figure 4): interest group politics, bureaucratic politics, budget politics, leadership politics, beneficiary politics, and external actor politics. Local experts may be able to identify key actors within each stakeholder group to include in the analysis and to be considered for direct interviews (if they are to be conducted). If interviews are conducted, the analysts should consider a “snowball sampling” in which interviewees are asked to identify other stakeholders that they think should be consulted. Usually interviews are stopped at the point of “saturation,” when no new information is obtained from new interviewees.<sup>20,21</sup> We include an example of a list of stakeholders in Appendix 2.

[Figure 4 here]

### **2.4.3 Decide on how to approach stakeholders**

If direct interviews are to be conducted with stakeholders, the analyst team will need to think about how stakeholders will be contacted and who will reach out to them. An external analyst may be well positioned to reach out to stakeholders if the external person or group is perceived as relatively impartial. However, the analyst may need help with contacting stakeholders and securing appointments. This aspect of a stakeholder analysis is rarely discussed in detail but is crucial to the success of an analysis. Approaching stakeholders can be difficult for several reasons:

- Distrust in research
- Lack of time
- Sensitive information in the political landscape
- Conflict of interest: stakeholders may not want to reveal their positions to help the opposition develop strategies
- Unavailability of high-level stakeholders

The analysis team needs to discuss different strategies they will use to approach stakeholders, such as: sending cold emails or making phone calls; using personal connections; asking to be introduced by a second-degree acquaintance; even contacting stakeholders via social media. It is also important to acknowledge whether stakeholders were not able to be contacted and thus not included in the analysis. There may be other ways of assessing the position and power of the “missing” stakeholders via public statements or media articles. However, it is important to note who is being left out from the analysis that could have a stake in the policy.

In some cases, the analysis team may decide not to conduct interviews, if the team believes that it knows quite well the political landscape and positions of specific stakeholders. Another reason for not conducting direct interviews is if the problem or policy is considered to be highly sensitive, so that even asking for interviews would be considered controversial or disruptive to the policy environment. On the other hand, using direct interviews could be part of a consultative and deliberative process of involving different stakeholders. Whether to use this kind of participative approach to policy reform will depend on local circumstances and the client's preferences and judgment.

#### **2.4.4 Develop interview guide and conduct interviews**

Once the list of stakeholders has been developed (based on key stakeholder groupings), an interview guide needs to be created with the questions regarding the interests, position, and power of each actor. Here are some questions that can guide the development of a more detailed interview guide:

- What are the main objectives or interests of the organization/individual actor in the proposed policy?
- How important to the organization are those interests in the proposed policy?
- What kinds of formal access do different organizations have to the decision-making agency?

Assessing position and power is not easy. Stakeholders may not state their positions and interests explicitly; and the analysts will then have to identify the underlying motivations of stakeholders. This requires a careful triangulation of perspectives across interviews and other data (i.e., public announcements, news media, published and unpublished documents).<sup>17</sup> The questions in the interview guide also have to be phrased in a politically sensitive manner to obtain useful data and not alienate different groups *ex ante*. One possible question to assess the power of stakeholders is: Who do you have to go through to voice your opinion/concerns about a new program or policy?

In some cases, the reform proposal may be highly controversial, and prospective interviewees may be unwilling to meet and discuss the ideas under debate. In that situation, the interviews can be structured around past reform efforts, which could create an opportunity to discuss future reform possibilities.

It is also important to keep in mind that the interview guide can change as the analysis progresses. Unexpected political events can result in some questions becoming irrelevant; or new questions may need to be added. We include an example of a simple interview guide in Appendix 3.

#### **2.4.5 Analyze the position and power of each stakeholder**

The analysis of the stakeholder interviews may be guided by the following kind of questions:<sup>19</sup>

- Who are the most important stakeholders for this issue (who holds more power/and has access to the decision-making process)?
- What are the stakeholders' positions on the proposed policy? Do they support it, are they neutral, or do they oppose the policy, and with what level of intensity?
- What are the stakeholder interests in the policy?
- Which stakeholders have formed alliances or might form alliances?

The aim of the analysis is to establish the position of each stakeholder (support, non-mobilized, opposed, and the intensity of support or opposition as high, medium, or low); their power (financial and administrative resources, access to decision-making process, also assessed as high, medium, or low), and their formal and informal relations with other stakeholders.

