

Social Mobilisation, Advocacy and Communication for Nutrition




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Introduction

“ Looking back on the battle against malnutrition, it has become clear what a key role advocacy has played. When backed by a solid evidence base, and presented in a clear and powerful way, advocacy can bring about tangible and lasting change. Communities, individuals, governments, the media, and academia alike need to be mobilised and empowered to raise their voices, to be part of collective national and community efforts and to ensure that we are held mutually accountable. Much progress has been made in tackling malnutrition, but there will be a great deal of advocacy to be done in the decades to come. ”

Tom Arnold, Chairperson of the Convention on the Irish Constitution and SUN Lead Group

This series of briefings – entitled *Scaling Up Nutrition in Practice* - presents the experiences of SUN country governments, and other national stakeholders, as they scale up their efforts to ensure all people enjoy good nutrition. Each briefing in the series focuses on a theme selected by SUN country government focal points for sharing their experience during a series of teleconference calls with focal points and country teams that take place every two months.

This is the third briefing and it focuses on social mobilization, advocacy and communications for nutrition. Stakeholders from six SUN countries have contributed accounts of their experiences in raising awareness and mobilizing public support to scale up nutrition. Key lessons have been identified in each of the country articles.

Examples of social mobilisation, advocacy and communication activities in SUN countries

Four examples of mechanisms in place or tools that have been developed to support social mobilisation, advocacy and communication for scaling up nutrition are summarised below for 42 countries and the Indian State of Maharashtra. These examples provide an approximate guide of the processes being put in place by countries to support their capacity to effectively raise awareness and advocate for nutrition.

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- 28 countries:** have organised nutrition events since 2011 involving high level government officials.
- 16 countries:** have engaged Parliamentarians in actively advocating for nutrition.
- 11 countries:** have comprehensive government or joint social mobilization, advocacy and communication strategies in place.
- 15 countries:** have developed advocacy tools that are country-specific to raise awareness about nutrition at a high level (PROFILES, Cost of Hunger studies, RENEW multi-media presentations)
- 33 countries:** have established SUN civil society alliances and/or strong civil society support for social mobilisation, advocacy and communication activities.

Source: Summary of country map found on page 36.

How does social mobilization, advocacy and communication help in scaling up nutrition?

The Scaling Up Nutrition (SUN) Movement represents broad consensus that progress towards improving maternal and child nutrition requires action on many fronts.

It requires people to act together through a multi-sectoral, integrated approach led by national governments. The first issue of *Scaling Up Nutrition in Practice* highlighted the importance of coordinated efforts on the part of a wide spectrum of stakeholders, including ministries that support agriculture, health, social protection, water, sanitation and hygiene, gender and education; United Nations (UN) agencies and donors, civil society, research and academia; and the private sector. The second issue focused on the importance of information systems to track progress, set priorities and measure nutrition outcomes.

This briefing focuses on the essential role of social mobilization, advocacy and communication in all four SUN strategic processes:

1. bringing people together to work effectively through functioning multi-sector, multi-stakeholder platforms;
2. putting policies and laws in place to establish a coherent policy and legal framework;
3. implementing and aligning programmes with common objectives and an agreed framework for results; and
4. mobilising resources from domestic sources supplemented by external assistance.

Change rarely happens on its own. Advocacy is key to raising awareness about a need, building public and political will, setting priorities and improving policies to leverage nutrition outcomes from actions taken across sectors and stakeholders. Advocacy works best when it combines evidence and analysis, engaging messages and a strategy to identify and influence those who can deliver the change. Advocacy and communications tools can help raise awareness among the public and policymakers about the importance of an issue. Tools that clearly communicate the problem, using stories and an evidence-base, the urgency of addressing the problem and the programmatic and policy solutions can help convince decision makers as well as those who can influence decision makers about the need to take action. Social mobilization engages a broad range of actors so that they become involved in driving change, by raising awareness and by creating the demand for better policies, services and accountability.

How is social mobilisation, advocacy and communication understood in SUN countries?

Actors in countries that are participating in the SUN Movement take a broad approach. They are:

Mobilizing society behind a common narrative and ownership for scaling up nutrition. Through empowering individuals to take action, the four SUN strategic processes can be advanced to achieve better nutrition. Behaviour

change of individuals, communities, staff and organisations can directly and indirectly contribute to improved nutrition.

Advocating for action to advance the four strategic processes of the SUN Movement. Stakeholders in countries are using different methods and approaches to convince those who can play a productive role in scaling up nutrition.

Communicating their experience and practice in advancing the four strategic processes and the impact achieved, by sharing their learning both within and across countries.

How is social mobilization, advocacy and communication being applied in SUN countries?

This issue of *Scaling Up Nutrition in Practice* describes social mobilization, advocacy and communications efforts in six SUN countries. Each country is at a different stage in developing and implementing a social mobilization, advocacy and communication strategy but their experiences are instructive, and offer ideas and lessons for social mobilization, advocacy and communication throughout the SUN Movement. In some countries, advocacy efforts have focused on engaging elected officials. In **Peru**, advocacy by civil society in the lead up to the country's 2006 election, engaged presidential candidates on the importance of child under-nutrition to Peru's economic development. All the candidates signed a pledge to commit to reducing malnutrition in children under 5 by 5 percent in 5 years if elected. The new president endorsed the National Strategy for Combating Poverty and Chronic Child Malnutrition and made this a national priority. Civil society also presented the administration with 10 recommendations for the first 100 days in office. In **Cameroon**, parliamentarians have created a network to help promote nutrition within the parliament.

In other countries, the emphasis has been on developing coherent strategies for social mobilization, advocacy and communication, and educating a broad set of stakeholders about nutrition. **Uganda** has developed such a nutrition advocacy and communication strategy involving different stakeholder groups and which is about to be launched. In **Pakistan**, senior government officials, civil society and other partners have held a series of high profile events as a way of raising awareness about the impact of malnutrition. In **Bangladesh**, a joint strategy has been developed and there have been efforts to educate the public through the media, with TV ads and TV talk shows; by developing multi-media e-toolkits and presentations and through trainings for communities and groups with constituencies, such as the Bangladesh Girl Guides Association. In **Kenya**, existing platforms such as national health days/weeks, world breastfeeding week, and world diabetes day are used to deliver nutrition messages.

While the approach to social mobilization, advocacy and communication varies in different countries, there are common features. These are described in the final article of the brief by Dr. David Nabarro, Coordinator of the SUN Movement.

Country Articles



Pakistan government leaders, representatives from United Nations agencies, donors, development partners and senior officials from the public sector and provinces sign up to Scaling Up Nutrition at the official launch in December 2013.



BANGLADESH

Finding a Common Voice for Nutrition



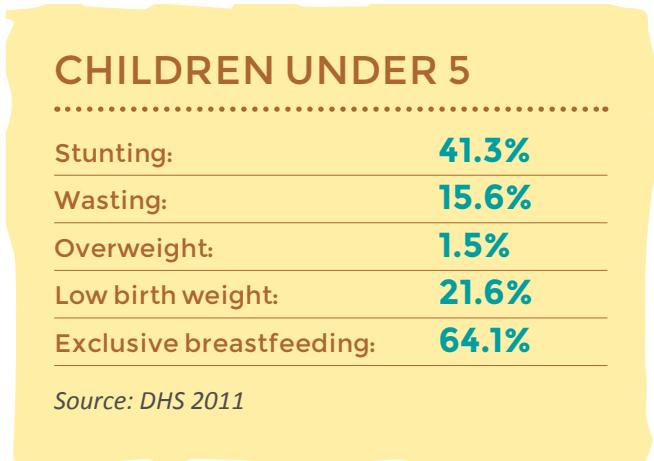
Bangladesh is developing a joint national advocacy and communication strategy for nutrition and raising awareness about nutrition through a variety of media.

Roxana Quader, Additional Secretary, Ministry of Health & Family Welfare and SUN Government Focal Point describes progress...

“Raising a common voice for nutrition, in partnership with Bangladesh’s many stakeholders is essential for effective mobilization of leaders from all walks of life. With a shared vision, we can make nutrition everyone’s business and strive for a healthy, progressive, sustainable Bangladesh.”

Roxana Quader, SUN Focal Point and Additional Secretary, Ministry of Health and Family Welfare

Coordinating and monitoring nutrition advocacy and communication efforts are a key challenge in Bangladesh. There are many stakeholders operating at national and district levels and a wide mix of communication channels. Significant efforts are underway to unite and mobilize stakeholders to advocate for nutrition with a common voice, bearing key audiences in mind and using clear messages.



A joint national advocacy and communication strategy is being developed to improve coordination amongst relevant sectors of government and other stakeholders. This is being led by the Ministry of Health and Family Welfare’s (MoHFW) National Nutrition Services (NNS), with support from United Nations (UN) REACH¹. It is intended to bolster political will, build capacity for communication and awareness raising and promote best practice behaviour change at the community level. Since December 2013, two national level forums have been held to define goals, agree objectives, segment audiences and develop joint activities through a participatory process. The final strategy product will provide a framework for collaborative advocacy and shared key messages. Over 70 organizations from civil society, media, UN, development partners, private sector and the academic community have been actively involved. A similar sub-national-level process is being piloted in the south western district of Satkhira².



National nutrition advocacy & communication stakeholder forum, December 2013

The UN agencies and key development partners have also come together to agree collaborative advocacy for nutrition. They developed a Common Narrative on Under-nutrition to showcase their collective will to support government in scaling up nutrition through ongoing and new actions. UN REACH has also recently produced a 20-minute film, incorporating participatory video, exploring the underlying cause of under-nutrition in the rural district of Satkhira.

Government initiatives to make multi-sector efforts successful

Advocacy to scale up effective nutrition interventions is a priority for the Government of Bangladesh and the development of a national strategy will help different sectors to understand their role in reducing under-nutrition. A coordinated, government led approach to multi-sector advocacy which acknowledges the vital roles of the education, social protection, women's empowerment, food, agriculture and fisheries and livestock sectors, will create new partnerships and strengthen efficient collaboration of nutrition activities across sectors.

