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Do Policy Capacities Matter for Federal Policy Design? Evidence From the Implementation of Three Social Policies in Brazil

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ABSTRACT

Bringing together the literature on policy design, policy capacity and policy making in multilevel systems, this paper argues that the effectiveness of policy design in federal countries depends, *ceteris paribus*, on the adequacy of federal and local policy capacities. Consequently, for policy design to be effective, federal policy capacity is assumed to be able to tailor policy design to existing local policy capacity or to design policies that are able to activate the improvement of local policy capacity. To demonstrate the interconnection between federal policy capacity and effective policy design, the paper analyses three relevant social policy programmes in Brazil. The emerging empirical evidence confirms that considering federal policy capacity as a key driver of policy effectiveness in multi-level systems is a promising analytical perspective.

1 | Introduction

Policymakers design policies to achieve specific policy outcomes. The way a policy is designed certainly influences its implementation and, thus, its potential effectiveness in reaching expected results. In the large multidisciplinary literature that has focussed on the drivers or causes of effective implementation, an emerging stream of public policy research emphasizes that policy capacities are pivotal elements influencing both the quality of policy design and policy outcomes (through coherent implementation) (Painter and Pierre 2005; Gleeson et al. 2009; Legge et al. 2011).

The relevance of policy capacities has been considered from different aspects in various policy fields. However, there is still insufficient reflection on how policy capacities work in and impact multilevel systems and, above all, when they are designed at the federal level, how their implementation depends on the

local government level. Accordingly, this study aims to fill this gap by focusing on federal policies in Brazil, a federal country featuring deep diversity among subnational units not only in socioeconomic terms but also in terms of local policy capacity. Thus, this paper concerns whether and how the federal government can pursue effective policies when the local-level policy capacity for performing different policy tasks varies substantially.

In the second section of this paper, we show how the Policy Capacity Framework is very useful and can be adapted for analyzing the issue of the effectiveness of policy design in federal countries, in cases where implementation is under the responsibility of local governments. The third section, following a summary of the multilevel characteristics of policymaking in Brazil, outlines the research design. The fourth section presents the analysis of three empirical cases of multilevel policies and discusses the findings thereof. The concluding section summarizes these results and proposes two lines for future research.

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2 | Policy Capacities, Design and Effectiveness in Federal Countries

Policy effectiveness has gained prominence in public policy analysis, with a focus on two key concepts: policy design (and related policy instruments) and policy capacity. Policy effectiveness is the expected outcome of policy making and policy design (B. G. Peters and et al. 2018). Hence, renewed interest in policy design, instruments, and capacities is welcomed (G. Peters and Fontaine 2022; Wu et al. 2015, 2018; Mukherjee and Bali 2019; Mukherjee et al. 2021). The new directions emphasize that policy design is a complex, nonneutral activity constrained by political and technical dimensions (Capano 2018; Capano and Mukherjee 2020) and that effectiveness can be assessed by evaluating the capacity to select appropriate instruments for coherent implementation processes.

The concept of policy capacity is central to understanding governments' ability to achieve the expected policy results. In the literature, various labels have been adopted to define such capacity, including state capacity, administrative capacity, governance capacity, and bureaucratic capacity (Saguin et al. 2018), demonstrating that policy effectiveness is linked to the capacity to formulate and implement policy in due course.

Wu et al. (2018) proposed an analytical framework that considers all these relevant capacities in a well-defined manner. According to them, policy capacities are “the set of skills and resources—or competencies and capabilities—necessary to

perform policy functions” (Wu et al. 2018, 3). These skills and competencies can be analytical, operational, or political, whereas relevant resources/capabilities are embedded in the individual, organizational and systemic levels. The interactions between these dimensions of policy capacity are shown in Table 1.

The value-added analysis of this framework is that it identifies the capacities needed for governments to perform their functions, for governing arrangements to work effectively, and for administrative organizations to do their job. In addition, the granularity of this framework allows for the analytical consideration of different dimensions of government capacities, which are very often conflated and are therefore not helpful either in an explanatory or prescriptive sense.

This framework considers the different levels at which the three capacities can be applied, allowing for a more fine-grained analysis of reality. It distinguishes between nine types of capacity, which can be seen as constitutive units of government capacity and can be a powerful analytical tool for assessing how effective governments are in designing and implementing policies or, better, what capacities are necessary according to a specific context to formulate and implement policies.

Finally, the framework is useful for understanding policy design, considering that it requires an equilibrium between “their capacity or will to pursue relevant changes, the political problems that can arise from the proposed changes, and their

TABLE 1 | Policy capacities: Levels and dimensions.

Level	Individual level	Organizational level	System level
Dimension			
Analytical capacity	• Skills and experience in policy analysis • Skills and experience in policy evaluation • Knowledge and expertise in the use of analytical tools	• Availability (accessibility) to policy professionals with adequate analytical capacity • Practices and organizational machinery data collection and analysis • Organizational cultural embracing evidence-based policymaking	• Extent and quality of system-wide data collection and data sharing • Accessibility of data or information to non-government organizations and private sectors • Availability and competition of policy advisory services • Institutional requirements and standards for policy analysis and evaluation
Operational capacity	• Skills and expertise in human resource management • Skills and expertise in budget and financial management • Skills and expertise in project management • Strategic management and planning	• Level of coordination of the internal process • Performance management system • System of autonomy and control within organization	• Intergovernmental and interagency coordination • Effectiveness of policy network and policy community • Clarity in the roles and responsibilities of different organizations in policy process
Political capacity	• Knowledge about policy process • Policy acumen • Skills in communication, negotiation and consensus building	• Political legitimacy in policy process • Access to key decision-makers • Effectiveness in stakeholder engagement	• Extent of political accountability for policies • Levels of public trust in government. The level of participation of nonstate actors in policy process • The presence of policy entrepreneur(s)

Source: Adapted from Wu, Howlett, and Ramesh (2018. See pages 5 and 9).

technical capacity to deal with these problems in a way that can be acceptable to stakeholders” (Capano and Mukherjee 2020, 204). This is especially delicate in federations, in areas in which federal governments pursue policy goals that need to be implemented locally, with all the differences in terms of local capacities.

In fact, the problem of policy implementation in federal countries is often seen as a problem of finding the right mix of coercion, coordination, and cooperation (Wiltshire 2020). However, it is well known that different types of coordination (more or less hierarchical) can lead to similar outcomes (Bakvis and Brown 2010). This mix often depends on political, cultural, and economic factors (Kleider and Toubeau 2022). Here, we propose focusing on policy capacities (Wu et al. 2018) to understand why policies designed at the federal level and implemented at different local levels can fail or succeed. Federal and local policy capacities are considered relevant drivers that allow for a better understanding of multilevel policymaking and its effectiveness in federal countries.