Assessing the power of key stakeholders involved in the policy debate is based partly on the political resources available to each player. Those resources can include material and financial resources, capacity to mobilize an organization or votes, and symbolic resources (such as leadership charisma or social media followers), as well as actual decision power over a specific policy arena. Asking different stakeholders about who holds the most power over a specific policy decision can also be used as an input in assessing the power of stakeholders.

If working in a team, each member could conduct their own analysis and then compare insights and results to reduce bias. Alternatively, the entire group could meet together to assess the position and power of each stakeholder and come to a collective decision.

### 2.4.6 Present the stakeholder analysis

The results of a stakeholder analysis can be presented in a table showing the position and power of each stakeholder. In addition, *PolicyMaker* software can be used to produce a visual representation of the “political map” of stakeholders in the policy landscape (see Figure 3).<sup>18</sup> This representation will allow the analyst or the team to identify key areas of opportunity or challenges around which strategies can be developed seek to influence different stakeholders and thereby improve the political feasibility of the policy reform. One published example of applied political analysis using *PolicyMaker* software is provided by Glassman et al.<sup>8</sup>

A brief narrative describing the position, power and perception of each stakeholder is also helpful.

By the end of the stakeholder analysis, you should have clarity on the following items:

Stakeholders relevant to the proposed policy:	
The position of each stakeholder on the policy, including supporters, opponents, and non-mobilized	
The level of power of each stakeholder to influence the policy	
An assessment of the political feasibility of the proposed policy:	

## 2.5 Step 5: Design a set of political strategies

Stakeholder analysis is not an end in itself but rather a means to enabling and managing change. A description of the political landscape is not sufficient to produce change. The results of the stakeholder analysis need to be used to develop strategies that can change the political landscape in ways that improve the political feasibility of the desired policy reform. Below we present some examples of political strategies that produce change in the feasibility of policy reform.

In this stage, the analyst team seeks to identify strategies for change in the decision-making process, especially changes that could alter the balance of power and the feasibility of reform. The basic logic is to design political strategies that strengthen the number and power of supporters, reduce the number and power of opponents, and mobilize new supporters from the non-mobilized stakeholders (or the opposite, if the goal is to stop a specific reform).



Political strategies can be designed around four factors:

- seeking to change the power of actors;
- seeking to change the position of actors;
- seeking to change the number of actors (in support or opposed); and
- seeking to change the perception of the problem or the solution

These four factors (power of actors, position of actors, number of actors, and perception of problem and solution) all influence the political feasibility of adoption of a proposed policy or the political feasibility of implementation of an accepted policy. The reform team (also known as a “change team”) will want to consider political strategies for each stakeholder, when looking at the political map, to address questions such as:

- How can a key opponent be persuaded to change its position from high opposition to low opposition or even support? This could involve strategies to negotiate over change in a technical aspect of the policy, or to provide desired resources.
- How can the power of supporters be increased, so that they have more influence over the policy process? This could involve strategies to increase the financial resources of the supporter, or to give them more visibility in public media.
- How can the power of opponents be decreased? This could be done by questioning the motives of opponents, reducing their public visibility, or denying them material resources.
- How can the number of supporters be increased? This could involve strategies to mobilize actors that are neutral, by providing them with technical analysis about how the policy would benefit them or by offering them incentives to show public support for this policy. The number of supporters could also be increased by seeking consensus among key stakeholders.
- How can the perception of the problem and the policy be changed, so that the desired policy reform is more likely? This could involve strategies to give more public and media visibility to the problem and the policy solution, including use of social media. Using salient symbols and language for the problem and the solution can also be effective strategies for changing public perceptions.

For each salient stakeholder, the reform team can identify a strategy that will improve the political feasibility of the proposed reform: the specific action to be taken, the expected impacts of that action (on power and position and number of actors), and any anticipated problems with the action. (Indeed, the creation of a change team itself can be considered a political strategy, to ensure that different stakeholders are involved in the reform and that explicit attention is given to the political dimensions of change.) Political strategies can be creative, but they can also involve risks and potentially adverse consequences.