Mass awareness from national to the district level

The government continues to play a critical role in disseminating vital nutrition information by spearheading awareness campaigns at the national and sub-national level. The MoHFW through NNS is actively engaged in promoting nutrition in print and electronic media including through the popular 'Meena' cartoon and folk songs on

infant and young child feeding (IYCF), the radio show 'Pushtipala', a nutrition quiz show and TV promotions for nutrition.

The National Vitamin A Campaign is a nation-wide activity involving around 500,000 volunteers and all health and family planning workers (frontline, supervisors and managers from grass root to central) and also relevant ministries like the Ministry of Primary Education and Ministry of Information and Mass Communication.

NNS's Growth Monitoring and Promotion campaign, supported by the UN Children's Fund (UNICEF), educates mothers and family members on nutrition surveillance through regular monitoring, ensuring tools are understood and readily available. Large scale events and campaigns such as these and World Breastfeeding Week continue to highlight child nutrition as a priority issue. More information on these efforts can be found at www.iphn.gov.bd.

At the district level, the government is providing training to Community Management Groups (CMG) and Community Support Groups (CSG) which include elected local government representatives, women and adolescent girls. They are directly engaged in managing 18,000 community clinics that provide health, population and nutrition services to communities. If these groups can be effectively engaged in multi-sector efforts to improve nutrition, it would have an immense impact.



Two comic books developed by CSA SUN promoting awareness of the 1000 day window for communities.

Diverse civil society efforts

“At the root of any dramatic change or transformation has been a strong, vibrant civil society movement. We all have a role to play in making multi-sectoral nutrition an understandable, priority issue.”

Dr. Rukhsana Haider, Civil Society Alliance for SUN (CSA for SUN)

Civil society has been central to raising awareness of nutrition issues in Bangladesh through popular media channels, media capacity building, workshops and high level advocacy meetings. Examples include:

- **RENEW (Reenergizing Nutrition Expanding Worldwide)** - an innovative multimedia presentation experience developed by the Population Reference Bureau and Eminence, for high level policy audiences and leaders from multiple sectors of government which emphasizes the critical importance of investing in nutrition.
- **eToolkit and elearning courses** which cover family planning, maternal, newborn and child health and nutrition topics along with interpersonal communication and counselling:
www.k4health.org/bangladesh-toolkits
- **TV talk show series** focusing on multi-sectoral approaches to nutrition, anchored by civil society alliance (CSA) for SUN Secretary, Dr Kaosar Afsana; TV spot and advocacy video featuring famous national champions.
- **Regular district and divisional level advocacy seminars** focused on the ‘1000 days Window of Opportunity’, involving community level activities, such as schoolyard drama, and art and school quiz competitions that use a set of three comic books for adolescents.
- **Orientation and training** on the ‘1000 Days’ for new influential audiences. The Bangladesh Girl Guides Association, school teachers and midwives have been targeted.
- **Opportunistic advocacy**, for example, on the Working Students’ Day, SUN Global Day of Action, Extreme Poverty Day and human chain demonstrations in the lead up to SUN Global Gathering 2013.

Partnership with the media

NNS has worked in collaboration with other stakeholders such as Alive & Thrive, Fanta, FHI360, Management and Resources Development Initiative, Eminence as well as Bangladesh Health Reporter's Forum to establish a unique partnership with the media. Acknowledging the media's power for telling important stories, generating buzz, building momentum and unifying voices, stakeholders are increasingly coming together to better harness the credibility and reach of journalists. This experience is proving that journalists can become nutrition champions.

Key initiatives have included:

- Central-level training, including via an innovative Fellowship Programme, to increase knowledge and capacity for example on the implementation of the Breast Milk Substitute (BMS) Marketing Code among national print and online health journalists, and involve them in developing nutrition messages
- Division-level training to raise awareness of infant and young child feeding (IYCF) best practices and build support for regional reporting
- Study circles to connect nutrition issue experts with media to drive coverage and deepen content
- Mentorships to shape stories and troubleshoot journalists perspectives about nutrition reporting
- Media gatekeeper sensitization workshops to help orientate editors and news directors to increase their support for media coverage
- The development of a Health Journalist Handbook along with journalist's E-toolkit (which includes nutrition)
<https://www.k4health.org/toolkits/bangladesh-health-journalists>
- A specific Nutrition Handbook for Journalists
http://mrdibd.org/publications/Pushti%20Shondhan_English.pdf

Social mobilization and behaviour change communication to increase awareness and set the nutrition agenda

Important social mobilization work has been done to keep a steady drumbeat of nutrition advocacy, communication and activities to generate awareness and build momentum. The Behaviour Change Working Group, which comprises all key actors operating in the health, population and nutrition sectors, jointly formulates effective strategies for harmonizing nutrition communication messages and best practice. A variety of television spots create awareness of appropriate IYCF practices amongst caregivers and also to stimulate interest amongst decision makers.

High level roundtable discussions have taken place: on multi-sector nutrition, chaired by BRAC Chairperson Sir Fazle Hasan Abed; on implementation of the BMS Code, held by NNS and chaired by Dr. SK Roy and Professor MQK Talukder; recent multi-sector roundtable on nutrition sensitive policies and interventions in Bangladesh, arranged by the Ministry of Food, as part of an intensive training for government staff, supported by the Food and Agriculture Organisation (FAO).

Nutrition champions can help spearhead awareness campaigns and continue to lend their support. The UNICEF Ambassador, Sakib Al Hassan, Bangladesh's most popular cricketer, was a prominent nutrition champion in a recent campaign during the International Cricket Council (ICC) World Cup. Nutrition policy champions are also beginning to emerge, such as the State Minister for Women's and Children's Affairs, Meher Afroz Chumki.

At the grassroots level, the Government of Bangladesh is working with stakeholders to disseminate effective materials on IYCF and the 1000 days, engaging with religious leaders, organizing nutrition fairs, festival, folksongs, film shows, debates and essay competitions. Behaviour Change and Communication materials are also increasingly including information on the production and consumption of safe food, healthy dietary practices and food security. This ongoing harmonization work will be strengthened through the National Advocacy and Communication Strategy.

“The support I’ve received through the fellowship program has been exceedingly important. It has really opened up my horizons, and helped me write more nutrition stories in six months than I might have done in six years... I feel nutrition now has become a lifelong passion. I will continue to cover this issue as long as I work as a reporter.”

IYCF Fellowship Journalist, Bangladesh



@ Edwyn Shiell

National print, online and television journalists undertake an intensive training on BMS Code and IYCF practices, organized by the National Nutrition Services.

Building support for the SUN Movement

There are signs of increasing interest from the Prime Minister's Office, and the nomination of Nutrition Focal Persons are soon expected in all relevant ministries. This all points to growing good will for prioritizing nutrition across government, although more ownership for effective collaboration is still needed. Plans are underway for the National Launch of SUN and a Multi-sector Nutrition Knowledge Sharing event, using the Common Narrative on Under-nutrition as a key advocacy document.

Key areas of focus in 2014-15 will be: to finalize and implement the joint national advocacy and communication strategy on nutrition, continue to build media partnerships and expand and strengthen the SUN Multi-Stakeholder Platform under strong government leadership - because nutrition is everyone's business.

Key Lessons

- Despite many challenges, individual interest and commitment, coordination and concerted cooperative efforts can generate successful advocacy and reach new audiences with key communication messages.
- Avoid reinventing the wheel by ensuring use of existing resources of all stakeholders and coherence and sharing to avoid duplication. The potential for nutrition stakeholders to better advocate, mobilise and communicate needs to be maximized.
- Unpack the multi-sector approach in a manner which all sectors can understand and act upon. All nutrition actors need to actively plan how they communicate complex issues like multi-sector nutrition to the media.
- Newsroom support from editors is essential to drive media coverage. New data are continually required to maintain a steady flow of accurate and newsworthy information.
- The capacity building of civil society and non-governmental organisations working at the grassroots level is needed to support effective nutrition specific and sensitive programmes and sustain advocacy and communication momentum.



UGANDA

Harmonising Strategies



Uganda has developed a harmonised Nutrition Advocacy and Communication strategy.

Maureen Bakunzi, Assistant Commissioner for Policy Implementation and Coordination, Office of the Prime Minister and SUN Government Focal Point describes how the strategy has evolved...

The Government of Uganda recognizes the need to ensure that its population is well nourished.

The Constitution of the Republic of Uganda, 1995, sets out the National Objectives and Directive Principles of State Policy and number XXII of these relates to food security and nutrition and provides that:

The State shall

- (a) Take appropriate steps to encourage people to grow and store adequate food
- (b) Establish national food reserves
- (c) Encourage and promote proper nutrition through mass education and other appropriate means in order to build a healthy State

Uganda was among the very first countries to commit and join the SUN Movement in March 2011. The Government acted on its commitments to the Movement by developing the Uganda Nutrition Action Plan (UNAP) which is the country's framework for scaling up nutrition as well as the common results framework. The UNAP was launched by the President in November 2011. The implementation of the UNAP, taking a multi-sectoral approach, is coordinated by the Office of the Prime Minister.

There has been considerable progress since implementation of the UNAP. Major achievements include the formation of District Nutrition Coordination Committees, oriented to the UNAP, that are developing action plans in 31 districts.³ A further 81 districts are planned for in 2014. In addition, the first National Nutrition Forum took place in December 2013 hosted by the Prime Minister where all stakeholders came together to re-affirm their commitment to the multi sectoral approach to scaling up nutrition in Uganda.

