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28th Nov 2017



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Using Stakeholder Analysis to Examine Acceptability and Appropriateness of a nutrition policy: An example from Mexico



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What is Stakeholder Analysis (SA)

- Stakeholders are actors (persons or organizations) with a vested interest in nutrition action (policy, program, intervention)
- Systematically gathering and analyzing information to **understand the interests of stakeholders**
 - Who holds power and influence
 - Who supports or opposes the nutrition action
 - What are the issues affecting the nutrition action

What is Stakeholder Analysis (SA)

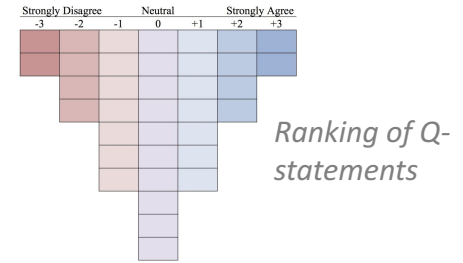
- Used **when developing** and/or **implementing** a policy or program.
- **There are various uses for SA:**
 - Advocacy and communications plan
 - Consensus building and negotiation
 - **As it relates to implementation research**, SA can be used to inform the acceptability and appropriateness of a nutrition action

Methods in Stakeholder Analysis

A. Influence and power grids



B. Q-methodology: method used to study stakeholder view points on an issue (Watts and Stenner 2005)



C. Qualitative survey: interest, position, values, other domains. (Schmeer K, 1999)

D. **Secondary analysis using policy framework**: audio or written responses

Figure 2. A Classification Scheme of Implementation Research



Commitment, Support, Financing and Sustainability

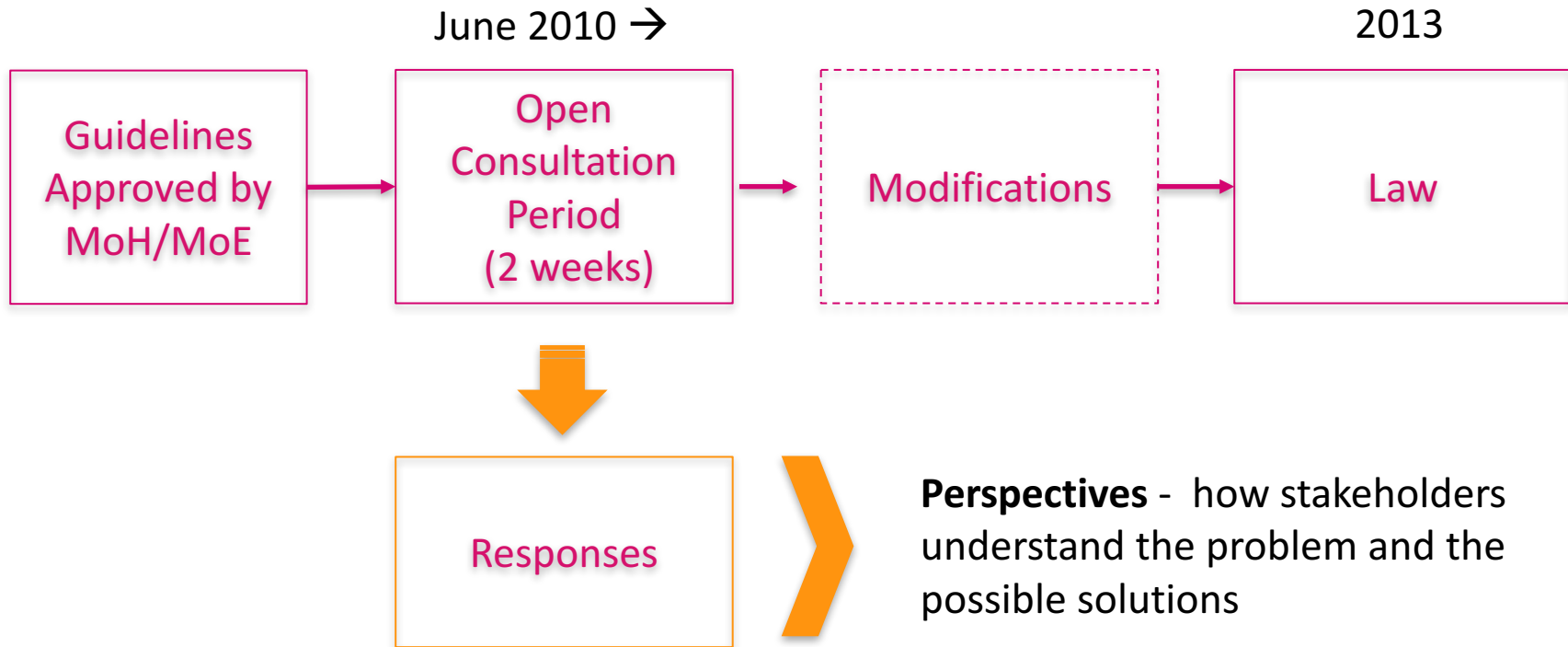
Objects of Implementation	Initiation and Scoping	Planning & Design	Implementation, Iterative Improvement & Scaling Up
Nutrition-specific interventions	diverse forms of assessments, stakeholder analysis , opinion leader research and consultations to guide: agenda setting, identification of policy/program/ intervention options and their fit with a) the problem and b) delivery capacities, and c) available collaborations/ partnerships .		
Nutrition-sensitive actions in various ministries / sectors			
A national multisectoral nutrition agenda			
NGO projects (typically sub-national)			
Implementation innovations			

Initiation and Scoping

SA used in the initiation and scoping phase can **inform implementation outcomes**, such as:

- **Acceptability:** perception that a nutrition action is agreeable to stakeholders.
- **Appropriateness:** perceived fit or relevance of the nutrition action for a setting, target audience or issue. (Peters et al. 2013)

Mexico Case



Analysis conducted in 2011

Stakeholder Perspectives

- According to Clark (2000), **perspectives** can be further understood by examining
 - the **issue** that gives rise to the Guidelines
 - the **expectations** for the Guidelines, and
 - **demands** made by stakeholders
- Qualitative analysis of responses

Monterrosa et al. Health Policy and Planning, 30 (1) 2015, p.28–38,

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	Academics	Health Professionals	Citizens	Parents	Food industry
Issues	Negative characterization on food products	1.5%		2.5%	25%
	Guidelines will not solve obesity	1.5%		2.0%	24%
	Loss of income and jobs			1.0%	25%
Expectation	High Prevalence of obesity	41.0%	32.5%	34.5%	27.0%
	Loss of income and jobs	1.5%		1.0%	2.0%
	Improve eating habits	23%	20%	9%	29%
	Healthy food environment	7%	19%	8%	3%
	Better Health	17%	11%	13%	12.5%
Demands	Fair treatment to food products				13%
	Eliminate junk foods/enact regulations	26.0%	17%	33.5%	27.0%
	Public Health Policy	18%	19.5%	18%	18.5%

Issue Frames

- The aim of the guideline was about creating healthy eating habits in children
 - “Diet should be complete, balanced, varied, adequate and hygienic. The diet should consist of fruits, vegetables, non-processed foods and potable water”
- The issue perceived by all actors was obesity
 - The argument shifts to calories, portion sizes, and good/bad foods.

Applying SA to Address Appropriateness

- Use the SA findings to align the Guidelines around **key issue – eating habits** of children at school
 - Communication, advocacy, and promotion plan
 - for key stakeholders (e.g., scripting, resources)
 - large scale media campaigns
 - enlisting consumer or advocate groups

Applying SA to Address Appropriateness

- Potential shared interests beyond *obesity*
 - Healthy food options/food environment, even if processed foods
 - Nutrition education – to promote better habits
 - Multi-actor approach

	Academics	Health Professionals	Citizens	Parents	Food industry
Nutrition education	2.0 %	10.0%	7.0%	6.0%	14.0%
Availability of healthy food	8.0%	11.0%	10.0%	12.0%	3.5%
Multi-actor approach	6.5%	4.5%	1.5 %	6.0%	10.5%

Contribution to IR

- In initiation and scoping, SA can be useful when perspectives are likely to be divergent
 - Conduct SA early in the planning process
 - Primary data
 - Conduct a qualitative survey, or Q-methodology
 - Hire a University Professor or market research firm
 - Secondary data (memos/meeting transcripts)
 - *Post-hoc* SA is still valuable

The data generated from this research provides **options** for **improving the relevance of and agreement** for a nutrition policy, program or intervention.

Contribution to IR

- To improve appropriateness and acceptability (implementation outcomes), SA may assist with finding
 - Points of convergence and shared interest, and finding (un)likely supporters for your nutrition action
 - Issue frame and framing the public discussion

Acknowledgements and Disclaimer

- I gratefully acknowledge my co-authors on the paper:
 - National Institute of Public Health (INSP), Mexico: Fabricio Campirano, Lizbeth Tolentino Mayo, Sonia Hernandez Cordero, Juan A Rivera
 - University of South Carolina: Edward A Frongillo
 - Institute of Medical Science and Nutrition, Mexico City: Martha Kaufer-Horwitz
- Disclaimer – the views expressed about SA and implementation research are the views of the presenter, Dr. Eva Monterrosa. These views do not reflect the views of Sight and Life, the co-authors (listed above), INSP, University of South Carolina, Institute of Medical Science and Nutrition, or the Government of Mexico.

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4. Schmeer, Kammi. 1999. *Guidelines for Conducting a Stakeholder Analysis*. November 1999. Bethesda, MD: Partnerships for Health Reform, Abt Associates Inc.
5. Watts and Stenner. 2005. *Doing Q methodology: theory, method and interpretation* http://sites.nd.edu/lapseylab/files/2014/10/Watts_2005_Doing-Q-method-1.pdf

Resources

- A book on Q-Methodology. <https://us.sagepub.com/en-us/nam/doing-q-methodological-research/book234368>.
- For free software to run Q-Methodology: PQ Method (Schmolck, 2002), <http://schmolck.userweb.mwn.de/qmethod/>
- For a complete list of implementation outcomes see Peters et al. 2013, Chapter 3. http://who.int/alliance-hpsr/alliancehpsr_irpguide.pdf