Where can the reform team find political strategies that might improve the feasibility of their policy? Past experience in the local context (in the health sector and in other sectors) is one source for ideas. The reform team may include individuals with expertise in managing political issues in the local context, and they can be used as resource people in strategy brainstorming discussions. The published literature includes many case studies on particular health policy processes and political strategies used to promote adoption or implementation.<sup>12</sup> In addition, the *PolicyMaker* software includes a toolbox of around 30 political strategies that can be adapted to particular contexts.<sup>18</sup> There may be professional political strategy or lobbying companies that can provide assistance with this process in specific localities. Finally, opportunities exist to learn from the

political strategies used with similar policies in other countries, for example, how a tax on sugar-sweetened beverages was successfully adopted in Mexico.<sup>22</sup>

It is worth noting that other guides to stakeholder analysis often put more emphasis on the analysis of political actors rather than the development of political strategies. As noted above, one distinctive feature of this approach is its emphasis on the development of strategies for change that can shape the political environment for policy reform.

At this point, you should have clarity on the following items:

An assessment of the challenges to increase the political feasibility of the proposed policy:	
Specific political strategies to change the position, or power, or perceptions of key stakeholders	
A priority list of political strategies to recommend for implementation, including who will take the actions	

## 2.6 Step 6: Assess the impacts of your political strategies

The last step is to assess the likely impacts of your political strategies and estimate whether you have adequately increased the political feasibility of your desired policy reform. This estimate is not an exact science and requires judgment. Do you think you have reduced the intensity of opposition from a key stakeholder that resists the policy? What are the chances that your compromise with a non-mobilized group will encourage them to publicly support the reform? Strategies can also interact with one another in ways that make it difficult to predict the consequences. A group discussion among team members may help this assessment, but ultimately some uncertainties will remain.

Hypotheses can be developed for each strategy with indicators to measure its impact. (For example, if you expect a strategy to make an interest group more supportive of a particular policy, you can monitor and assess the public statements of the group's leader to see if they are in fact more positive.) This step is complicated, but it can help develop better political strategies based on the assessments. It can also build evidence about what works and what doesn't in applying political analysis to real-life situations.

At this point, you should have clarity on the following items:

What worked and what did not work in implementing the political strategies to improve the policy's political feasibility:	
How could the political strategies that were implemented be improved?	
What additional political strategies could be considered to improve the policy's political feasibility?	

## 3 Write a Report

In most cases, a written report will be needed to inform the client about the results of the analysis. The length and detail of the report should be adapted to the particular client and their requests.

The document may be confidential depending on who the client is and what the client decides. The client may decide, for example, to keep the report confidential within the immediate reform team, because it can contain sensitive information and judgments about specific stakeholders, and its dissemination could create tensions and could inform stakeholders about the client's proposed actions and thereby change the reform dynamics.

The report should cover the following topics:

1. Policy definition and the problems intended to be solved
2. Brief context of the policy
3. Summary of findings from stakeholder analysis, including a table showing the position and power of each stakeholder (can use visual representations from *PolicyMaker* software)
4. Proposed political strategies, including information on who will take action and likely consequences of each action

## **4 Conclusions**

Applied political analysis cannot guarantee success in policy reform or implementation. The real world is more complex than the kind of analysis proposed here. Policy processes are often unpredictable, and the context may change from one day to the next. However, being prepared to manage the political dimensions of health policy processes can increase the likelihood that the changes will achieve the desired outcomes. Repeating the analysis over time as the policy process unfolds, and keeping track of stakeholders and strategies, can increase your chances of successfully managing the politics of change.

Conducting an applied political analysis is challenging due to various reasons:

- It requires coordination and effective communication with the client, within the analyst team, and with the larger reform team. Communicating the purpose and scope of the analysis effectively and regularly to the larger team is necessary to ensure that the results of the analysis are useful and used.
- Understanding the political context of a place and a policy requires iteration, patience, and determination to understand the different layers of meanings, and make sense of contradictory information; it often requires local knowledge to interpret what is going on.
- A dynamic political context can make it hard to assess the positions of stakeholders regarding a certain policy. Applied political analysis should be an iterative process.
- Ensuring access to stakeholders may prove difficult and assessing their position and power can be challenging.

In conclusion, conducting a stakeholder analysis is an essential element in designing political strategies to shape the political context of policy reform. The technical and the political need to be linked together and speak to each other, in order to design public policies that can be adopted and implemented effectively, in health as in other sectors.