CHILDREN UNDER 5

Stunting:	33.4%
Wasting:	4.3%
Overweight:	3.4%
Low birth weight:	6.9%
Exclusive breastfeeding:	63.2%

Source: DHS 2011

Activities to mobilize society, advocate and communicate about nutrition

A variety of activities are underway to highlight the issue of nutrition in Uganda and to stimulate action:

- ➔ Radio campaigns in northern Uganda have taken place including radio spots/talk shows focused on promotion of nutrition best practices. This was supported by the United Nations Children's Fund (UNICEF)
- ➔ Journalists have been trained on how to objectively cover nutrition priorities supported by the United States Agency for International Development (USAID) together with Food and Nutrition Technical Assistance (FANTA) and UNICEF

- A community behaviour change communication video initiative is underway. Village health teams use videos to create dialogue on nutrition at community level supported by USAID and the Strengthening Partnerships, Results and Innovations in Nutrition Globally (SPRING) project.
- Counselling aides have been produced covering aspects such as how to have a healthy baby and family. These are used by village health teams supported by the World Health Organisation (WHO) and the Ministry of Health
- Counselling tools for community-based nutrition through the Uganda Programme for Human and Holistic Development (UPHOLD) and USAID have been created
- The Cost of Hunger report was published in June 2013 to provide material for nutrition advocacy

Developing the National Advocacy and Communication Strategy for the UNAP

The Office of the Prime Minister, through its Uganda Nutrition Action Plan (UNAP) Secretariat is leading the development and finalization of the National Nutrition Advocacy and Communication (NAC) strategy. The UNAP Secretariat brings together the relevant line ministries and sectors, United Nations (UN) agencies, development partners, civil society, the private sector and academia in the implementation of the UNAP and all these stakeholders have been involved in the development of the NAC strategy through a NAC Taskforce. The Uganda SUN Movement Civil Society group (UCCO-SUN) has been particularly active in the development of the NAC strategy, and will continue to contribute through activities at national and decentralized levels. The UCCO-SUN has a funded advocacy project aimed at high-level policy makers and decision-makers.

The NAC strategy is currently being finalized and is expected to be launched during the month of August 2014. It consists of three distinct components, advocacy, social change and mobilization, and behaviour change communication. To start the process, the advocacy component was finalized in 2013, and has already been used to guide advocacy towards high level decision-makers and donors. The advocacy component identifies different target audiences, and strategies and actions to deliver key messages on nutrition and nutrition governance. The other two components have been finalized recently and now the three sub-strategies are being merged into one harmonized strategy.

The NAC strategy is organized under a set of overarching priorities and includes communication activities to enable the three components to build upon one another. The strategy is largely built upon the UNAP.

The Cost of Hunger⁴ in Uganda

The Cost of Hunger study in Uganda set out to estimate the additional cases of morbidity, mortality, school repetitions, school dropouts, and reduced physical capacity that can be directly associated to a person's under-nutrition before the age of five, and the associated costs to the economy. National data sets were examined, including the Uganda National Household Survey 2009/2010, Population and Housing Census 2002, Demographic and Household Survey 2011 and previous data sets with the addition of some primary data.

The study found that 15% of child deaths in Uganda are associated with under-nutrition equivalent to more than 110,000 deaths between 2004 and 2009. Under-nourished children are more likely to experience anaemia, acute diarrhoeal syndrome, acute respiratory infection, and in some cases, fever. For every additional case of child illness, both the health system and families are faced with additional economic costs. The study also found that stunted children are more likely to repeat grades in school at a cost to the education system and caretakers. Stunted students are more likely to drop out of school altogether. An estimated 54% of the working population in Uganda or 8 million people are estimated to have been stunted as children and to have lower productive capacity.

The total losses associated with child nutrition in Uganda are US\$899 million equivalent to 5.6% of Gross Domestic Product (GDP) per year.

Source: Summary Report: The Cost of Hunger in Uganda. Implications on National Development and Prosperity. June 2013

The NAC strategy prioritizes four pillars that directly contribute to the achievement of the UNAP objectives:

Pillar 1: Importance of healthy growth during the first 1000 days of Life;

Pillar 2: Promotion of nutritious Ugandan diet;

Pillar 3: Promotion of role models (and champions, such as champion communities to gather social proof and empower change); and

Pillar 4: Accountability (collective responsibility for all nationals). It should be noted that all the four pillars have implications for activities at national, sub-national, community and even household level.

The aim is for messages at all levels – for individuals, communities, districts, and at national level - to be coherent and aligned. The strategy also includes measurable success indicators, and will eventually include a limited number of impact indicators. A monitoring and evaluation plan is being developed to accompany the strategy and action plan, and will be implemented following the launch in August 2014.

Actions in the community

Through the Ministry of Health community nutrition programme and support from various development partners' activities at district, county, sub-county and community levels, behaviour change communication activities are taking place regularly. These include community nutrition demonstrations, counselling, growth monitoring and promotion activities, world breastfeeding week, and health days, for example, which promote healthy behaviours and service delivery. The NAC strategy and action plan will enhance and build on existing activities, and increase the capacity of service providers, especially at community and service-delivery levels, to promote improved healthy nutrition behaviours.

A proposal is being prepared to establish a UNAP knowledge management facility/repository, which would assist various stakeholders, including the NAC Taskforce to systematically record innovations and experiences, and share them throughout the country. In line with the above, materials are currently being reviewed, updated and new tools and materials for nutrition advocacy will be developed. By the end of 2014, the repository will be available and tools and materials ready for sharing.

Challenges

The current major challenges to effective communication and advocacy for scaling up nutrition in Uganda include:

- ➔ Inadequate resources for activities, for developing and reproducing tools and materials
- ➔ Coordination between partners/stakeholders, to prevent duplication and to ensure the best use of resources, pooling of ideas and funds, and the rational division of tasks
- ➔ Lack of knowledge about available resources, tools, materials to permit better harmonization of messages and materials
- ➔ Capacity to plan, create and implement communication and advocacy materials/ events is mixed - some stakeholders have high level skills and capacity while others do not

The first step in addressing these challenges has been the creation of an action-oriented Task Force, led by the UNAP Secretariat and aimed at carrying out specific actions to create the NAC Strategy and action plan. Through various development partners including USAID - SPRING, international experts have been brought in to provide advice and technical support (e.g. MANOFF Group⁵) for the NAC strategy. Individual projects/ agencies have brought technical support from headquarters and in the form of technical consultants. Additional assistance, in the form of materials, ideas, and experiences from other countries would be most welcome. Exchange visits to observe and learn from other countries would be very beneficial.

Nutrition advocacy and communication in the UNAP

The NAC strategy supports the following UNAP objectives and strategies starting with **Objective 5** which is the most relevant:

Objective 5: Create awareness of and maintain national interest in and commitment to improving and supporting nutrition programmes in the country,

Strategy 5.1: Increase awareness of and commitment to addressing nutrition issues in the country, and;

Strategy 5.2: Advocate for increased commitment to improving nutrition outcomes.

Objective 1: Improve access to and utilization of services related to maternal, infant and young child nutrition,

Strategy 1.2: Address gender and socio-cultural issues that affect maternal, infant and young child nutrition.

Objective 2: Enhance consumption of diverse diets,

Strategy 2.1: Increase access to and use of diverse nutritious foods and use at the household level;

Strategy 2.2: Enhance post-harvest handling, storage, and utilization of nutritious foods, at the household and farm levels;

Strategy 2.3: Promote consumption of nutrient-enhanced foods.

Objective 3: Protect households from the impact of shocks and other vulnerabilities that affect their nutritional status,

Strategy 3.1: Develop preparedness plans for shocks;

Strategy 3.2: Promote social protection intervention for improved nutrition.

Objective 4: Strengthen the policy and legal frameworks and the capacity to effectively plan, implement, monitor, and evaluate nutrition programmes,

Strategy 4.1: Strengthen the policy and legal frameworks, for coordinating, planning and monitoring nutrition activities.

Key Lessons

- ➔ Working together for a common result - in this case the NAC strategy - has been a major learning and productive experience for stakeholders committed to scaling up nutrition in Uganda.
- ➔ By bringing together different partners and stakeholders to support government and each other, the competitive advantages of different groups have been maximized.
- ➔ Employing a consultative approach to strategy development has yielded very beneficial results.



PERU

Joining Forces for Peruvian Children



Nutrition has risen up the political agenda in Peru. Ariela Luna, Vice Minister of Policy and Social Evaluation, Ministry of Development & Social Inclusion and SUN Government Focal Point with Milo Stanojevic, National Director of CARE Peru and SUN Civil Society Alliance Coordinator provide the background...



In 2006, one in four children was malnourished in Peru and the rate was four out of ten children in rural areas. This was in spite of the fact that the Government of Peru had allocated significant resources in the form of food distributions but which were ineffective in reducing malnutrition over a decade (1996-2006). The Initiative against Child Under-nutrition or Iniciativa contra la Desnutrición Infantil (IDI)⁶ was created in 2006 to build political momentum for nutrition during the general election in the same year.

The IDI is a collective effort by agencies concerned with development in Peru and who are actively involved in supporting interventions that address the multiple causes of child malnutrition. The IDI promotes coordinated, multi-sectoral and comprehensive responses by the State.

The initiative is recognized as the SUN civil society alliance in Peru and consists of 18 institutions working together to influence public policies and place child nutrition at the centre of the government's agenda. The IDI provide a forum for publishing and analyzing government efforts in fighting malnutrition and ensuring the accountability of political commitments by elected officials.

CHILDREN UNDER 5

Stunting:	18.1%
Wasting:	0.6%
Overweight:	9.8%
Low birth weight:	6.9%
Exclusive breastfeeding:	67.6%

Source: DHS 2012

The IDI stresses that good nutrition in the 1,000 day window of opportunity during pregnancy and the first two years of life is essential for social and economic development and an invaluable investment for the country.



A person is the most valuable resource for a country and attention is needed before birth.



The first thousand days of life from pregnancy until two years of life is a key biological, psychological and social stage for an infant.



It is the moment to prevent and control malnutrition and to avoid irreversible physical and mental damage.



During this period, adequate nutrition to boys and girls should be ensured that act on the determinants of malnutrition.



The struggle against malnutrition begins before birth.