In federations, the complexities of intergovernmental relations and subnational public policy management make implementation a major challenge (Bednar 2009). Additionally, federal governments share authority at multiple levels, while subnational governments play a key role due to their autonomy and ability to innovate (Simeon and Radin 2010; Wallner et al. 2020), that is, creating new policies and adapting policies to local contexts. Moreover, subnational units vary greatly in terms of political and socioeconomic characteristics, as well as in financial and human resource capacities to implement policies, and this is a key dimension to consider when formulating policies. This raises the challenge of reconciling subnational autonomy with the federal government’s goal of equalizing policy outcomes across different contexts.

To address these questions, we argue that, following the analytical indications of the Policy Capacity Framework, the effectiveness of policy design depends, *ceteris paribus*, on the adequacy of federal and local policy capacity, which policy-makers should take into account when designing policies, and

thus on: (a) the federal capacity needed to formulate policies and to monitor and enforce policy during implementation and (b) the characteristics and distribution of the policy capacity at the local level, which can also be enhanced during the implementation process.

In cooperative federations where subnational governments implement federal policies and coordination is necessary, local policy capacity is a core element of policy design. Thus, the effectiveness of federal policy design is significantly influenced by the federal government’s capacity to select appropriate policy instruments that (a) align with the analytical, operational, and political capacities of local governments or (b) activate processes through which local governments can strengthen and improve their capacity.

Therefore, as shown in Figure 1, we assume that the effective implementation of federal policies depends on whether and how the characteristics of federal policy design dialogue with existing local capacities, and even provide for the enhancement or development of them.

Local policy capacities for policy success were the subject of much research (Robinson 2008; Cárdenas 2010; Fukuyama 2013; Knutsen 2013). This stream of research highlights the common use of human and financial resources by local governments, emphasizing the different characteristics of these capacities and highlighting their different dimensions (institutional, fiscal, administrative, regulatory, etc.) (Cingolani 2013). In Brazil, the policy implementation problem has been deeply investigated by scholars who have focussed on state capacity at both the national and local levels. For example, there has been a focus on participatory processes as a relevant factor that can strengthen state capacity in implementing policies (Abers 1998; Abers and Keck 2009; Pereira and Abers 2023) and on political patronage in driving more responsive and accountable behavior in the municipal bureaucracy (Toral 2024). Tandler has elucidated the special relationship between local bureaucracies and their society and on the state’s capacity to build a strong commitment in public workers that can justify good performance in some policy fields in the poorest parts of Brazil (Tandler 1998; Tandler and

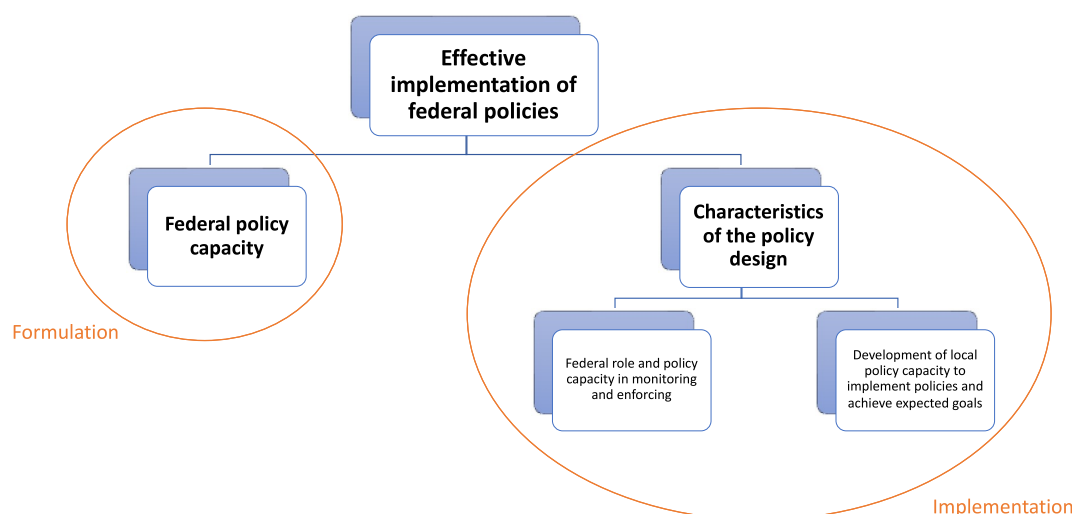


FIGURE 1 | Federal policy capacity, policy design and policy effectiveness in federal contexts. [Colour figure can be viewed at [wileyonlinelibrary.com](https://onlinelibrary.wiley.com)]

Freedheim 1994). Yan et al. (2023) have shown how policy capacities at the state level matter in the implementation of education reforms, whereas Braga and Martins (2023) have elaborated an interesting index of municipal policy capacities.

Much attention has also been given to federal capacities. Pires and Gomide (2015), through a comparative analysis, show that both technical and political capacities matter for the effectiveness of federal policies. Gomide et al. (2022) measure the variation and distribution of bureaucratic capacities at the federal level, focusing on variables such as bureaucratic merit and autonomy and their operational capacities, and the organizational level, and find that bureaucratic capacities are dispersed throughout the system. Cavalcante and Pereira (2022) have shown how policy capacities are asymmetrically distributed in different policy areas. Furthermore, Gomide and Pereira (2018) show that in the case of infrastructure policy in Brazil, the low level of bureaucratic autonomy and intragovernmental cohesion contribute to a very weak policy design, whereas the interaction between the federal bureaucracy and external actors (even local governments) is very precarious and fleeting.

Less attention has been given to the policy capacity of federal governments in the design of policies to be implemented at the local level, and when this is the case, there is a great emphasis on a strong role of federal coordination (Grin et al. 2021). However, it is not very clear how this role works and how the federal government is in dialogue with available local capacities.

These works elucidated specific dimensions of federal and local capacities and policy implementation, but what is missing is a more accurate analysis of how federal policy can drive effective local implementation. The Policy Capacity Framework can offer appropriate lenses because it helps to understand whether and how the effectiveness of federal policies depends on the characteristics of policy design in terms of its ability to match the content of the design with the local policy capacities and whether the federal policy design could promote the enhancement or development of local capacity where it is initially lacking.

3 | Research Design

3.1 | The Brazilian Federation and Multilevel Policymaking

The 1988 Brazilian Constitution was the most decentralized in the country's history. The federation has three levels of government (federal government, states and municipalities), and the states (26 plus the Federal District) and all municipalities (5570) have political and constitutional autonomy, legislative and administrative powers (Rodrigues et al. 2021). The municipalities' autonomy allows local governments to pass legislation; manage their own administrative apparatus and policies; and establish, collect, and allocate local taxes, making Brazil one of the most decentralized federations in the world (Lotta and Oliveira 2022).