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### **Additional Readings on Stakeholder Analysis**

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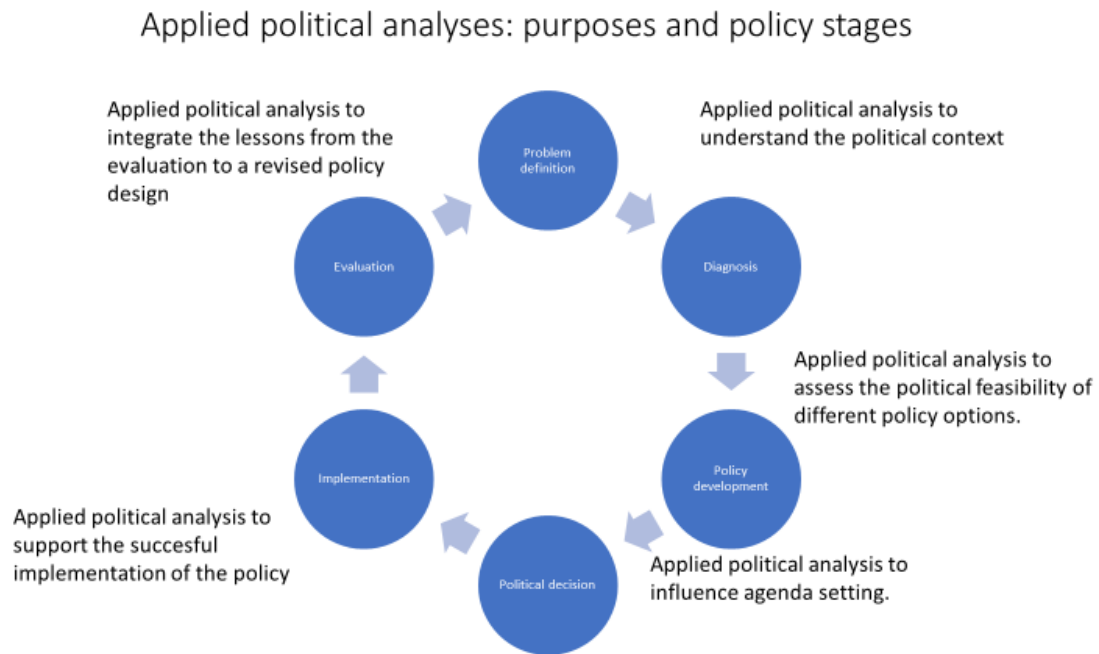
## Figures

Figure 1: Policy cycle



Source: Roberts et al., 2004.<sup>2</sup>

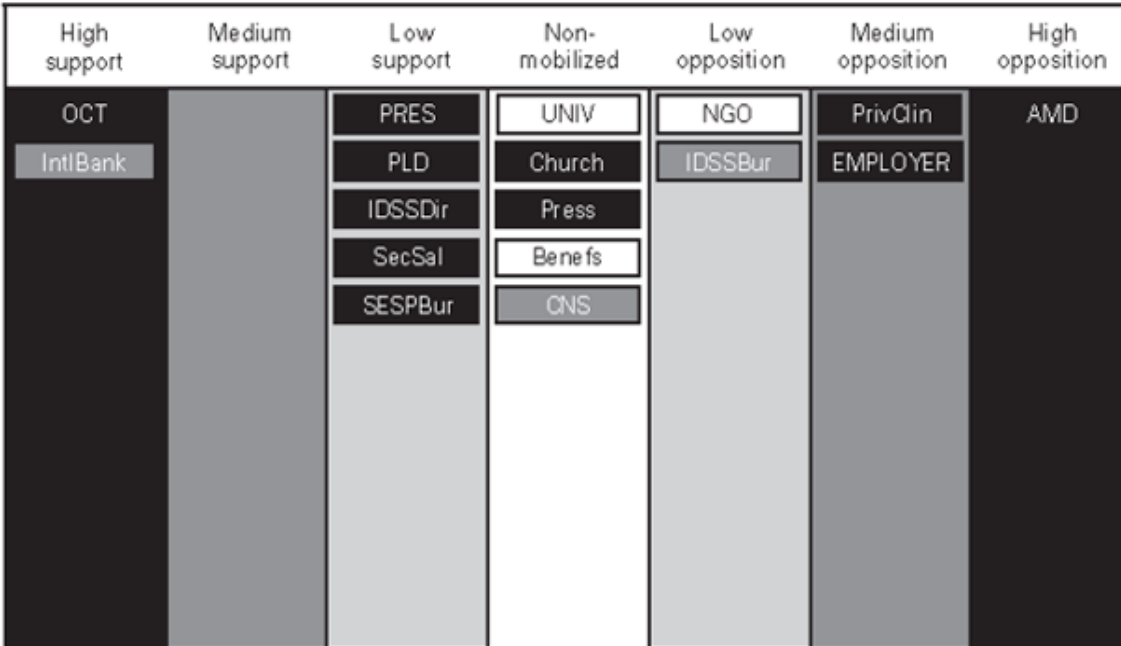
**Figure 2: When to do applied political analysis**