Elections in 2006

The general election of 2006 was an opportunity for a complete change in national authorities. The IDI used the opportunity to influence public policy and place the issue of child malnutrition on the agenda. In July 2004, Peru had approved the National Food Security Strategy, of which one goal was to reduce chronic malnutrition. But the implementation of the strategy was not being driven with enough power by the national government. In the context of leadership change, it was essential to stimulate a change in the commitment of national, regional and local authorities to deal with under-nutrition and make it the linchpin of social programmes to combat poverty.

One of the first activities of IDI members was the formulation of a commitment document to be signed by presidential candidates. This document set out key messages and strategies in response to the following questions:

- What is child malnutrition?
- What factors cause childhood malnutrition?
- What damage is caused by child malnutrition?
- What is the relationship between nutrition and poverty?
- How many children are affected by this problem?
- What can be done to reduce child malnutrition?
- What strategies have proven results?
- How can food security policies help to reduce factors associated with malnutrition?
- What is the policy framework for tackling malnutrition in the country?

The IDI generated the political momentum needed to get 10 candidates for the presidency of Peru to sign this commitment document in which they pledged to reduce, within 5 years, malnutrition in children under 5 years by 5%; a goal that was subsequently met.

When the President was elected, he honoured his pledge and endorsed the National Strategy for Combating Poverty and Chronic Child Malnutrition (CRECER) which was placed under the direct responsibility of the President's Council of Ministers. This strategic action facilitated political coordination between public entities and non-governmental organizations.

The IDI proposed '10 recommendations for the first 100 days' suggesting how the government could reduce child malnutrition. It then continued to advocate for implementation of the national CRECER policy with national and sub-national authorities, providing technical support for the development of interventions that had evidence of impact.

10 recommendations for the first 100 days

1. **The President ratifies his commitment to reduce chronic malnutrition by 5% during his term in office, giving full authority to the Council of Ministers (PCM) to fulfill this commitment.**
2. **The PCM assumes responsibility for the implementation of the National Food Security Strategy.**
3. **The Multi-sectoral Food Safety Commission (made up of members of various ministries) is re-activated as a technical body responsible for coordinating the actions in each ministry to reduce chronic malnutrition.**
4. **The President of the Republic undertakes to submit annually to the nation results in the fight against chronic malnutrition.**
5. **A concerted plan is defined to implement nutritional programmes.**
6. **The national government initiates the implementation of a programme to improve the management capacity of municipal governments.**
7. **Local and regional governments provide no less than 30% of their budget to be invested in training in nutrition and hygiene, infrastructure for access to water and basic sanitation, and improving the conditions for sustainable development of rural economies.**
8. **The Ministry of Finance initiates the implementation of a programme to provide technical assistance and strengthen regional and local governments in the development of public investment projects.**
9. **Municipal governments establish mechanisms of accountability to the public, civil society and other local and regional organisations, with respect to actions taken to reduce child malnutrition.**
10. **The national government creates an incentive programme for municipal governments with a more efficient performance in carrying out the activities that contribute to reducing child malnutrition.**

As a result of the continued advocacy, cooperation and technical assistance provided by the IDI and the generation of political will at the highest level, the allocation of financial resources for the development of effective interventions by the government between 2006 and 2011 increased. The impact has been a reduction in childhood chronic malnutrition rates in Peru. IDI has also advocated for national and local authorities to take a comprehensive and multi-sectoral approach to tackling malnutrition.

The successful actions include:

- Adoption of the Multiannual Macroeconomic Framework and Multi-Year Social Framework which established strategic policy priorities for social investment and included essential actions for timely access to good quality services in nutrition, health and education.
- Implementation of results-based budgeting for the Joint Nutrition, Maternal and Neonatal Health Programme which meant that public spending was directed to effective interventions in a focused and transparent manner.
- The use of instruments to improve individual and geographic targeting, such as the Household Targeting System that provides information to social programmes on the socio-economic characteristics of households, so that the poorest can be prioritized and selected as beneficiaries.
- Membership of the Health Security Insurance by vulnerable populations that are living in poverty and extreme poverty.
- Inclusion in the Conditional Cash Transfer Programme 'TOGETHER' of commitments to cover participation of beneficiary families in the areas of nutrition, health, education and identity. The main objective of 'TOGETHER' is to support pregnant women and children living in poverty in rural areas, to access public education and health services. The conditions for household members is that expectant mothers attend their pregnancy checks, take children to growth and development monitoring, and enroll their children in school and ensure their attendance.
- Approval of the Incentive Plan for Improvement of Municipal Management designed to address inadequacies in the provision of public services and infrastructure, with the aim of contributing to sustainable growth and development of the local economy and encouraging municipalities to reduce chronic child malnutrition.
- Implementation of Municipal and Health Service strategies and policy development of local government with the aim of promoting healthy behaviours in families to prevent chronic child malnutrition.
- The formation of the Intergovernmental Committee on Health as a permanent body of health management between the Ministry of Health and the regional governments with the aim of developing components of decentralized management to exercise the powers and functions transferred by the national government.
- Development of the radio campaign 'child nutrition' to provide families in Peru with useful and practical information aimed at improving the quality of nutrition of children under three years of age.



Peruvian mothers with their babies

As a result of the above actions, the national malnutrition rate dropped from 28.5% to 19.5% between 2007 and 2011⁷. In rural areas, where malnutrition is most severe, the proportion of stunted children declined from 45.7% to 37.0% during the same period. There were, however, still more than 680,000 children under five affected by chronic malnutrition and more than 740,000 children under 6 to 36 months affected by nutritional anaemia.

Elections in 2011

During the 2011 election, the IDI again worked to generate political commitment among the 10 presidential candidates. It successfully persuaded all the candidates to sign a document in which they pledged to reduce chronic child malnutrition and anaemia. When President Ollanta Humala was elected to power, he pledged to reduce chronic malnutrition by 10%, and anaemia by 20% by the year 2016.

As a result of this political commitment, the Ministry of Development and Social Inclusion (MIDIS) has been created to develop policies and sectoral efforts aimed at social inclusion and to meeting the goals prioritized by the government. A national 'INCLUSION FOR GROWTH' strategy has been approved which provides a general framework for policy development and social inclusion for interventions at the three levels of government (national, regional and local). The priority outcome of the strategy is the reduction of chronic malnutrition and anaemia.

Progress achieved in the period 2011 to 2014 is:

- Commitment by the regional presidents to reduce child malnutrition and work together with the national government.
- Approval of guidelines for coordinated inter-sectoral and inter-governmental management aimed at reducing child malnutrition in the context of development policies and social inclusion.
- Development of regional nutrition goals and increased coverage of effective interventions with the involvement of local authorities and representatives of civil society.
- The Programme for a Joint Nutrition Budget (PAN) that has, since 2008, allocated resources for the development of effective interventions in the fight against child malnutrition.
- Universal micronutrient supplementation to prevent and reduce anaemia and stunting in children aged 0 to 3 years.

Year	Amended Budget Programme for a Joint Nutrition Budget (PAN) USD
2008	316,231,391
2009	326,861,777
2010	469,933,615
2011	581,373,436
2012	890,629,115
2013	691,885,022

Source: Based on the *Reporte de Seguimiento Concertado al Programa Presupuestal Articulado Nutricional. Balance de Ejecución 2012, MCLCP y Consulta Amigable del MEF al 4 de marzo de 2014.* (1 USD = 2.8 NS)

- Creation of the Fund to Stimulate Performance and Achievement of Social Results to promote and implement the national policy and achieve concrete results in improving management processes, coverage of services and budgetary systems linked to early childhood development.
- Development of guidelines for local authorities on the management of effective interventions to reduce malnutrition in coordination with national, regional government and civil society.
- Adoption of the National Plan for the Reduction of Chronic Malnutrition and Child Anaemia Prevention in the country.
- Development of the radio campaign '*papeao and apapachao*' ('wanting to eat') to inform and sensitize parents on the importance of early childhood development campaign.

IDI continues to hold the government to account on the 'Statement of Government Actions to Reduce Child Malnutrition' and continuously monitors government progress on reaching its recommendations. It also continues to work through its various programmes on the dissemination of national policy and provides technical assistance at different levels of decision-making for the management of effective interventions.

Challenges

The Government of Peru still faces challenges. Firstly, on how to implement a suitable strategy to reduce gaps and ensure equitable allocation and effective management of resources. Secondly, ensuring effective strategies and adapting them to different socio-economic, cultural and geographical contexts.

Thirdly, how to prioritize investments that improve access to water and sanitation for vulnerable populations. Fourthly, how to strengthen systems to monitor implementation and budgetary expenditure. Finally, how to strengthen opportunities for the participation of citizens to promote accountability at all levels.

Key Lessons

- It is critical to set out the evidence on the causes, actions and policy frameworks for improving nutrition in order to persuade presidential candidates to pay attention to the problem of malnutrition.
- Meetings with representatives of different political parties participating in elections is needed to reinforce the evidence.
- Advocacy for nutrition has to be maintained over multiple elections to ensure that new political authorities sustain efforts to improve nutrition.





PAKISTAN

Building Political Commitment for Nutrition



Enormous advocacy efforts over the last two years have created a tremendous movement for nutrition in Pakistan.

Muhammad Aslam Shaheen, Chief of Nutrition, Planning Commission and SUN Government Focal Point

describes the growth of political commitment...

“Chronic malnutrition levels in Pakistan have not changed over the decades, and have been estimated to cost the economy 3% of the GDP each year. What needs to be done is known. Now it is time to generate political will to do it.”

Dr Parvez Iqbal Paracha, visiting professor at the Agriculture University Peshawar’s Department of Human Nutrition

CHILDREN UNDER 5

Stunting:	43.7%
Wasting:	15.1%
Overweight:	N/A
Low birth weight:	22.3%
Exclusive breastfeeding:	15.0%

Source: NNS 2011

Pakistan was the 34th country to join the Scaling up Nutrition (SUN) Movement in April 2013. At a launching ceremony in December 2013, Ministers from the Government of Pakistan together with senior officials from federal and provincial governments and members of the Development Partners for Nutrition Group (DPNG), signed a Declaration of Commitments. Together they committed to reducing under-nutrition levels by half by the year 2025; recognized that coordinated, multi-sectoral and consolidated efforts to scale up nutrition were required; noted that stakeholder awareness of the magnitude of the nutrition problem had to be raised; and called for political commitment, investment and support from all sectors and actors.

