Promoting policies for national ownership of nutrition: principles from maternal and newborn survival studies

Jeremy Shiffman, PhD
Associate Professor of Public Administration and Policy
American University, Washington, DC
jshiffma@american.edu

Presentation at Cornerstone Meeting: Investing in Micronutrients - From Past Experiences to Current Challenges
13 June 2011
Orienting question

What factors enhance the likelihood a public health issue will receive attention (authoritative decisions and public resources) in a national political system?

Much speculation; little research

Drawing on:
  - Public policy theory
  - Case studies of maternal and newborn survival
Studies in 9 low-income countries (2003-2011)

- Maternal survival (Guatemala; Honduras; India; Indonesia; Nigeria)
- Newborn survival (Bangladesh; Bolivia; Malawi; Nepal)
- Case studies
  - Informant interviews
  - Document analysis
  - Observation of implementation sites
Many factors, but five present systematically

- Global normative agreements
- Political entrepreneurs
- Policy community cohesion
- Credible indicators
- Clear policy alternatives
First factor: Global normative agreements

What they are:
- Agreements among actors, especially national governments and international donors, that an issue must be addressed
- Norms are shared beliefs about appropriate behavior

Why they matter:
- Nation-states, like individuals, are socialized into preferences
- Reputational effects

Examples:
- The MDGs
- Pride in Nepal and Bangladesh in potentially reaching child survival MDG; recognize importance of neonatal survival
Second factor: Political entrepreneurs

- Who they are:
  - Individuals acknowledged as strong champions for the cause

- Why they matter:
  - Defining issue; inspiring action; bringing together policy communities

- Examples:
  - Assistant Minister for Women’s Roles in Indonesia (for maternal)
  - Save the Children doctor in Bangladesh (for newborns)
Third factor: Policy community cohesion

- **What it is:**
  - Coalescence among network of concerned organizations
  - Policy communities can include multiple organizational types

- **Why it matters:**
  - Enhances policy community authority and political power

- **Examples**
  - Cohesive Honduran maternal mortality policy community (1990s)
  - Fragmented Malawian newborn survival policy community (2000s)
Fourth factor: Credible indicators

- What these are:
  - Convincing measures that demonstrate severity of the problem

- Why they matter:
  - Numbers can alarm politicians
  - May be used to convince politicians on progress

- Examples:
  - Honduras 1990 RAMOS study on maternal mortality
  - Nigeria – absence of credible sub-national maternal mortality data
Fifth factor:

Clear policy alternatives

- What these are:
  - Means of addressing the problem backed by evidence and clearly explained

- Why they matter:
  - Policy-makers more likely to act on issues they think they can do something about

- Example:
  - Safe motherhood intervention fights prior to 2007
  - Growing consensus surrounding three pillars
Relevance to micronutrient agenda?

- Global normative agreements
- Political entrepreneurs
- Policy community cohesion
- Credible indicators
- Clear policy alternatives