Source: Policy cycle adapted from Roberts et al., 2004.<sup>2</sup>

**Figure 3: Examples of political maps**

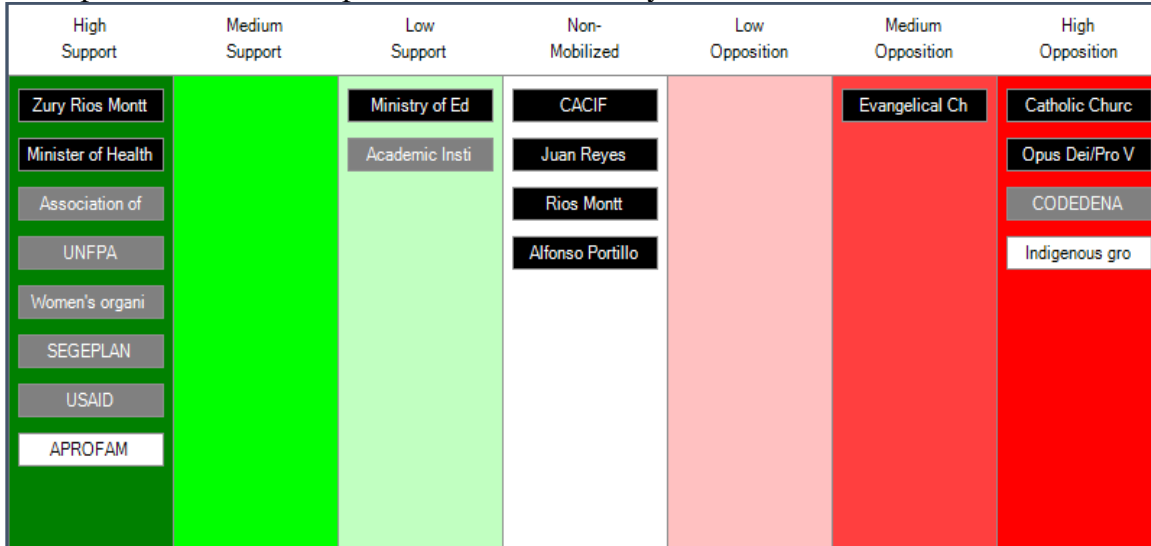
Example 1: Dominican Republic Health Reform



Key: white box = low power; grey box = medium power; black box = high power.