Strategic approach

There is no formal advocacy and communication strategy for scaling up nutrition in Pakistan yet, though there are plans to develop one. Despite its recent participation in the SUN Movement, a number of diverse activities focusing on raising the profile of nutrition have been initiated largely supported by the DPNG in collaboration with the federal and provincial governments.

A SUN civil society alliance (SUN CSA) is also being established through a broad national consultation process. At a meeting in June 2014, key civil society organizations and networks from across the country met in Islamabad to form the SUN CSA for Pakistan. A membership drive to register civil society organisations will be conducted which will be followed by elections to streamline the CSA network activities for scaling up nutrition.



Federal Minister for Planning Development and Reform, Professor Ahsan Iqbal, addressing the launching ceremony of the Scaling Up Nutrition Movement in Pakistan in December 2013.

Raising awareness about nutrition

A major advocacy and communication priority is to have clear communication and messages about malnutrition in Pakistan. The DPNG developed Pakistan's Nutrition Facts or 'Killer Facts' which have helped to focus attention on the consequences of malnutrition including the socio economic consequences. 'Killer Facts' were prepared to create awareness amongst parliamentarians, civil society and others through seminars and workshops.

In addition, a series of seminars and consultations facilitated and organized by Save the Children with technical presentations by development partners and well known high profile speakers both at federal and provincial level have taken place. These focused on malnutrition and its consequences.

Senior officials have taken part in a number of key events in 2013 which have raised awareness and knowledge about nutrition in Pakistan.

There have been launches of:

- ➔ The National Nutrition Survey 2011 chaired by the Minister for Planning and Development and Reforms (Planning Commission) and co-chaired by the Minister for Health Services Coordination and Regulations with Remarks of the Resident UN Coordinator, representatives of the Provincial Governments and the DPNG
- ➔ *The Lancet Series on 'Health Systems Pakistan'*
- ➔ *The Lancet Series on 'Maternal and Child Nutrition' 2013*. The launch was covered by the leading newspapers of the country
- ➔ The Institute of Development Studies Bulletin of May 2013 on *'Addressing Malnutrition in Pakistan'*
- ➔ *The 'Political Economy of Malnutrition'* by the Aga Khan University

These events are critical for highlighting to policy-makers the magnitude of nutrition problems in Pakistan, the socio-economic costs and the potential for improving the nutrition agenda forward. Advocacy at national, provincial and community level has been identified as a crucial first step in transforming the enabling environment for nutrition in Pakistan.

The Political Economy of Under-nutrition

A report published in March 2013 set out to examine why rates of under-nutrition have remained unchanged in Pakistan for over half a century. Using a political economy approach, the report concludes that levels remain high because of a lack of cross-sectoral collaboration between the different institutions that deal with nutrition, the lack of a strong national agenda to improve nutrition that emanates from the highest executive offices of the state, and a lack of consistent monitoring of the situation using reliable data. After decentralization in 2010, responsibility for 17 ministries moved from the centre to the provinces⁹. A Nutrition Section was established in the Planning Commission in the early 1970s with responsibility for nutrition planning, coordination, monitoring and evaluation. After decentralization, the role of the Nutrition Section expanded to include coordination across sectors and stakeholders. The report notes that political commitment and 'championing' needs to be maintained to establish nutrition within the development agenda across sectors. It is critical for different political parties to prioritise nutrition and for this to happen, the case for nutrition needs to be well-presented to politicians and the executive bureaucracy through well-targeted advocacy. In addition, advocacy coalitions with community support organisations, experts, and the media could usefully be set up to target policymakers, implementers, and the community while investment in community mobilisation networks at sub-district and local level would support nutrition outreach activities.

Source: Institute of Development Studies and Aga Khan University (March 2013) The Political Economy of Under-nutrition National Report: Pakistan

Engaging the media

Roundtables to engage media in highlighting the issue of malnutrition have been organized which led to several contributions by media people in leading English and Urdu newspapers. During one such roundtable organized in Karachi in November 2013, a senior journalist requested the development sector to take the initiative and start training journalists on health reporting. He said, "A journalist is just as good as his information; journalists are not experts but if given the right information, they can surely make a difference". He noted that the media can play an effective role in raising awareness among the masses as well as advocating with government functionaries for enforcement of relevant laws and allocation of adequate resources for multi-sectoral nutrition interventions⁹.

As a result training workshops have been organized for journalists followed by field visits to various health facilities in provinces. This training resulted in significantly more media coverage on malnutrition. Following the media roundtables, media representatives were provided with updated information on the situation of malnutrition for writing opinion pieces.

Working with parliamentarians across the political divide

In order to avoid nutrition becoming tied to a single party's agenda, parliamentarians from both the ruling and opposition parties have been briefed on the situation of under nutrition at national and provincial level and the contribution of nutrition to reductions in under five mortality. After a briefing on nutrition in Lahore attended by 14 members of the Punjab Assembly, for example, parliamentarians belonging to the ruling party and opposition released a press statement pledging their support to address malnutrition in Punjab. The Punjab government is in the process of preparing an integrated provincial nutrition strategy and plans to put maximum effort into the implementation of the Punjab Protection of Breastfeeding and Child Nutrition (Amendment) Act 2012.

Mobilising communities

There have been efforts to bring attention to nutrition in communities. A documentary on nutrition has been produced, which was shown on two national and 18 cable channels across Pakistan. Hosted television talk shows have been aired, with speakers from national and provincial governments, policy makers and experts. Similarly, a documentary about the situation and importance of breastfeeding has been produced and aired.



A female health worker conducts a health, nutrition and hygiene session for a group of women and children in Sabhar bheel village, Umarkot district, Sindh province Pakistan.

Advocacy to protect breastfeeding

At both national and provincial level, various steps have been taken to generate debate about the importance of breastfeeding. Despite being the only country in South Asia to have a National Breastfeeding Policy, Pakistan has the lowest exclusive breastfeeding rate at 38% and the highest bottle feeding rate at 41%. According to the Pakistan Demographic Health Survey 2012-13, there has been an increase of 0.6% in the exclusive breastfeeding rate, while the rate of bottle-fed babies has risen by 8.9% since 2006. These statistics were shared with participants at an advocacy seminar on breastfeeding that took place in Islamabad in August 2013. As a result, steps have been taken to pass legislation to protect breastfeeding in Sindh and Balochistan provinces, to implement breastfeeding legislation in Punjab and at the national level, and to finalize the Breastfeeding Bill in Khyber Pakhtunkhwa (KP).

The business community is also being mobilized. A half-day national consultation on *'The Role of Private Sector in Addressing Malnutrition in Pakistan'* has been organized, which was attended by about 30 participants from the public and private sectors.

Provincial and district strategies and communication

Two provinces, Sindh and Balochistan, have prepared nutrition programmes which have been approved and are going to start shortly. While, the provinces of the Punjab and Khyber Pakhtunkhwa (KP) have prepared integrated health sector reform project, including nutrition interventions, that have been approved and activities have started. Nutrition-sensitive approaches are being planned in all provinces.

A national communication strategy for social and behaviour change is being prepared. Similarly, the agriculture sector has developed key messages on healthy nutrition and developed pictorial communication materials for work with rural and farmers' communities, women and men advocating for a diversification in food production and consumptions. Agriculture extensions workers and school teachers are the main messengers reaching out to the target group.

Government nutrition projects in all four provinces include a communication component involving mass media and also public sector service providers on subjects around the 1,000 days, maternal and child nutrition. The UN agencies and development partners are actively involved in advocacy and communication on both demand and supply (consumers and producers) mainly in support of universal salt iodisation (advanced) and flour fortification (in preparation).

Impact

The enormous advocacy efforts over the last two years have created a tremendous movement for nutrition in Pakistan. The *'Pakistan Vision 2025'* plan which aims to unlock the immense potential within the country through developing human and social capital, achieving good governance, institutional reform and modernisation of the public sector as well as developing a competitive knowledge economy, specifically includes nutrition. Politicians are talking about nutrition, policies and strategies are being formulated, the media are picking up on the issue of nutrition and broadcasting key messages and convening talkshows about the nutritional crisis. Provinces have nominated SUN Focal Points in their Planning and Development Departments. While there have been no scientific studies or formal evaluations conducted to measure the impact of the advocacy efforts, the impact is visible and growing.

Prospects

Currently most of the communication and advocacy for scaling up nutrition is supported and led by the DPNG member organizations. The government is trying to ensure that there are financial and human resources available for nutrition communication and advocacy within national and provincial governments. Technical support to provincial governments is being extended and steps are being taken for implementation of the laws, policies and budgetary allocation for nutrition. Parliamentarians are sensitized and constantly engaged at the national and provincial level which will ultimately lead to positive results particularly in endorsing laws and policies, and increasing budgetary allocation for nutrition. Constant engagement with media will also sustain the debate and pressure.

Key Lessons

- Coordination mechanisms are critical for planning, development and reform. Strong and adequate cooperation and coordination between government and international agencies including UN, donors and international non-governmental organisations to overcome malnutrition has been possible through the SUN Movement platform, while a multi-sectoral strategy has been adopted. The Planning Commission has been effective in pulling together multiple stakeholders.
- Creation of nutrition awareness amongst parliamentarians and civil society is key.





CAMEROON

Engaging Elected Representatives



Cameroon is targeting multiple groups including parliamentarians to raise issues around malnutrition.

Georges Okala, Deputy Director of Food and Nutrition, Ministry of Public Health and SUN Government Focal Point

highlights the successes...