The Constitution established a cooperative federalism, reserving specific powers for the federal government while allowing a vast

list of “in common” administrative powers and “concurrent” legislative powers regarding the fields within which the three levels of government operate jointly in administrative or legislative matters (Rodrigues et al. 2021). In this cooperative system, the three levels of government must collaborate on public policies, and the federal government can act in almost every field, inducing the implementation of subnational policies (C. M. Souza 2019; Lotta and Oliveira 2022) in a combination of *federal policy decision-making* and *local policy implementation* (Arretche 2012). Thus, the federal government formulates and funds the major social policies executed by municipalities, stimulating compliance through incentives and regulations. In this scenario, policy capacities play a central role, since municipalities should possess or acquire the necessary capacities to implement policies effectively.

3.2 | Case Selection and Methods

In order to test the reliability of the assumed link between federal policy capacity, policy design and policy implementation effectiveness, we have selected three policies that are part of the social policy sector, which are designed by the federal government and implemented by local governments in Brazil. They were selected as “critical cases”, which are chosen “to achieve information that permits logical deductions of the type” (Flyvbjerg 2006, 230), providing clarity and insights about the phenomena studied. On this basis, two critical cases of effective policy design and one critical case of low effectiveness were selected. The successful policies are the *Bolsa Família* Programme [Family Grant Programme] and the Family Health Strategy; the policy with a low level of effectiveness is the *Proinfância* Programme [Pro-Childhood Programme].

The selected cases are important programmes of three main social policies: health, education and social assistance. All of them were created after the democratization of Brazil, under the auspices of the 1988 Constitution, which established a highly decentralized federalism and expanded the responsibilities of the municipal governments in the provision of social services. The first one, the *Bolsa Família* Programme, from 2004, is the main social assistance policy in Brazil nowadays, is present in every Brazilian municipality (5570) and consumes approximately 96% of the social assistance budget at the federal level (Congresso Nacional 2023). The second, the Family Health Strategy, has been the most important and consolidated policy in primary health care for more than 30 years, and it's present in 99,2% of Brazilian municipalities (APS – Atenção Primária à Saúde no SUS 2023). Finally, the *Proinfância* Programme, from 2007, is dedicated to the expansion of early childhood education, a constitutional responsibility of local governments since the 1988 Constitution.

The successful cases were selected using the three criteria identified by Compton and Hart (2019) for classifying a policy as a ‘major policy success’. A policy is successful if: “(a) it demonstrably creates widely valued social outcomes; through (b) design, decision-making, and delivery processes that enhance both its problem-solving capacity and its political legitimacy; and (c) sustains this performance for a considerable

period of time, even in the face of changing circumstances.” (Compton and Hart 2019, 5).

The key aspects of success or low effectiveness are succinctly described in Table 2, and explored in sufficient detail in the following section.

The three cases are analyzed according to the following sequence: (i) the main characteristics of the programme; (ii) the federal policy capacities to formulate, enforce and monitor local implementation; and (iii) the local policy capacities to implement them. They’ve been reconstructed by secondary data—existing research, reports and public documents, with a focus on the analytical, operational and political capacities.

4 | The Cases

4.1 | Bolsa Família Programme (BFP)

The *Bolsa Família* Programme (BFP) is the longest-lasting poverty assistance policy in Brazil. Following several programmes distributing food, gas subsidies, milk or even cash, the federal government during Lula’s administration found an efficient public policy to alleviate extreme poverty linking financial aid directly to citizens with health and education requirements. Families receiving benefits must ensure their children attend school with at least 75% attendance and maintain children’s vaccination records up to date.

In 2004, BFP implemented several policy instruments to enhance its effectiveness through coordination, decentralization, and capillarity (Coutinho 2013). Bichir (2011) notes that alongside Law No. 10.836 of 2004, which created the PBF, several other laws, decrees, provisional measures and norms, and operational instructions are associated with the programme (Bichir 2011, 20). Therefore, the policy design evolved over time with respect to the original version approved in 2004. Nonetheless, its main goal was already present: to provide federal resources for local governments to support families in extreme poverty while ensuring compliance with eligibility criteria.

In 2005, more than 99% of the Brazilian municipalities had already formally adhered to the Bolsa Família Programme (MDS - Ministério do Desenvolvimento Social 2005).

The most relevant innovations include the following:

1. *Cadastro Único para Programas Sociais* [Unified Register for Social Programmes] (CadÚnico). Established before BFP in 2001 (Decree No. 3.877), it is carried out by the municipalities and serves as a registration tool for registering the beneficiary families, allowing them to receive cash transfers from the federal government. Currently, the registry is also used as an informational base for other programmes, becoming an important tool for identifying low-income families eligible for various anti-poverty policies.
2. *Conditionality*. To qualify for transfer, families must fulfill specific conditions. In health, children need regular

vaccinations, and pregnant women must receive prenatal care. In education, children are required to maintain regular school attendance. By the end of 2004, various administrative rulings defined the responsibilities of the Ministry of Health and the Ministry of Education regarding these conditionalities. Numerous Interministerial regulations were established, including those for School Attendance Monitoring System (in 2006); the PBF Health Management System (in 2005); and the management of conditionalities.

3. *Índice de Gestão Descentralizada* (IGD) [Decentralized Management Index]. Created in 2010 to assess the quality of information in the CadÚnico in each municipality, indicating to the federal government the financial support needed to enhance municipal management capacities. It has become a crucial coordination instrument for regulating resource transfer between federal and local governments (Bichir 2011).

The main characteristics of the BFP are important for understanding the way it works and the centrality of both federal and local policy capacities. Considering *federal policy capacity*, *analytical capacity* relies on a broad technical structure comprising highly qualified bureaucrats with expertise and years of experience in public administration (Filgueiras et al. 2020). They have successfully passed competitive civil service exams and been allocated to the ministry created especially for the social policy of poverty alleviation.

As part of a new ministry (Ministry of Social Development; MDS) and a bureaucracy involved in creating and implementing a new programme, the analytical capacity of these actors was a key element in its innovative formulation and for the creation of the necessary instruments for implementation (Sátyro and Cunha 2018; Oliveira et al. 2019). At the organizational level, the MDS group of technicians had experience in policy analysis and were able to create and manage the policy instruments needed for policy implementation.

Another analytical capacity at the organizational level is the “statistical capacity”, characterized by an extensive database supporting policy formulation and implementation. It stems from Brazil’s long-standing tradition of collecting and systematizing economic and social data, making it one of the largest in Latin America, according to the National Statistical Capacity Index (Dargent et al. 2018). This capacity was essential in creating and improving Cad-Único. The creation, maintenance, and constant improvement of the national database formed a core analytical capacity for selecting beneficiaries through monitoring and evaluating citizens’ eligibility for social benefits. This was crucial for both the federal government in accurately targeting beneficiaries and for the municipalities in effectively managing local social policies, enhancing efficiency, coordination, and reducing administrative costs.

In terms of *operational (systemic) capacity*, coordination between federal and local governments was essential for implementing *Bolsa Família*. A formal commitment defining responsibilities between both levels of government was signed by all 5570 Brazilian municipalities. Additionally, the roles of

TABLE 2 | The selected cases: three social policy programmes.

