

# What are the Challenges and Opportunities for Multi-level Advocacy for Nutrition?

Over the last decade, policy advocacy has made critical contributions towards the development of nutrition policies, laws and strategies in many countries with high burdens of malnutrition. Translating and safeguarding these policy achievements into results on the ground requires nutrition advocacy to be pursued across administrative levels and throughout the policy cycle. However, such multi-level advocacy (MLA) is often limited and poorly documented. In order to strengthen and support MLA for nutrition, the challenges and opportunities must be understood.

## Why multi-level advocacy?

Within the last ten years, nutrition has received strong attention as a global development problem. Advocacy has made critical contributions towards the development of nutrition policies, laws and strategies in many countries with high burdens of malnutrition. Advocacy efforts have raised awareness among policymakers and elected officials about the causes of malnutrition and its human and economic consequences which include poor health outcomes, reduced economic productivity and lower educational attainment.

Most nutrition and health advocacy initiatives focus on policymaking at international and national levels. This sharply contrasts with debates underlining that implementation of nutrition policies at the subnational level is critical for achieving tangible improvements in nutritional outcomes. Though advocacy coalitions may operate effectively at national levels to influence policy agendas, their efforts to ensure effective translation of policy to programmes and implementation at the subnational level is less pronounced. Accordingly, MLA – i.e. advocacy that is pursued across multiple administrative levels and throughout the policy cycle to connect policymaking and implementation – is often limited.

## Opportunities and challenges for multi-level advocacy

Why are few organisations engaged in MLA? A dearth of well documented empirical cases makes it hard to answer this question. However, opportunities and constraints for MLA can be understood by looking at three factors and their interactions:

1. The nature of the policy environment
2. Features of networks and actors operating in these
3. Characteristics of nutrition as a policy issue

While advocacy NGOs typically operate in capitals, administrative headquarters at subnational level (counties, provinces, districts, etc.) offer a complementary domain. Advocacy actors working at the subnational level are different from the national level. Community-based organisations, councillors, street-level bureaucrats and service providers are more prominent, whereas donors and academics have less presence. Local CSOs are likely to be service delivery organisations and more results- than value-oriented, suggesting that MLA takes shape through pragmatic, temporary alliances.

## Devolved/decentralised administrations offer distinct opportunities

Advocates can work with sympathetic local bureaucrats and politicians on shared advocacy and service delivery agendas. Thresholds to access these groups are relatively low. In most low-income settings increasing demands are placed on frontline workers and community volunteers. Advocacy leaders that can persuade local officials (and champions) about the need for addressing nutrition and cater to their needs, knowledge and capacity requirements, will benefit from a first-mover advantage to influence policy implementers. Similarly, local political leaders may be considered as potential allies, for example where their mandates span local to national domains, such as parliamentarians. This compels policy advocates to develop framings and narratives of nutrition that actively reference local issues, norms and opportunities based in local democratic/governance structures – including potential local ‘vote-winners’. Finally, provision of services in the absence of state provision – whether as co-provision or filling the gap – can also work as an important form of advocacy and/or protest.

## Linking nutrition policy advocacy to groups advancing accountability

Nutrition policy advocates and accountability campaigners often do not connect, but may be natural allies, pursuing implementation alliances. Nutrition policy advocates can also build capacity of the accountability groups to engage with communities and educate them about the prevalence and consequences of malnutrition within their communities.

Accountability groups can support nutrition policy advocates by mobilising populations; something badly needed for nutrition. Communities regularly are unclear about malnutrition risks, not least because symptoms are hard to observe (e.g. vitamin A deficiencies), and because vernacular expressions for key nutrition terminology (including the word nutrition itself) do not exist.

## The challenges of multisectoral working

Positive results for nutrition are driven by a wealth of factors including food availability, access and diets, sanitation, caring practices, access to health services, education, female empowerment, etc. This diversity raises problems and challenges for nutrition advocates. Cross-departmental policy coordination is often a key challenge.

However, the physical proximity of people

and departments at the subnational level facilitates coordination, and an opportunity for policy advocates. For instance, district administrative headquarters in Tanzania have all nutrition relevant departments within a short distance. The range of factors contributing to nutrition also enables advocates to support nutrition related causes that already receive attention from local decision makers (e.g. water provision).

## Subnational-level data availability and knowledge

At the subnational level reliable and disaggregated data on the nature and extent of the nutrition problem is often limited. Despite this, opportunities exist for nutrition policy advocates to harness local pride and shame by using local data to make comparisons between performances of local authorities. For instance, trials of district-level nutrition commitment scorecards based on administrative data are currently underway in Tanzania (see, for example, [www.hancindex.org](http://www.hancindex.org)).

These tools can assist capacity building around nutrition for frontline officials, and challenge some of their preconceptions. For instance, the common conflation of nutrition being chiefly about food, which ignores critical factors relating to caring practices, access to health, and environmental sanitation.

## Policy recommendations

- Many countries with high burdens of malnutrition have devised nutrition policies, laws and strategies. To facilitate tangible improvements in the nutritional status of vulnerable groups, different actors need to translate and safeguard these achievements throughout the policy cycle, which requires effective MLA.
- Delivering on national policy and strategies will be facilitated by adopting a 'whole of policy process' approach in carrying out advocacy for nutrition. Policy advocates need to expand their focus beyond agenda-setting to be actively involved in the subsequent processes that contest, (re)formulate, translate and ultimately implement nutrition policy.
- Donors interested in supporting MLA for nutrition must recognise its need for long-term funding. Changes in policy and implementation take place over long timeframes beyond short project cycles. Funders should set ambitious but realistic expectations: advocacy influence is not a given; however, advocacy efforts can be evaluated for their coherence and strength.
- Further research on empirical cases of MLA is required to better understand its opportunities and constraints.



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## Further reading

Klugman, B. (2011) 'Effective Social Justice Advocacy: A Theory-of-Change Framework for Assessing Progress', *Reproductive Health Matters* 19.38: 146–62

Shiffman, J. (2016) 'Network Advocacy and the Emergence of Global Attention to Newborn Survival', *Health Policy and Planning* 31 suppl 1: i60–i73

te Lintelo, D.J.H.; Nisbett, N. and Pittore, K. (2016) *Multi-Level Advocacy for Nutrition*, IDS Evidence Report 211, Brighton: IDS

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