Cameroon’s approach to nutrition advocacy has been born out of a long-term neglect for nutrition in the country. Cameroon is among the 36 countries in the world with the largest number of children under five suffering from stunted growth. Nearly 33% of children under five suffer from stunting: equivalent to approximately one million children. Six out of ten children are anaemic (due to iron deficiency). The prevalence of acute malnutrition is 6% across the country and reaches 10% in the northern and Far North regions.

To address this situation, nutrition interventions have been supported by development partners for many years together with the health sector: the only sector formerly engaged with nutrition. PROFILES¹⁰, an advocacy tool, had been applied to estimate the cost of malnutrition in the Cameroon but there was a mixed reception to the findings as Cameroon was considered self-sufficient in food. The lack of funding for nutrition meant that the situation was likely to worsen over the years.

The first warning came in 2006 with the arrival of refugees fleeing from the Central African Republic to the East of the Cameroon which meant that nutrition services had to be reinforced in order to cope with the refugee population. The first surveys collecting nutrition information (Multi-Cluster Surveys or MICS and Standardized Monitoring and Assessment of Relief and Transitions or SMART) that were carried out showed an alarming situation among children

CHILDREN UNDER 2

Stunting:	32.5%
Wasting:	5.6%
Overweight:	6.2%
Low birth weight:	7.6%
Exclusive breastfeeding:	20.4%

Source: DHS 2011

less than five years of age. This drew the attention of the government. Faced with this alarming situation and to visibly increase the level of interventions and accountability, Cameroon joined the Scaling Up Nutrition Movement in March 2013.

A new approach to nutrition advocacy

To develop a common understanding of malnutrition in Cameroon and to analyse coordination mechanisms and platforms, an inter-agency mission was jointly undertaken by United Nations (UN) agencies: Food and Agriculture Organisation (FAO), World Health Organisation (WHO), World Food Programme (WFP) and United Nations Children’s Fund (UNICEF) in April 2013 with the support of nutrition regional offices. The mission involved five key sector ministries (health, agriculture, water and sanitation,

women's empowerment and family, economic and planning), the Minister Secretary General of the Prime Minister, as well as technical and financial partners. The mission concluded that malnutrition was unrecognised in Cameroon.

An advocacy plan for nutrition was therefore initiated under the joint leadership of the Ministry of Health and UNICEF with the aim of embedding nutrition within the development agenda of Cameroon. The plan called for intensified advocacy actions to:

- Inform decision makers and stakeholders about the process
- Engage key stakeholders
- Equip key actors to be able to advocate for nutrition and put nutrition at the heart of development priorities at all levels
- Prepare for broader communication with the general public that is credible, effective and sustainable
- Seek funding and/or technical support from agencies located in Cameroon
- Explore innovative funding mechanisms for Cameroon

Mass mobilisation and sensitization

A range of actions have been undertaken to raise the profile of nutrition in the Cameroon.

A nutrition media training session with field visits in the Far North was organized in July 2013 for 40 journalists. A large number of articles, radio and television reports were aired as a result. A paper on the state of malnutrition was published by UNICEF and 7,000 copies distributed in April 2014.

In February 2014, to compensate for the lack of awareness about the existence of malnutrition in their communities, a mass mobilization and sensitization campaign was organized in four regions of the country where the rate of malnutrition is the highest in the country, among traditional and religious leaders, local elected officials, administrative authorities and through community radio. Nearly 500 people were sensitized through information exchange and visits to communities and health facilities. The mass mobilisation campaign, supported by UNICEF, was launched and closed by the Secretary of State for Health.

Affected by the extent of malnutrition in Cameroon through the advocacy campaign, the President of the Republic of Cameroon asked the Ministry of Public Health to produce a report on the situation of malnutrition, with concrete measures to remedy the problem. Following this report, the President instructed the Prime Minister to create a multi-sectoral platform for nutrition hosted in the Office of the Prime Minister and to establish a national nutrition programme within the Ministry of Public Health.

Four televised debates on different themes

- (i) state of malnutrition in Cameroon**
- (ii) malnutrition does not mean death,**
- (iii) the importance of the 1000 days and**
- (iv) economic losses of malnutrition,**

were aired in the months of April and May 2014 on the television channel Canal 2.

Those who took part included government officials, non-governmental organisations, civil society, parliamentarians and UNICEF.

Stimulating business

In November 2013, a high level visit to Cameroon was made by Dr Philippe Douste Blazy, President of UNITAID¹¹ and UN Assistant Secretary in charge of innovative financing. During the audience granted him, the President of the Republic His Excellency Paul Biya, Dr Blazy pleaded for greater allocation of resources and innovative funding for nutrition.

This visit prompted the creation of the first Business Forum on Nutrition which was held in May 2014 under the aegis of the Ministry of Public Health in partnership with the Ministry of Industry, Mines and Technological Development, the Ministry of Commerce, Ministry of Small and Medium Enterprises, Social Economy and Handicraft, Chamber of Commerce and Industry, the Employers Group of Cameroon and UNICEF. The idea of creating a *'Nutrition Investment Fund'* was identified as a proposed private sector platform to support the SUN in the country.

The role of elected representatives

Elected representatives have an important role to play in the fight against malnutrition especially in endorsing legislation, developing budgets, and auditing the use of budgetary allocations. Six Cameroonian parliamentarians took part in two orientation sessions on nutrition conducted in Congo Brazzaville in November 2013 and Addis Ababa, Ethiopia. The sessions brought together parliamentarians from West and Central Africa who agreed to create a network of parliamentarians on nutrition and implement national networks with the view to pooling their efforts to eradicate malnutrition in the region. The parliamentarians from Cameroon have created their own network to promote nutrition 'Network Root of Life' which today includes more than 40 elected representatives.

To enable parliamentarians to appreciate the reality on the ground, a mission involving 15 Members of Parliament led by the UNICEF Representative was undertaken in March 2014 in the Far North region. Raising awareness of government to ensure better allocation of financial resources was the main recommendation from the visit.



© UNICEF / John Nkuo

Parliamentarians visit the Far North region of Cameroon to appreciate the reality of nutrition on the ground in March 2014

In June 2014, an information session on nutrition was held in front of 50 deputies in the National Assembly followed by a visit to a nutrition centre. A letter of engagement was prepared by parliamentarians and senators which included:

- (i) adoption for 2015 of legislative documents for eradication of under nutrition in Cameroon;
- (ii) integration of nutrition in sectorial strategic plans and policies;
- (iii) proposal to increase the budget allocation and monitoring mechanisms; and
- (iv) strengthened local networks for nutrition.

A number of other advocacy actions are planned for 2014. These include the organization of a fundraising event on nutrition.

Key Lessons

- It is important to target advocacy at multiple groups (i) journalists, (ii) parliamentarians, (iii) local authorities, (iv) private sector, (v) UN agencies, (vi) civil society
- Information needs to be provided in a simple manner and tailored to audience. Information about economic losses due to malnutrition is important for a country that is emerging economically
- There is a need to close the gap between theory and reality. Field visits are important to raise awareness of problems and to provide information about all sectors and determinants of malnutrition.
- Local and religious authorities need to be involved in advocacy efforts in the most affected areas.



KENYA

Fighting Malnutrition Together



Different groups are acting together to develop a harmonized approach to nutrition advocacy, communication and social mobilization in Kenya.

Terry Wefwafwa, Director of Nutrition, Ministry of Health and SUN Government Focal Point

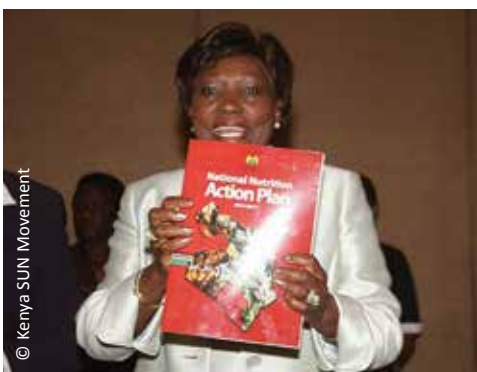
provides the background...

Kenya's journey began in earnest when it signed up to the Scaling Up Nutrition (SUN) Movement in August 2012. An official launch was organized in November 2012 through the convening of a national symposium on SUN under the then Minister of Public Health (MoPH). The National Nutrition Action Plan was launched and a SUN Government Focal Point was appointed. These concrete steps have helped to accelerate SUN advocacy while government representatives, regional and county health management teams, different sectors, funding and implementing partners have joined forces to support the nutrition agenda.

CHILDREN UNDER 5

Stunting:	35.3%
Wasting:	6.7%
Overweight:	4.7%
Low birth weight:	5.6%
Exclusive breastfeeding:	31.9%

Source: DHS 2008-2009



The Honorable Beth Mugo
(former Minister for Public Health and Sanitation)
launching the National Nutrition Action Plan

A Nutrition Advocacy and Communication Committee (NACC) was formed in June 2013 to address advocacy issues in Kenya consisting of representatives from the government, non-governmental organisations and United Nations (UN) agencies. Four taskforces were established to guide and implement the work of the committee:

- i) focusing on *the Lancet* series,
- ii) Nutrition action plan dissemination at national and county level,
- iii) advocacy and communication strategy development and
- iv) multimedia messaging.

Each taskforce was formed with a specific purpose and function in mind. *The Lancet* series has proved valuable in providing the requisite evidence base to link nutrition and health, and to inform the advocacy focus in country. The National Nutrition Action Plan is the central advocacy tool for the NACC with its dissemination ensuring further profiling for nutrition while an advocacy, communication and social mobilisation strategy will provide the framework for implementation of activities. Multimedia messaging is proving an important and effective tool for securing the required attention from relevant stakeholders.

Building a civil society alliance for nutrition

The Nutrition Interagency Coordination Committee (NICC) serves as the multi-sector coordination body at national level, with active participation from civil society. The Nutrition Technical Forum previously served as the civil society network (CSN), active at national level and being rolled out to counties. Efforts to expand the network to include other nutrition sensitive actors led to a realigning and revamping of the CSN in November 2013. The new civil society alliance (CSA) was formally launched in May 2014 with current members spanning non-governmental organisations (NGOs), human rights bodies, consumer organizations, women youth and gender organizations and development organizations.