Programme	Year of establishment	Federal ministry responsible for programme's design and maintenance	Local secretary responsible for programme's implementation	Indicators of success or low level of effectiveness
<i>Bolsa Família</i> programme	2004	Ministry of Social Development ^a	Municipal Secretary of Social Assistance	(a) Social positive outcomes demonstrated by social data, scientific studies and the external controlling agency reports (b) Problem-solve capacity and political support from different parties and governments (c) Sustained a good performance and resilience
Family health strategy	1994 ^b	Ministry of Health	Municipal Secretary of Health	(a) Social positive outcomes demonstrated by social data, scientific studies and the external controlling agency reports (b) Problem-solving capacity and political support from different parties and governments (c) Sustained a good performance and resilience
<i>Proinfância</i> programme	2007	Ministry of Education, with the National Fund for Educational Development (FNDE)	Municipal Secretary of Education	(a) Poor outcomes and implementation problems in many municipalities, demonstrated by NGO's and scientific studies, and by external controlling agency reports (b) Changes in the policy design weren't capable to overcome problems faced by municipalities during implementation (c) programme's performance with low level of effectiveness, besides its resilience

^aToday it is called the "Ministry of Development and Social Assistance, Family and Fight against Hunger".

^bThe programme was created as "Family Health Programme" (PHP), and in 2006 it was renamed to "Family Health Strategy" (FHS).

different government agencies, such as *Caixa Econômica Federal*—the federal state-owned bank responsible for benefits disbursement—were established (Paiva et al. 2019). This reflects a strong operational capacity at the systemic level. The effective nationwide distribution of benefits, guided by clear selection criteria, highlights the link between the federal government's analytical and operational capabilities, as it utilizes data to identify and fund eligible beneficiaries.

The regularity and predictability of federal payments to the BFP are also essential to the programme's effectiveness, allowing local governments to plan and allocate resources effectively, thereby enhancing programme delivery and outcomes. As the literature suggests, reliable resource flow is crucial for effective social programmes, enabling the necessary adaptations and improvements in local capacities (Arretche 2012). Unlike earlier federal social policies hampered by inconsistent funding, the effectiveness of *Bolsa Família* relies on the federal government's consistent financial resources, ensuring timely assistance for beneficiaries (Bastagli 2008).

Regarding *federal political capacity*, the relational activities associated with social policy are essential due to the structure of Brazilian federalism. The abovementioned coordination between federal and local governments is a political capacity, not only related to operational aspects but also in terms of inter-governmental relations. *Bolsa Família* requires intersectoral collaboration and relational capacities to improve coordination. According to Filgueiras et al. (2020), approximately 70% of a sample of 6055 civil servants surveyed regarding the functions of the Brazilian federal civil service consider relational capabilities to be central resources for implementing public policies, and that was crucial for BFP.

Additionally, the political capacity of the federal level to ensure local acceptance of the programme is essential for the mayors to implement it. The successful outcomes achieved by the BFP, such as decreasing the overall infant mortality rate and resulting from poverty-related causes via an increase in BFP coverage (Rasella et al. 2013), as well as the policy's positive effects on school attendance and education, are elements that have strengthened the federal political capacity to sustain local interest in the programme (Simoni Junior 2021; C. J. Zucco 2013; C. Zucco and Power 2013).

Considering *local policy capacities*, municipalities are the BFP implementers, both in terms of beneficiary selection and registration and for the provision of social services subject to its conditionalities. Therefore, *analytical* and *operational local policy capacities* at the organizational level are indispensable conditions for the effective implementation of this programme. Almost all municipalities in the country have social assistance offices, and 72.8% of them have exclusive bodies for them (IBGE (Instituto Brasileiro de Geografia e Estatística) 2023). Municipal bureaucracy is present in public facilities created for BFPs and other social assistance programs. This bureaucracy is responsible for understanding and applying the main definitions and guidelines of the programme; analyze the vulnerable groups and determining those to be prioritized according to its rules; registering the beneficiaries; checking the fulfillment of conditionalities on a regular basis, including new ones and excluding

those that are in condition to leave the programme because have already overcome the extreme vulnerability condition.

Enhancing local analytical and operational capacities at the organizational level significantly improved the programme's success. By the end of 2004, approximately 6 million families received BFP economic support. This number increased to nearly 14 million by the end of 2014, representing a 133% increase over 10 years. By 2024, the programme had 20.8 million families, marking a roughly 246% increase in 20 years. Similarly, CadÚnico registrations for BFP and other social programmes rose from around 25,000 in 2012 to almost 41,300 families by the end of 2021, representing a 65.2% growth over 10 years (SAG-ICAD - Secretaria de Avaliação and Gestão da Informação e Cadastro Único 2025).

In terms of services provision, there was a very significant institutional expansion in the number of social assistance reference centers between 2003 and 2012, increasing from 454 to 7445 in the country (D. B. Coêlho and Fernandes 2017). In 2013, this number has reached 7883 Social Welfare References Centres (Sátyro and Cunha 2018, 367). Regarding human resources, Bichir (2011) demonstrated that there was an improvement in the number of civil servants employed in the social assistance service at the municipal level: from 2005 to 2009, this number increased from 140,000 to 182,000 people in the country, representing 3.2% of all staff employed in municipal public administrations at that time (Bichir 2011, 143).

In addition, professionals working in the Unified Social Assistance System (SUAS) may participate in training courses regularly promoted by the federal government. Through the Ministry of Social Development's distance learning portal, the National Secretariat for Citizenship Income (Senarc) periodically promotes various free educational activities aimed at the teams that manage the *Bolsa Família* Programme and the Unified Register for Social Programmes (CadÚnico) in the municipalities. According to the Municipal Basic Information Survey 2023, 92% of 5567 municipalities have social assistance staff that participated in training courses in 2022 (IBGE (Instituto Brasileiro de Geografia e Estatística) 2023).

According to Sátyro and Cunha (2018), this local capacity was developed during the BFP implementation process, and the interaction between the federal and local governments was crucial in building local capacity: once municipalities signed up to the PBF, they “built bureaucratic structures that allowed them to manage income transfer and offer social welfare services and to effectively perform the actions that fell to them following their signing up” (Sátyro and Cunha 2018, 383).

Local implementers acknowledge the gradual enhancement in the local analytical and operational capacities. Oliveira and Lotta (2017) found that programmes' municipal coordinators perceive they have learned through practice and federal training programmes from the Ministry of Social Development. They are now more familiar with programme rules and better equipped to address challenges or consult federal departments for solutions. Interviewees noted that this learning process was crucial for overcoming initial difficulties related to programme's rules and regulations (Oliveira and Lotta 2017, 54).

In terms of *local political capacity*, not only are predictable and secure federal spending relevant but also political ideology and the presence of social networks influence policy diffusion and implementation (Sugiyama 2012). These networks are active in the municipal social assistance councils, which are present in 99,7% of local governments. In nearly 80% of these councils, training activities for board members have been documented (IBGE (Instituto Brasileiro de Geografia e Estatística) 2023), playing an important role in ensuring social accountability and control of local governments regarding BFP outcomes.