Source: Glassman et al., 1999.<sup>8</sup>

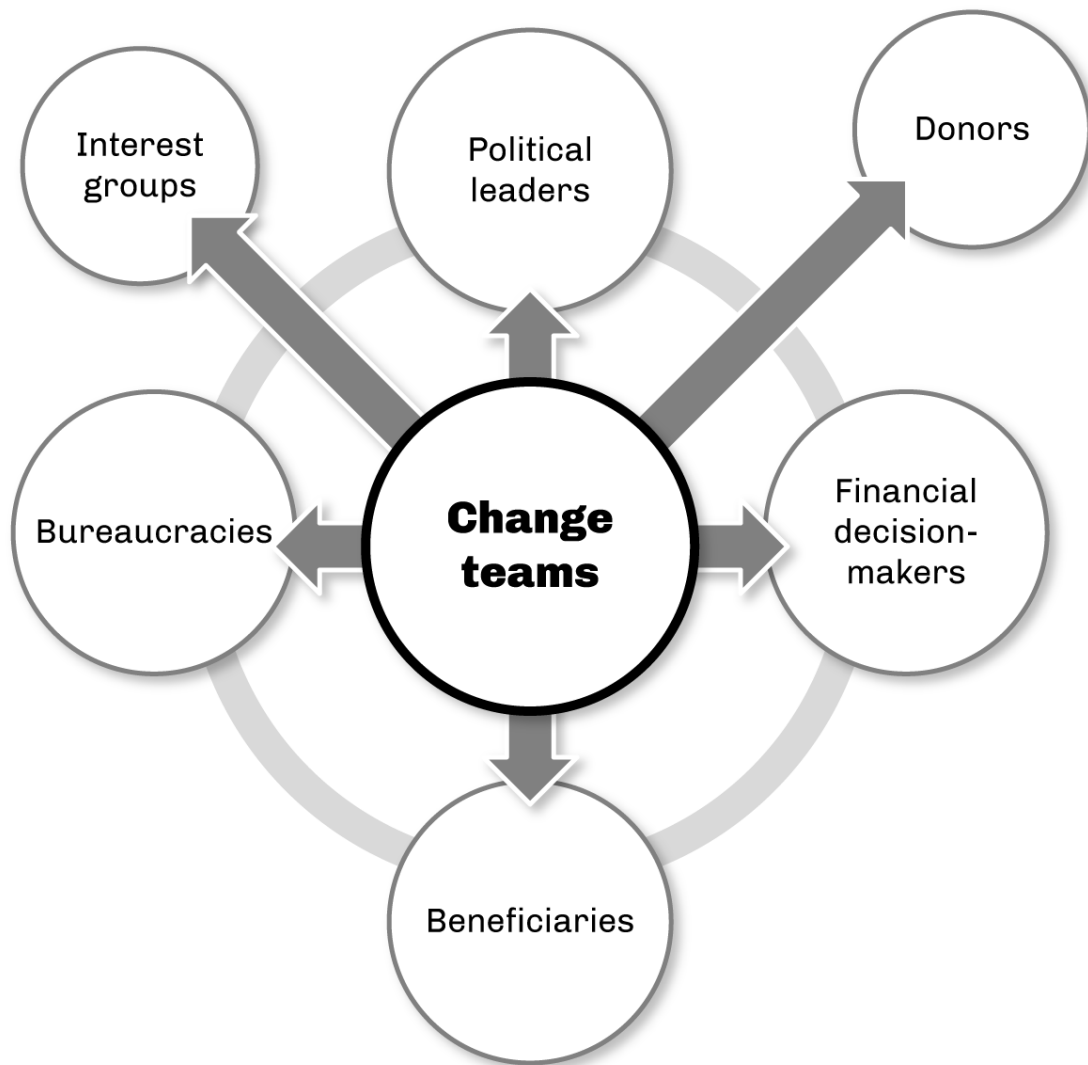
Example 2: Guatemala Reproductive Health Policy



Source: Barros et al.