Advocacy, communication and social mobilization (ACSM), has played a key role in achieving government commitments, establishing coordination structures and SUN networks as well as in advancing the ongoing nutrition work in the country. In the past, advocacy and communication within the nutrition sector has been undertaken on an ad hoc basis and for specific programmes although there are plans to have a harmonized advocacy, communication and social mobilization strategy. An ACSM strategy has been drafted by the NACC and is in the process of being reviewed by all stakeholders. The National Nutrition Action Plan has been used as the main tool for nutrition advocacy and resource mobilization.

Evolution of the SUN civil society alliance in Kenya

- **October 2013: Taskforce in Nutrition Technical Forum established**
- **November 2013: SUN CSA interim governance established with World Vision as host and Action Contre la Faim appointed as focal point/chair**
- **February 2014: SUN CSA awarded USD 280,000 through Multi-Partner Trust Funds to implement workplan**
- **May 2014: New SUN CSA launched and Global Day of Action for Nutrition held**
- **Mapping of CSOs ongoing at national and county level – consumer groups have joined**
- **Nutrition advocacy capacity building started (Kenya Aids NGO Consortium supported training)**
- **Exchange learning with Zambia SUN CSA**
- **Endorsed position papers including draft Kenya Health Policy**
- **Recruited National SUN CSA Coordinator**
- **Planning to support analysis of County Integrated Action Plans, and budgets**

Priorities for advocacy, communication and social mobilization

Within the National Nutrition Action Plan, the key ACSM priorities and actions have been defined as follows:

- ➔ Position nutrition as a clear developmental agenda in the country
- ➔ Develop, disseminate and implement a national nutrition advocacy, communication and social mobilization (ACSM) strategy at all levels
- ➔ Advocate and create awareness about food fortification, supplementation and dietary diversification
- ➔ Promote exclusive breastfeeding and optimal complementary feeding
- ➔ Promote healthy dietary practices
- ➔ Create public awareness about the importance of prevention, management and control of diet related non-communicable diseases
- ➔ Advocate and mobilize financial and human resources for nutrition coordination and partnership activities at all levels
- ➔ Establish and/or strengthen multi-sector coordination mechanisms and networks for nutrition at all levels

Achievements

A major achievement has been the formation of an advocacy, communication and social mobilization (ACSM) forum. The main roles of the ACSM forum are to:

1. **Undertake continuous contextual analysis and identification of ACSM priorities in line with sectoral priorities**
2. **Develop and implement a harmonised nutrition ASCM strategy to influence policy and legislation, investment, practice and behaviour**
3. **Review implementation of advocacy and communication strategies/mechanisms to ensure integration of nutrition within nutrition sensitive sectors (education, agriculture, child services etc.) at national and county levels.**
4. **Advocate for financing ASCM activities.**

An ACSM strategy has been developed and is in draft form.

The Lancet series on evidence based interventions for improving maternal and child nutrition was launched in February 2014. This updated evidence has been useful for developing multimedia messaging which will be used as an advocacy tool with a focus on stunting.



© Bill & Melinda Gates / Frederic Coulibet

Kenyan boys

There have also been achievements in building nutrition structures in Kenya. A high level SUN multi-stakeholder and multi-sector platform is being formed to complement the NICC. SUN Networks are being established and re-aligned and a SUN CSA has been established which will have a strong focus on support for ACSM. In addition, there have been extensive consultations with regard to identifying a high level champion for SUN.

Efforts have been made to engage/sensitize county leadership to include nutrition in the County Integrated Development Plans (CIDPs) while there has been follow up to ensure that nutrition is well articulated in the national Health Policy.

Social mobilization and behaviour change and communication activities include dissemination of infant and young child feeding materials at national and county levels. In addition, a national iron and folic acid supplementation communication strategy, vitamin A supplementation communication strategy, maternal infant and young child nutrition strategy, and food fortification strategy have been developed.

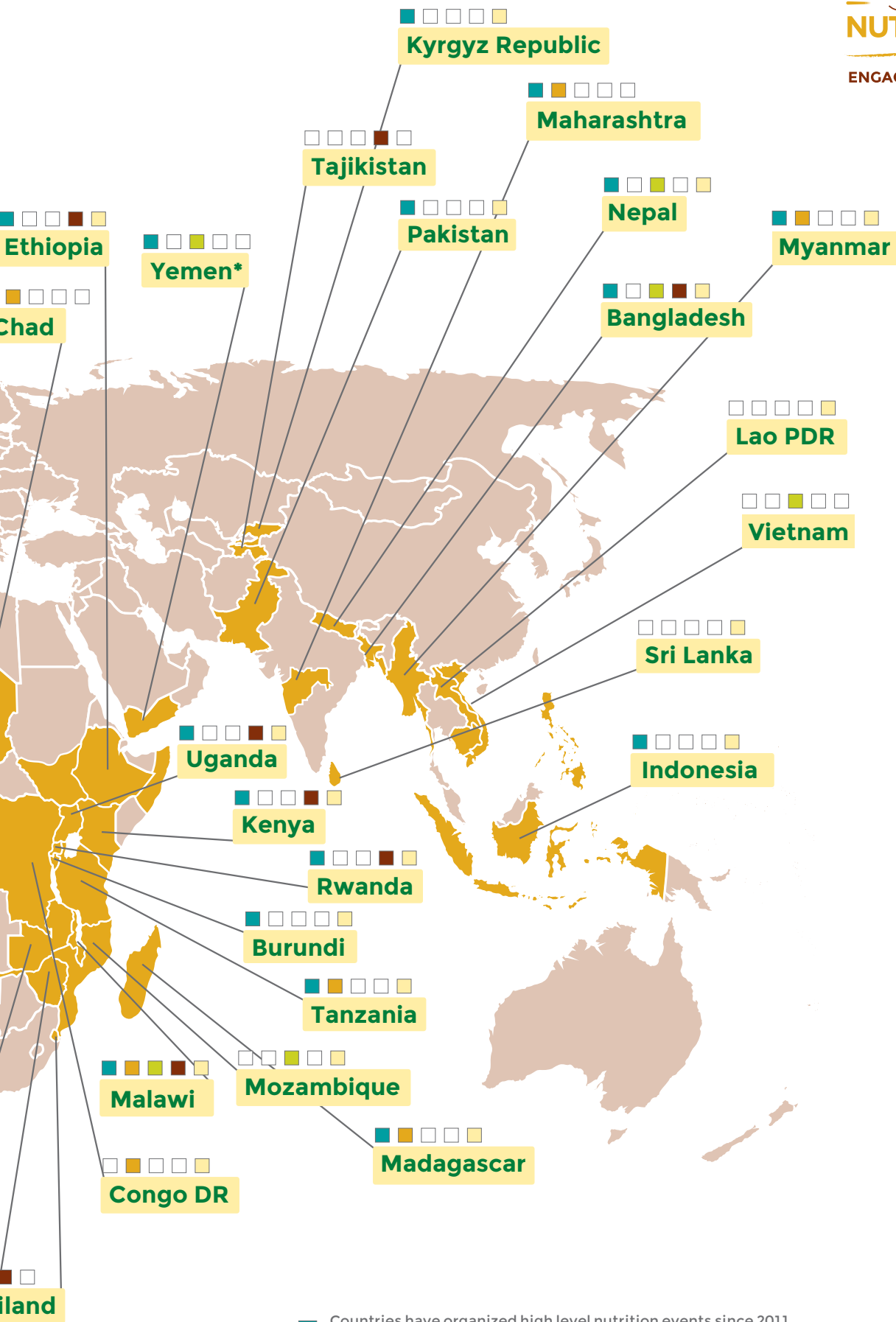
Nutrition stakeholders continue to use existing structures including national health days/weeks such as *'malezi bora'* (good nurturing) weeks, world breastfeeding week, world diabetes day as platforms for nutrition advocacy and social mobilization.

Challenges

The challenges ahead include limited prioritization of nutrition in political and economic agendas leading to very limited budget allocations for nutrition. The approach to ACSM is ad hoc and not systematic while the ACSM strategy is still not finalized and in place. In addition, financing support for the ACSM is low. For example, TV spots and radio messages have been developed under the food fortification programme but have not been aired regularly owing to funding constraints. There is limited capacity of ACSM expertise in the nutrition sector.

Key Lessons

- Strong advocacy, communication and social mobilization is key to Scaling Up Nutrition.
- Development of a national ACSM strategy should involve all relevant stakeholders at planning, development and dissemination stages to ensure proper representation.
- Collective responsibility in advocating for nutrition is required within and across networks. No one sector or network can do it alone.
- All stakeholders in SUN need to agree on the advocacy messages to be passed to the public to avoid conflicting information.



- High level events ■ Countries have organized high level nutrition events since 2011 (involving high level government officials)
- Parliamentarians ■ Parliamentarians are actively engaged in advocating for nutrition
- Strategy ■ Comprehensive government or joint social mobilisation, advocacy and communication strategy is in place
- Advocacy tool ■ Advocacy tool developed that is country-specific to raise awareness of nutrition at high level (PROFILES, Cost of Hunger study, Renew multi-media presentation)
- CSAs ■ SUN Civil Society Alliance established and/or strong civil society support for social mobilisation, advocacy and communication activities



What has been learnt?



Peruvian children looking at books.

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Mobilising, advocating and communicating for nutrition: What has been learnt?



*Observations by
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Securing and maintaining high level political commitment that translates into tangible action, resources and results is widely recognised as essential for scaling up nutrition. Mobilisation of societies, advocacy and communication are critical for building this commitment, ensuring that evidence and experience of best practice is shared, and inspiring people to play their part by working together.