Bolsa Familia's content and related federal and local capacities are summarized in Table 3.

The *Bolsa Família* Programme demonstrates that municipal governments can effectively implement federal policies, with over 90% of local governments participating in their first years. Over more than 20 years, the programme has refined local capacities for implementation, including beneficiaries' selection, compliance enforcement, and evaluation of assisted families. Despite political changes, it remained safe even under right-wing governments that sought to dismantle various social policies (Milhorce 2022; Guedes-Neto and Peters 2021).

4.2 | Family Health Strategy (FHS)

The Family Health Programme (FHP), as first called, was conceived by the Ministry of Health in 1994, and became the foundation of the National Primary Care Policy. Health care is delivered by Family Health Teams (*Equipes de Saúde da Família*) composed of a multidisciplinary group of professionals, and basic health services are focussed on families and communities. Family health teams (FHTs) operate in municipal health units, under the responsibility of local governments, comprising at least one doctor and one nurse, nursing assistant or technician, and a community health agent. FHTs conduct regular home visits and monitor family members' health. Each team is responsible for 2400 to 4000 inhabitants of a defined geographical area, covering in average 3000 inhabitants per team (Brasil 2006).

The programme was designed by the federal government and is maintained with financial resources from the three levels of government (federal, state, and municipal), relying heavily on federal financial transfers and consequent induction capacity for local implementation (Arretche 2012). Hence, the federal government is its main player.

In 2003, the Programme for Expansion and Consolidation of Family Health (PROESF) began, and in 2006 it was renamed the Family Health Strategy (FHS). Since then, this strategy has achieved high population coverage—more than 60% in 2020 (Giovanella et al. 2021)—and promoted a reduction in inequity in health service access (Neves et al. 2018).

In terms of *federal analytical capacity*, the Ministry of Health sets national guidelines for primary care administration, training, infrastructure and funding, including the minimum per capita spending and the financial support for basic health units. At the organizational level, the federal bureaucracy is

TABLE 3 | The *Bolsa Família* Programme (BFP) features local and federal policy capacities.

Programme	Programme features	Capacities of federal government	Capacities of local implementers
Bolsa Família Programme (BFP)	- Federal government established the rules and municipalities selected the beneficiaries (conditionalities) - Federal gov established the database (<i>CadÚnico</i>) for registering the beneficiaries - Federal gov provides the money (through <i>Caixa Econômica Federal</i>) to the families selected by local gov - Local gov checks conditionalities on a regular basis and oversees the programme's functioning, fulfilling the federal data system	Analytical capacity: - Permanent civil servants, highly qualified, with expertise and experience in Public Administration - "Statistical capacity" Operational capacity: - Coordination between federal and local governments and the role of <i>Caixa Econômica Federal</i> in distributing the resources across the national territory - Regular federal payment system - Good coordination between federal and local governments - Implementation impersonal and transparent	Analytical capacity: - Presence of social assistance officials to analyze the vulnerable groups and determine those to be prioritized according to the programme's rules Operational capacity: - Local officials to register the beneficiaries, and check the fulfillment of conditionalities on a regular basis, including new ones and excluding those that are in condition to leave the programme Political capacity: - Political instruments of social participation for monitoring the programme execution at the local level

technically skilled, well-trained, and stable, ensuring continuity and incremental policy change over time (Cavalcante and Carvalho 2017; Filgueiras et al. 2020). This bureaucracy operates with merit-based hiring, promotion, and dismissal of public officials (Stein et al. 2006, 68). According to the “bureaucratic functional capacity index”, Brazil ranks highest, scoring nearly 60 out of 100, meaning that the country has clear and accountable systems of salary management, processes for improving salary competitiveness, as well as performance evaluation processes. Additionally, a study on the Ministry of Health revealed that, despite political appointments, high-level positions are typically filled by technically qualified professionals with public health backgrounds from top academic institutions (Costa and Neves 2013). These experts qualify the federal government to formulate and coordinate municipalities effectively.

In relation to another aspect of organizational analytical capacity, the Ministry of Health is supported by a robust apparatus for data collection and systematization. *Datasus* is a health information system integrating health data and assisting health management from subnational governments. This system, the world’s largest health database system (Guerra Junior et al. 2018; Leão et al. 2001), monitors the performance of municipal health care.

Regarding *federal operational capacity*, federal civil servants support subnational bureaucracies in implementing health policies. Related to the FHS Programme, the federal government is responsible for defining guidelines and policies for the ESF implementation, including technical standards, adherence criteria, and financing guidelines; regulating and monitoring ESF tools such as the primary health care information system (SIAB); training health professionals for the FHS; and ensuring ESF financing through resources transfers.

The federal financial support to municipalities is a key *federal political capacity*. According to Massuda et al. (2022), federal transfers for primary health care grew from R\$ 23.4 billion in 2000 to R\$ 82.2 billion in 2018, with 71.2% directed to municipalities. Approximately 57% of these funds support the FHS and its components, including specialized teams for oral health, and those for specific populations, such as indigenous, riverine, and homeless populations (Massuda et al. 2022, 17). Transfers follow coverage and population size criteria, ensuring political neutrality and legitimacy among policy entrepreneurs, including public health scholars, researchers, and practitioners.

This combination of analytical, operational and political capacity at the federal level has expanded the population’s access to public primary health care (Castro et al. 2019). One of the main indicators of this success is the programme’s coverage rate, which is in constant progress: FHS coverage grew from 2054 to 43,286 teams between 1998 and 2020, reaching 133.7 million people, 63.3% of Brazilians (Massuda et al. 2022).

In terms of *local policy capacities*, they’ve grown over the years, improving the Family Health Strategy within municipalities. Municipal governments and their *analytical capacity* can map vulnerable populations, determining priorities according to the population epidemiological profiles. This is crucial in

Brazil, where health needs vary significantly between regions and different population groups, such as indigenous people living in the Amazon rainforest and elderly residents in metropolitan areas.

Regarding *local operational capacity*, over the years, municipalities have developed a healthcare workforce for Family Health Teams according to the federal guidelines. In 2010, 53% of the population was covered by health teams, and this number grew to 63.6% in 2020 (MS - Ministério da Saúde. E-Gestor – Informação e Gestão da Atenção Básica 2021). In 2023, the programme achieved 68% of the population, with 50,804 health teams and almost 300,000 community health agents across 99.17% of municipalities (Klitzke 2024).

The capacity of local staff to implement the Family Health Strategy grew steadily over time. According to data from the medical demographics of the Federal Council of Medicine, in 1990, Brazil’s ratio of doctors per thousand inhabitants (from public and private sectors) increased from 0.9 in 1990, to 1.4 in 2005, 2.0 in 2015 and 2.8 in 2024 (CFM - Conselho Federal de Medicina 2024).

Municipalities not only have staff at the street level but also a team of civil servants to maintain the performance management system and control internal processes and civil servants, both at the administrative and operational levels (doctors, nurses and assistants who carry out the policy at the street level). They also inform the federal government’s database, which is mandatory for financial transfers from the federal to the local level.

Finally, in relation to *local political capacity*, two main aspects must be emphasized. First, Constitutional Amendment No. 29 (2000) obliged municipalities to spend at least 15% of their resources on public health, protecting the health budget from political interference and guaranteeing a regular use of municipal resources in health. Second, the Unified Health System assigns municipalities a central role in intergovernmental decision-making. Municipal health councils, mandatory for municipalities for receiving federal resources, are composed of government representatives, health professionals, and civil society organizations. These councils oversee SUS implementation, monitor public spending and ensure accessible, equitable, and high-quality healthcare services. Brazil has 5633 health councils – 5569 municipal councils, 26 state councils in the Federal District, and 36 district councils (Santos et al. 2020). Additionally, these health councils are mentioned as one of the main players influencing the municipal health managers, according to the National Survey of Municipal Health Secretaries, a study carried out between 2017 and 2018. At the same time, for 54% of the municipal managers surveyed the Municipal Health Council agendas stand out as strategic for municipal decision-making (Ouverney et al. 2020).

Family Health Strategy content and related federal and local policy capacities are summarized in Table 4.

To sum up, the FHS has a long history as the primary strategy for organizing Brazil’s National Primary Care Policy, has been expanded over time and been effective in ensuring access to primary health care (Giovannella et al. 2021). Present in all 5570

TABLE 4 | The Family Health Strategy (FHS) features local and federal policy capacities.

Programme	Programme features	Capacities of federal government	Capacities of local implementers
Family Health Strategy (FHS)	- Federal gov responsible for establishing national guidelines and financing FHS - Federal gov oversees the apparatus for data collection and systematization (<i>Datasus</i>) - Local gov are responsible for the basic health units where the programme is implemented, its staff and the fulfillment of local information at <i>Datasus</i> - Local gov map their most vulnerable populations and determine priorities according to their population epidemiological profile - Constitutional rules guarantee 15% of the total local budget to primary health care, assuring local expenditures for the programme maintenance	Analytical capacity: - Technical bureaucracy, well trained and stable - Federal bureaucracy responsible for establishing national guidelines - National system of health information, integrating national data Operational capacity: - Federal system to maintain and control resources' transfers on a regular basis - Federal gov monitors and evaluates subnational health indicators and service provision - Good coordination between federal and local governments Political capacity: - Federal gov is the main manager of the Brazilian Unified Health System and coordinates subnational gov through the tripartite intervention commission (CIT) and other institutional mechanisms - Federal resources regularly transferred to municipalities without political interference	Analytical capacity: - Local bureaucracy to map the vulnerable groups and determine epidemiologic priorities - Civil servants able to collect and inform federal data systems—health indicators and local services provisions Operational capacity: - Large number of health professionals to attend norms related to FHS - Local gov responsible for the basic health units where FHS is implemented Political capacity: - Local resources constitutionally guaranteed (compulsory use of 15% municipal resources in public health) - Political instruments for social participation and monitoring

municipalities, the programme has maintained continuity for over 30 years. Its consolidation is supported by permanent federal resource transfers, its capacity to coordinate different levels of government and to monitor local governments, as well as by the local capacities to deliver basic health services through national guidelines, collect and report data on health indicators and provisions of primary care service.

4.3 | Proinfância Programme

According to the Constitution, universal access to early childhood education is a municipal responsibility. Given the difficulty municipalities have to fulfill their constitutional obligation, the federal government created in 2007 the *Proinfância* programme. Operated by the National Fund for Education Development (FNDE), it aims to provide financial assistance to municipalities and the Federal District for the construction of public daycare centers and preschools, and for equipment and furniture acquisitions. The federal government receives municipal projects and, upon approval, provides funds for the construction of early childhood education units (Oliveira and Lotta 2019).

Nonetheless, the *Proinfância* programme faces significant challenges. Many municipalities struggle with limited administrative capacity and a lack of qualified personnel, hindering efficient project management. Additionally, difficulties in project approval and insufficient organizational structure impede effective implementation, resulting in many children still lacking access to early childhood education. The programme's numbers expose these problems: between 2007 and 2011, 2543 construction projects were approved, but only approximately 40% of them were effectively executed (Rezende 2013).

In 2011, during Dilma's administration, *Proinfância* was incorporated into the Growth Acceleration Programme (PAC) as a federal priority. Owing to disappointing outcomes and lengthy construction processes from 2007 to mid-2011, a new strategy was implemented: the federal government centralized the selection of executing companies to reduce costs and construction time for prefabricated projects. This diagnosis indicated that municipalities were unable to manage the construction process or select private companies effectively. In 2012, the process was streamlined, allowing municipalities to join it by choosing one of three construction modalities: type A (nonstandard projects) or types B and C (standardized projects, which accounted for 90% of selected works), all linked to a budget spreadsheet prepared by the FNDE. The requests were submitted through the Ministry of Education's Integrated System for Monitoring Execution and Control (SIMEC), along with a photo of the proposed terrain. After analyzing it, the FNDE would approve the request, enabling municipalities to sign a term of commitment with the federal government for resource transfers. Municipalities opting for standardized projects had to comply with a "price registry act" established by the FNDE, detailing payment amounts, the winning contractor, and the contract draft (Oliveira and Lotta 2019).

The programme's regulations and intergovernmental relations between the federal government and municipalities were

modified to increase execution capacity, which was significantly hampered by municipal challenges. Covenants were eliminated, and resources were automatically transferred upon a term of commitment, facilitating greater efficiency (Rezende 2013; Oliveira and Lotta 2019). However, this model also encountered failures, as companies took on an excessive number of projects and struggled to fulfil their contracts. According to Mondo (2019), data from the Office of the Federal Comptroller General (CGU) revealed problems:

"Only 70 of the more than 3,500 construction projects planned to be executed under this new construction methodology were ever completed. Almost 60% of the planned works had to be reformulated and renegotiated, migrating to the conventional method of execution. Another 249 works (7.4%) were abandoned at a stage of execution that no longer allowed this reformulation, remaining paralyzed with no prospect of continuity and representing a potential loss of almost R\$ 210 million" (Mondo 2019, 14, our translation).

Owing to these difficulties, in 2015 the programme was again reformulated and entered a third phase, returning to the initial model with decentralized contracting processes conducted by municipalities. The greater participation of municipalities in choosing the terrain and recruiting the executing companies represented a significant change, reducing the standardization established by the federal government in the previous phase.

All these changes in the programme's design demonstrate the federal government's effort to make it an alternative for municipalities to improve public services in daycare centers and preschools. The Ministry of Education and the National Fund for Education Development (FNDE) understood the importance of defining priorities in this area of public policy but demonstrated a lack of *analytical and operational capacities* to formulate an adequate policy in accordance with local demands and characteristics. According to three federal managers interviewed and cited by Melo and Gomes (2022), "one of the design problems of *Proinfância* is that it was designed imagining minimum conditions that would be acceptable nationally [...]" (interviewee 1, federal manager, 2020, *op cit.*, p.2131), but many municipalities don't have the minimum capacity, meaning that implementation is a huge challenge. At the same time, the task of finding viable lands was also cited as a local incapacity, something that surprised federal programme's managers: "this incapacity of municipal management is an absurd business in the country" (interviewee 2, federal manager, 2020, *op cit.*, p.2131). Finally, a federal manager who was working to assist city halls said that they couldn't carry out the projects because "there is no engineer, there is no one who knows that can provide some kind of support in the municipality, both in terms of execution, bidding, work monitoring, work inspection [2] they often do not have the technical capacity to do this" (interviewee 3, federal manager, 2020, *op cit.*, p.2132).

Furthermore, the lack of federal analytical capacities is explicit in the evaluation of the programme by the Office of the Comptroller General, which emphasizes the necessity of

reassessment and correction of the public policy's direction in the face of its "low efficacy and effectiveness demonstrated throughout its implementation", without a consistent programme's review from FNDE and the Ministry of Education (CGU - Controladoria Geral da União 2017, 12). The federal government has also misunderstood the local policy capacities needed to implement this policy, generating the need for constant redesign. However, notwithstanding all the changes, municipalities continued to encounter difficulties in implementing the policy. According to an evaluation by *Transparência Brasil*, many designated areas were inadequate (were in a legal dispute or unsuitable for the construction of public buildings), leading to work cancellation (J. Coelho et al. 2022). As stated by an evaluation of 135 projects in 21 municipalities, "the figures show the low effectiveness of the programme, with less than one in five of the planned projects having been delivered in the period observed" (*Transparência Brasil* 2019, 9).

The same conclusion was presented by a report from the Office of the Comptroller General, asserting that "Proinfância has made little contribution to achieving Target 1 [expansion of public early childhood education services] of the National Education Plan and has shown low effectiveness, given that of the 8824 planned projects, 2708 are 100% complete and, according to information from the Ministry of Education, 1478 schools are in operation" (CGU - Controladoria Geral da União 2017, 3). These data reveal a lack of *local analytical and operational capacities* to fulfil the programme requirements.

Some projects had flaws in their "basic projects", that is, a set of elements necessary for the proper assessment of the costs, methods, and deadlines for their execution. Small municipalities faced a lack of *local analytical capacity* needed to produce their basic project, with implications for the programme's implementation. In the case of an incomplete basic project, what was planned in the contract or to complement it during execution often changes, causing delays and increasing its final cost. In addition, municipalities must complement and adapt the federal standardized architectural projects, while considering the specific location where the work should be executed, which also demands local policy capacity. The lack of trained human resources in the municipalities for this public policy explicit its problems, exposing its inadequate format and generating delays and stoppages.

According to *Transparência Brasil*, approximately 64% of the works started in 2019 had suffered some paralysis due to contract termination; in 2020, 45% of these works were in default, implying a possible loss of R \$61 million for the federal government (J. Coelho et al. 2022, 5). In addition, the units' delivery had an average delay of 1 year. Hence, the municipal governments did not have sufficient expertise in human resources to carry out the programme locally.

Municipalities lack the *operational capacity* needed to assess the technical, economic, and financial capabilities of the companies to be hired when the company's contracting process is under the responsibility of local governments (Melo and Gomes 2022). Companies, therefore, went bankrupt and left projects unfinished. According to the Federal Audit Court, other problems were

identified: the company's works were sometimes completed, but the education units did not start operating or stopped operating within 2 years because municipalities did not have the financial resources for its maintenance (TCU et al. 2017).

There is also a lack of *local political capacities* since the municipalities aren't capable of dialoguing with the federal government to overcome local difficulties related to the programme's implementation. Additionally, the control mechanisms used to manage the programme are insufficient and imprecise, and there is a lack of transparency, which may favor local corruption processes. The analysis by the Office of the Comptroller General found that the *Proinfância* accounts are inadequate. Considering the accountability instruments, there are thousands of overdue "obligations to render accounts" (OPC), and there is information on its execution that is not publicly accessible (CGU - Controladoria Geral da União 2017).

In brief, such problems demonstrate weaknesses in programme design, especially in terms of local policy capacities for its implementation—a central aspect of policy design in federations. Municipalities, especially smaller ones, fail because of insufficient technical capacity necessary for the selection of terrain, the verification of legal conditions or even the hiring of an executing company. The federal government failed in the programme's design by disregarding such municipal fragilities and/or approving projects that were not adequate owing to legal problems, which could have been scrutinized before the transfer of resources.

Proinfância Programme's content, and related federal and local capacities are summarized in Table 5.

The *Proinfância Programme* demonstrates how policy design and policy capacity are dependent on interactions between federal and local-level capacities. The federal government has tested different policy configurations since 2007, but municipalities continued to face difficulties in implementation. Consequently, the programme's performance is problematic, with projects stopped or abandoned, exposing the policy's fragilities.

Municipalities often lack operational capacity at the organizational level for hiring private companies, selecting the terrain or verifying its legal aspects. While some municipalities could conclude the construction process, some of them frequently lacked the financial resources to cover ongoing operational costs. As a result, many facilities either remained unopened or were closed shortly after inauguration.

This case demonstrates not only inadequacies in analytical capacity at the federal level, to formulate a viable and adequate policy, but also deficiencies at the local level, where municipalities lacked capacities and/or were unable to develop them overtime, despite all policy changes promoted by the federal government. Although the policy remains, its outcomes are problematic, with significant shortages of childcare facilities in Brazilian municipalities. More than 94% of children aged 4 or 5 years are enrolled in preschools, but access to childcare centers for children aged from 0 to 3 years was only 37% in 2019 (Raikes et al. 2023).

TABLE 5 | The *Proinfância* Programme features and related local and federal policy capacities.