**Figure 4: Stakeholder groups**



Source: Campos and Reich, 2019.<sup>13</sup>

## Appendix 1: Glossary

<b>ANALYSIS, POLITICAL</b>	A process for assessing the political factors that affect the feasibility of adopting or implementing a selected health reform.
<b>CHANGE/REFORM TEAM</b>	A group of people who collaborate to shepherd a health reform through policy design and adoption. Change team members are often people with policy expertise and the political capacity to mobilize others in support of the reform. The composition, positioning and power of a change team has a significant impact on the likely success of the reform efforts.
<b>CONTROL KNOB (OR POLICY INSTRUMENT)</b>	An area of the health sector that can be changed by public policy, is typically under the control of policy makers, and which affects the performance of the health sector. The Flagship Framework proposes five control knobs (or policy instruments): financing, payment, regulation, organization and behavior/persuasion (see separate entries).
<b>HEALTH REFORM CYCLE</b>	A model describing how policies for the health sector are designed, implemented and evaluated. In the Flagship Framework, the health policy cycle is an iterative process that involves: problem definition, causal diagnosis, policy development, political decision, implementation and finally, evaluation. Evaluation leads to identification of new problems and the cycle begins again.
<b>HEALTH SECTOR REFORM</b>	The complex process of designing and implementing policies that purposefully seek to influence the societal and institutional policies and organizations that create, protect and promote the health of the population.
<b>IMPLEMENTATION</b>	The process through which a public policy is carried out in practice to produce social impacts.
<b>INTEREST GROUP</b>	A social group that has a set of common interests and seeks to influence the government (or other institution) to move in a particular direction to protect those interests. Examples of interest groups in the health sector include consumer groups, medical associations, and pharmaceutical industry associations.
<b>POLICY CYCLE</b>	The process by which policies are designed and utilized. (See separate entry: health reform cycle.) The Flagship Framework's cycle is: Problem definition → Diagnosis → Policy development → Political decision → Implementation → Evaluation; the Flagship Framework also emphasizes the role of ethics and politics throughout the policy cycle.
<b>POLITICAL FEASIBILITY</b>	The likelihood that a proposed health policy or reform can successfully be adopted and implemented within a particular society. Political feasibility depends on the relevant players, their levels of power, their positions on the proposed reform, and perceptions of its likely impact.
<b>STAKEHOLDER ANALYSIS</b>	The process of determining which individuals and groups have an interest in a particular policy, what their positions on the policy are, and the level of power that each has, in order to develop strategies that improve the political feasibility of adopting or implementing a public policy by strengthening supporters and weakening detractors.

## Appendix 2: Example of list of stakeholders by category

Stakeholders categories	Title	Name
Interest groups	<ol style="list-style-type: none"> <li>1. Indian Medical Association, Odisha</li> <li>2. Private healthcare providers</li> <li>3. Public Hospital Managers</li> <li>4. Health insurance companies</li> <li>5. Journalist – Indian Express</li> <li>6. President of Private Medical Establishment Forum</li> </ol>	
Bureaucracy	<ol style="list-style-type: none"> <li>7. Principal Secretary / Addl Secy of Health</li> <li>8. Mission Director, National Health Mission</li> <li>9. CEO/DyCEO, State Health Assurance Society</li> <li>10. OSTF State officer (DMET/JtDMET)</li> <li>11. Chief District Medical Officers (2)</li> <li>12. Principal Secretary Department of Agriculture and Farmer's Empowerment</li> <li>13. Women and Child Development Department</li> </ol>	
Financial decision-makers	<ol style="list-style-type: none"> <li>14. Principal Secretary / Addl Secy of Finance</li> <li>15. District collector (2)</li> </ol>	
Donors	<ol style="list-style-type: none"> <li>16. UNFPA, Odisha</li> </ol>	
Beneficiaries	<ol style="list-style-type: none"> <li>17. Patient advocate - COPASAH Global Convener</li> </ol>	
Political leadership	<ol style="list-style-type: none"> <li>18. Office of the Chief Minister</li> <li>19. BJD political leaders</li> <li>20. BJP political leaders</li> <li>21. CP political leaders</li> </ol>	

## Appendix 3: Example of interview guide

### Guiding and probing questions for stakeholder interviews.

1. Could you please describe to me your role and primary responsibilities?
2. How do you see the current Primary Health Care system in Odisha? (i.e. how do most people receive PHC services in the state)
3. In your opinion, what are the priorities in improving Primary Health Care in Odisha?
5. Can you tell something about Health and Wellness Centres? How familiar are you with this initiative put forward by the Central government?
6. What do you think about the idea of transforming Sub-Centres and Primary Health Centres into Health and Wellness Centers?
7. What do you think about the idea of services being delivered through a team, led by a new cadre of non-physician health worker, a mid-level health provider, supported by one or two multipurpose workers, and ASHAs?
8. Who do you think should provide PHC services (maternal and child health, **chronic disease management**, etc.)?
9. Who do you think should provide services for Screening, Prevention, Control and Management of Non-communicable Diseases?
10. What do you think about the idea of linking performance to payment of health workers?
11. To what extent do you think HWCs is a good policy? How will this policy turn out for Odisha?
12. Do you have any concerns about the policy?
13. Does your organization/institution engage with policy makers in the state? How so?
14. Who do you have to go through to voice your opinion/concerns about a new program or policy?
15. Which groups or individuals do you think will support the new policy for Health and Wellness Centres? Will oppose the new policy? Will remain neutral regarding the new policy?
16. What changes in the new policy might persuade some of the opponents to be more supportive?