Having a strategy is the starting point

Stakeholders in SUN countries are taking an increasingly strategic approach to social mobilisation, advocacy and communication. Dedicated strategies are being developed in an effort to enhance coordination among relevant sectors and stakeholders. Strategies are helping to identify priorities and harmonise activities. The greatest impact is achieved when efforts are aligned and in support of national development plans, with a range of stakeholders being brought together under a common framework and shared messages. While different means and a variety of tactics and tools are used, the focus is on creating a positive and enabling political and policy environment in order to advance the scale up of nutrition interventions and realise results. The four SUN strategic processes have been identified as key for securing this environment:

1. **bringing people together to work effectively through functioning multi-sector, multi-stakeholder platforms;**
2. **putting policies and laws in place to establish a coherent policy and legal framework;**
3. **implementing and aligning programmes with common objectives and an agreed framework for results; and**
4. **mobilising resources from domestic sources supplemented by external assistance.**

Countries, such as Uganda, are developing a harmonised, overarching framework for social mobilisation, advocacy and communication so that different stakeholder groups can align behind national priorities and work together to stimulate change.

Nutrition champions can mobilise, advocate and communicate for better nutrition

Strong leadership for nutrition is an essential element for garnering the support and understanding required to achieve improved nutrition. In many countries, nutrition champions are being identified and supported to advocate for nutrition. High level nutrition champions have been identified in at least 16 SUN countries (**Benin, Cameroon, Chad, Guatemala, Indonesia, Kyrgyz Republic, Malawi, Mozambique, Namibia, Nepal, Niger, Nigeria, Peru, Sri Lanka, Tanzania and The Gambia**) and efforts are underway to identify champions in 10 additional countries. Three broad types of nutrition champions can be distinguished:

- Politicians and parliamentarians who take a particular interest in nutrition and look for opportunities to support the scaling up efforts. Several countries (in West Africa) have formed networks of parliamentarians to strive for better nutrition. In Peru, successive Presidential candidates were approached during elections to take a stand on nutrition.
- High profile personalities such as sporting figures who are revered – particularly by young people
- Nominated individuals who are recognized through public channels as having played an outstanding role in promoting nutrition

Mobilizing societies is key for improved nutrition

Stakeholders at the provincial, district and local level are increasingly mobilising in order to raise awareness about nutrition, to advocate for a particular action, or to seek accountability. Techniques for mobilising communities, are dependent on context, and a variety of different means have been used. **Bangladesh** has established a Behaviour Change Working Group which is developing effective strategies for harmonising nutrition communication messaging. **Pakistan** has developed key messages on healthy nutrition and developed pictorial communication materials for work with rural and farmer's communities advocating for diversification in food production and consumption. Campaigns and events such as World Breast Feeding Week, health days and Vitamin A campaigns are being leveraged to highlight the issues around child nutrition and promote messaging around breastfeeding and complementary feeding and general healthy dietary practices. These are particularly significant as they centre on the participation of citizens. Civil society has a crucial role to play in mobilizing communities and SUN civil society alliances are taking a strong lead on this.

A common narrative for nutrition leads to effective communication

Most stakeholders recognize the importance of speaking with one voice on nutrition in order to effectively mobilise societal support for nutrition. In many countries, United Nations (UN) agencies, civil society organisations, business and academic institutions are working together through multi-stakeholder mechanisms to develop a common and persuasive narrative for nutrition. UN agencies collaborated with other development partners most recently in **Bangladesh** to create a common narrative in support of government efforts towards scaling up nutrition. A shared understanding about nutrition can provide a strong basis for discussion among multiple stakeholders and across multiple sectors, and help governments to set clear policies and programmes that work towards achieving common targets.

A variety of tools are available

While in each country, the 'nutrition story' will be framed differently, depending on the specific context and priorities, a number of tools have been successfully used to raise nutrition issues, and to advocate, communicate and mobilise for improved nutrition. In several countries, the investment case for nutrition is being used to highlight the economic cost of malnutrition and the benefits that improved nutrition could bring. Cost of Hunger in Africa studies are completed or underway in 12 countries: **Botswana, Burkina Faso, Cameroon, Egypt, Ethiopia, Ghana, Kenya, Malawi, Mauritania, Rwanda, Swaziland and Uganda**. These studies

aim to estimate the economic and social impacts of child under-nutrition in Africa through analysis of large-scale survey datasets. Similarly in **Tajikistan and the Kyrgyz Republic**, tailored situation analyses on the economic outcomes of expanded nutrition programming provide compelling evidence of the potential to improve health and economic outcomes through scaling up effective nutrition interventions.

Nutrition PROFILES have been used to estimate the benefits of improved nutrition on health and development outcomes and, conversely, the consequences to individuals and to society if nutrition does not improve. At least seven SUN countries have adopted the PROFILES methodology: **Cameroon, Ethiopia, Ghana, Mali, Nigeria, Tanzania and Vietnam**.

An innovative multimedia presentation called 'Nutrition on the Rise' through RENEW (Reenergizing Nutrition Expanding Worldwide) has been used to engage policymakers and leaders in **Bangladesh, Kenya and Nigeria**. The presentations showcase the latest data, new interventions, and the benefits of preventing malnutrition using advanced technologies and the ground-breaking Trendalyzer (bubble graph) software developed by Hans Rosling at the Gapminder Foundation.

Challenges and opportunities ahead

There are numerous activities taking place in SUN countries to raise awareness about nutrition, build commitment and increase resources. It is important that priorities for social mobilization, advocacy and communication are agreed so that diverse actions are aimed at achieving the same ends. Bringing stakeholders together under a common framework or strategy for nutrition social mobilization, advocacy and communication is therefore an important first step.

A few of the country articles highlighted the lack of funding and resources for social mobilisation, advocacy and communication activities at the national, sub-regional and local levels. In some cases, donors and civil society organizations are providing resources to fill funding gaps. In other cases, these resource needs remain unmet. Some articles also drew attention to the lack of human resources and specific expertise, especially around multimedia communications campaigns and advocacy. As they are being developed, social mobilisation, advocacy and communication strategies could build in funding for strategic communications capacity building and seek out opportunities to leverage partnerships with the private sector, media and civil society to bring in needed expertise or to disseminate messages.

Another challenge highlighted was in developing key messages that work across sectors and for different audiences. Explaining how a multi-sectoral approach to nutrition works in practice can be complicated, especially when there are technical language or terminology differences across sectors. The most effective nutrition messages are those that resonate across multiple

stakeholder groups and sectors. Building the evidence base about malnutrition and approaches that work within the country-context assists with messaging.

Identifying and equipping messengers – from high level champions to front-line staff – is also key. Stakeholders in some countries have identified the need to build the capacity of local civil society organizations that work directly in communities to develop and implement communication strategies. Identifying and preparing high level leaders as effective advocates and communicators for scaling up nutrition also requires expert support.

Building monitoring, evaluation and learning into social mobilisation, advocacy and communication strategies is essential so that the success or failure of a particular campaign or approach can be assessed. Is a communications or mass mobilization campaign working and cost effective? What techniques are working best? What needs to change?

In conclusion

Social mobilization, advocacy and communications is a growing priority for SUN countries and increasingly seen as an integral part of the national nutrition strategy. Countries are at very different stages and employing a variety of approaches and techniques. Developing a social mobilisations, advocacy and communication strategy or plan for scaling up nutrition that is well resourced and has clear indicators and benchmarks is critical.

ENDNOTES

¹ REACH Renewed Efforts against Child Hunger and Malnutrition is a country-led approach to scale-up proven and effective interventions addressing child under-nutrition through the partnership and coordinated action of UN agencies and other agencies under the leadership of national governments.

² Bangladesh is divided into 64 districts, or 'zila'. The districts are further subdivided into 493 sub-districts or towns, or 'upazila'.

³ Uganda is divided into 111 districts. Each district is further divided into counties and municipalities, and each county is further divided into sub-counties.

⁴ The Cost of Hunger in Africa Study is led by the African Union Commission and NEPAD Planning and Coordinating Agency and supported by the Economic Commission for Africa and the World Food Programme. It is a multi-country study – involving 12 countries in Africa – aiming to estimate the economic and social impacts of child under-nutrition in Africa.

⁵ THE MANOFF GROUP, based in Washington in the United States creates and applies innovative strategies and methods for solving problems in health, family planning, nutrition, environment and HIV/AIDS. Manoff's Behaviour-Centered Programming is a practical and proven, systematic and consultative approach to changing individual, family, and community behaviours.

⁶ The IDI consists of Action Contre la Faim, Adventist Development and Relief Agency Peru, United States Agency for International Development, Christian Association PRISMA, CARE Peru, Caritas Peru, United Nations Children's Fund United Nations Population Fund, Future Generations, Nutrition Research Institute, Management Sciences for Health, Roundtable for Poverty Reduction, United Nations Food and Agriculture Organization, Pan American Health Organization, Plan International, World Food Programme, Welthungerhilfe and World Vision Peru.

⁷ Instituto Nacional de Estadística e Informática. Encuesta Demográfica y de Salud Familiar – ENDES. 2007-08, 2009, 2010, 2011.

⁸ The administrative units of Pakistan consist of four provinces, one federal capital territory, two autonomous and disputed territories and a group of federally administered tribal areas. Below this top tier, there are four more tiers of government, including 27 divisions, more than a hundred districts (zillahs), more than four hundred sub-districts (tehsils), and several thousand union councils.

⁹ Source: Today's Newspaper. Sunday November 24, 2013. 'Media has crucial role in highlighting nutrition issues.'

¹⁰ PROFILES is a process developed by BASICS, a project funded by the United States Agency for International Development (USAID). It uses current scientific knowledge to estimate the cost and effectiveness of proposed nutrition interventions. PROFILES estimates the impact on developmental indicators, such as mortality, morbidity, school performance and labour productivity, using epidemiological and demographic models, and, by using computer graphics, presents the results to decision makers. The programme has been applied in more than a dozen low income countries.

¹¹ UNITAID is a global health initiative largely financed by a levy on airline tickets. