

MONITORING AND EVALUATION (M&E) FRAMEWORK
for Evidence-based Legislation/Participatory Decision-making for TB Program Implementation

NARRATIVE SUMMARY

The M&E framework for evidence-based legislation/participatory decision-making for TB program implementation hypothesizes that to monitor and evaluate local health policies more efficiently, the process of policy development should be viewed as flowing in a continuous, dynamic and circuitous motion. It also proposes that policy-making at the local level must be tracked and assessed at every stage as a particular legislative measure or executive issuance traverses the policy-development route. There is also a need to examine the specific actors of governance or decision-making who are responsible for performing the required action at each stage of the process.

The **local policy environment**, in terms of strictly formal institutions, is composed of the three major policy-making actors – the **local chief executive** (LCE), the **sangguniang panlalawigan/panlungsod/bayan** (provincial/city/municipal legislative council), and in the particular case of health polices, the **local health board** (LHB). Each of these three policy entities is supported by their respective technical staff or technical committees. From this institutional structure emanates the policies recognized by law, e.g., executive issuances in the case of the LCE; ordinances, resolutions and appropriations in the case of the sanggunian; and implementing guidelines or legislative/budgetary recommendations in the case of the LHB.

There are other actors of decision-making who contribute to the policy process through the pursuit of their own agenda and/or advocacies – the LGU constituents, national government agencies (in our particular case, the Department of Health or DOH), regional bodies (in this case, the DOH Regional Offices or DOH RO), non-governmental or people’s organizations (NGOs/POs), and the private sector.

In the real world, the policy process may be set into motion by any of the policy actors at any given time. For instance, an NGO/PO may file a petition with the office of the governor regarding a policy concern affecting a sectoral interest. Or the DOH RO and/or the LHB may provide the local government unit concerned with policy recommendations that the latter may adopt as draft policies. Or the sanggunian committee on health may meet to discuss an urgent matter that will require legislative action.

However, to simplify the presentation and analysis of the policy procedure, this framework assumes that the process usually begins with the collection, collation and analysis of various policy inputs, proposals, data and information. These may be done by the LCE, the sanggunian, the DOH RO, the LHB or by the other policy actors at the local level, whether acting separately or collectively. Some relevant M&E questions: *Are the policy decision-makers using the same set of data? How much of the actors’ respective biases/agenda/limitations affect the interpretation of the data? What problems or issues are being suggested by the data?*

The next stage is the drafting of the proposed policy measure addressing the health problem or issue. If the proposed solution requires legislation, then the sanggunian formulates an ordinance. If the response requires enforcement, then the LCE prepares a draft executive order. And if the remedy requires joint action, then the LHB may render an advisory recommendation calling for the promulgation of implementing guidelines.

The formal introduction or sponsorship of the policy measure can be performed either by the LCE (in the case of an executive or administrative order) or by the sanggunian (in the case of an ordinance or resolution). The inquiries that may be asked are: *What is the legal basis for the proposed measure? Are its premises borne out by the facts out there in the community? Are its conclusions substantiated by the evidence or data brought out during the proceedings? Are its recommended actions within the author's authority? What are the budgetary and administrative implications of the measure?*

Committee-level discussions will then follow. In the case of the executive order, the LCE consults his/her technical committee to refine the issuance. In the case of the ordinance, the appropriate sanggunian committees are tasked to conduct preliminary deliberations on the measure. Public hearings may have to be held in certain instances, thus requiring the participation of the other policy actors. The pertinent questions are: *Does the evidence tell us that existing policies do not properly address the identified problems or issues? Are these problems or issues a matter of implementation or a matter of legislation? Is there a need to amend/modify the policies? How can the policies be strengthened? Is there a need to adopt new policies? Is there even a need for a policy, in the first place?*

The next two stages – plenary deliberations/2nd reading and 3rd reading – are applicable only to the sanggunian. The following inquiries may be propounded: *Is legislation required to respond to the expressed problems or issues? If so, is the legislative response to the problems or issues within the competence or jurisdiction of the sanggunian? If so, what legislative measure is appropriate – an ordinance or a resolution? If legislative action is not called for, by whom and in what manner should the concerns be articulated and then conveyed to the proper agency?*

Once the ordinance is approved at the 3rd reading, it is submitted to the LCE for his/her consideration and possible exercise of the veto power. This may require instituting improvements on the ordinance, which may in turn necessitate bringing it back for further sanggunian deliberations.

After executive consideration, the ordinance will now be subjected to the legal requirements of review and publication. This may result in another round of policy improvement before the measure is given effectivity. In the case of the executive order issued by the LCE, requirements of review by higher LGUs and publication are also complied with before the same can take legal effect.

Implementation of the ordinance or executive order follows. Of course, it is the LCE who performs this function, although in some instances, he/she may do so with the assistance of the LHB and/or the other policy actors (constituents, NGOs/POs, private sector). Implementation may consist of the direct administrative action by the LCE and the concerned local executive offices or the issuance of rules,

regulations or guidelines designed to execute the policy/legislative policy.

Thereafter, evaluation is conducted, which is the assessment of the effectiveness of the program of action taken, and an appraisal of the environment as to whether there has been a positive change that is directly attributable to said program of action. This may cause another level of policy improvement, which may consist of the drafting of a new proposed measure, or the sponsorship of an amendatory ordinance, or the continuation of committee-level discussions.

But the policy tracker/evaluator should take note that the arrows in the framework are interlocked in a circuitous arrangement. This suggests that policy development is a dynamic, constantly changing process. This means that after evaluation, a second level of observation, data gathering, and analysis may be performed leading to a new course of policy action. Another round of evaluation will then have to be conducted, which may result in a third round of observation, data gathering, analysis, and still a newer course of policy action that in certain cases may mean the termination of the policy.