Programme	Programme features	Capacities of federal government	Capacities of local implementers
Proinfância Programme	- A federal programme to provide financial assistance for municipalities in the construction and maintenance of public daycare centers and preschools. - Federal bureaucracy defines the construction modalities and local govts choose them, select the specific local for and the company to build - Local governments are responsible for overseeing the process of construction of the new unit and of its maintenance	Analytical capacity: - Lack of technical capacity to design the programme in accordance with local demands and characteristics, imposing the necessity of many design changes - Federal gov poor evaluation of the lack of resources in the municipalities to keep units functioning Operational capacity: - Lack of capacity to assist local implementation - Changes in the programme's design were insufficient to overcome local difficulties Political capacity: - Lack of capacity for dialogue with local govts and understanding of their difficulties in programme implementation	Analytical capacity: - Inadequate and/or absent technical bureaucracy to: - Request federal resources - Plan and execute architecture projects - Select the construction companies Operational capacity: - Financial difficulties to assume the fixed costs of new early childhood education units by some local governments - Lack of capacity to deal with the necessity of selecting, contracting and overseeing the private sector responsible for constructing childcare facilities and preschools Political capacity: - Incapacity to dialogue with the federal government bureaucracy, exposing difficulties and understanding how to overcome them - Insufficient mechanisms of social participation accountability - Local political corruption may favor fraudulent construction firms

5 | Discussion of the Findings and Future Research

Designing effective policies is a complex process requiring adequate capacity for formulation and implementation. Policy capacities are crucial, impacting both design quality and outcomes, especially in multilevel systems where federal policies depend on local governments for execution. The three Brazilian cases of federal policies demonstrate varying degrees of success, with *Bolsa Família* and the Family Health Strategy emerging as long-lasting, collaborative federal policies that have generated positive local impacts through outcomes and enhanced municipal capacities with federal support. In contrast, while *Proinfância* has increased the number of pre-schools in several cities, it continues to face challenges as a federal policy that must be implemented by smaller municipalities, which are grappling with a range of issues. This struggle is evidenced by consistent evaluations from controlling agencies.

The federal programmes in social assistance and health examined in this article are deemed successful owing to *policy capacity at both the federal and municipal levels*. The federal government has demonstrated analytical, operational, and political capacity (especially at the organizational and systemic levels) to formulate policies that can be implemented across 5570 municipalities, despite significant local policy capacity variations. *Bolsa Família* utilized strong regulation, such as conditional cash transfers, along with the use of the *Cadastro Único* and the IGD, enabling the development of effective control of beneficiaries' characteristics and assessment of municipal managerial capacities over time. The Family Health Strategy was designed to meet all policy requirements, relying on the standardized professionalization of the basic health units, which limited municipalities' flexibility in implementation but guaranteed the provision of public basic health services in the country.

At the same time, the analysis of *Bolsa Família* and the Family Health Strategy has shown that the municipalities have been able to implement the policy effectively, also by improving their capacities (especially analytical and operational). It is also clear that, over time, the interaction between the federal government and the municipalities has been a kind of positive sum game, which has also improved the capacities of the federal government. Thus, both levels of government have improved their policy capacity throughout the implementation process. This dynamic nature of 'policy capacity' underlines that it is not a static attribute of governments, but is constantly evolving and improving, creating a virtuous circle between policy design and policy capacity.

In contrast, the federal design of the *Proinfância* programme underestimated the local analytical, operational and political capacities needed to select, contract and supervise the private sector responsible for the construction of childcare facilities and preschools. This underestimation was the consequence of low federal policy capacity. The resulting design was a soft regulatory approach that delegated key elements of implementation, leading to significant project delays, contract terminations, and subsequent redesigns of the programme that were also not very

effective (demonstrating ongoing problems in improving federal capacity).

The analysis of the programme documents and evaluations revealed a lack of all three types of federal government capacity to design ways to provide practical assistance to municipalities (e.g. ad hoc task forces, capacity building interventions), especially the smaller ones which, due to their size, did not have the analytical and operational capacities to select the site, check the legal conditions or even hire a construction company. This has left the municipalities alone with their capacity problems, even in terms of political capacity.

Accordingly, the three critical cases demonstrate that the focus on policy capacities can elucidate the effectiveness of policies designed at the federal level and implemented by municipalities. It clearly emerges that policy failure or low policy effectiveness is the result of an unresolved misalignment between the federal policy design and the policy capacities of local entities in charge of implementing it.

Thus, the empirical evidence emerging from the three cases shows that in a federal country, such as Brazil, where the level of local policy capacity can be tendentially low or have asymmetries among different local governments (Brenton et al. 2023; Yan et al. 2023), any federal policies that must be implemented through municipalities need to take into serious consideration the characteristics of local policy capacity.

In fact, according to the characteristics of local policy capacities, and depending on the nature and characteristics of the policy issue at stake, the federal policy programme can be designed in two ways: 1. a policy design that limits the discretion of implementers through clear and strong regulations, rules and procedures, which monitor the behavior of implementers and allocate public resources, not as subsidies or pure incentives, but through coercive procedures (such as targeted and conditional funding); 2. a policy design that, due to the lack of the necessary analytical and operational policy capacity at the local level, provides for specific interventions (federal task forces, capacity building programmes) that could help local governments to overcome their deficiencies and to develop local policy capacities.

If this does not happen but policy design strongly directs implementers, delegating them relevant technical and political tasks without appropriate support, then the result will be far below the expected outcome.

The evidence of our paper, then, raises at least two questions that could be addressed by future research.

The first question concerns the characteristics of federal policy design in Brazil and is related to the drivers of the choices that do not consider the high degree of differentiation of local policy capacities and, thus, do not provide for specific forms of capacity building in the policy design (C. Souza 1999). When this happens, is it due to some analytical or operational mistake/incapacity, or are there political dynamics behind it? This question could seem rhetorical, but it definitively calls for a deeper analysis of the interaction between the political factors and

policy capacities of federal bureaucracies, which can be very high, as shown by the bureaucratic resilience that has allowed the persistence of the Bolsa Familia Programme even after the electoral victory of Bolsonaro (Fenwick and Rennó 2023).

The second research question calls for a broader and more comparative application of the analytical perspective that we have proposed and for a more fine-grained perspective on the policy design that federal governments can adopt to address implementation when local policy capacities are lower (Cardoso et al. 2023). A broadening of the comparative perspective would be very useful for a better understanding of the implementation problems that are present in any decentralized country, mainly in developing countries from the Global South, which are struggling with territorial inequalities and the lack of different types of policy capacities in poorer regions. The debate on this gap in the literature on federalism is enormous, and, in our view, the focus on the still unexplored relationship between federal policy design (and the policy capacities behind it) and local policy capacity could also be very helpful not only from an analytical/explanatory point of view but even from a prescriptive one. Moreover, a broader comparative perspective could elucidate the motivations behind whether and how federal governments anticipate or not the characteristics of implementing governments' policy capacities when designing their policies.

A more focused and detailed perspective on the main components of policy design, that is, policy instruments, could provide a better understanding of the dynamics and mechanisms of the success/failure of the type of policy under analysis, not only between countries but also within countries. The way policy instruments are designed could affect the effectiveness of federal policies, as their micro-design could activate specific capacities that local administrations possess, even if their average policy-making capacities are not very high.

Overall, focusing on the interactions between policy capacities in multilevel policymaking could help us understand how to improve the performance of federal policies when subnational governments are responsible for implementation.

Conflicts of Interest

The authors declare no conflicts of interest.

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Data Availability Statement

We have used the existing literature and various public reports.

Practice Impact Statement

This paper argues that, all things being equal, the adequacy and coherence of federal capacity with respect to current local policy

capacity will determine the effectiveness of federal policy design when policy implementation is the responsibility of local governments. Federal policymakers should pay close attention to the characteristics of local policy capacity and, therefore, design policies that are implementable by local governments or combine policy design with measures that support the strengthening of local policy capacity.

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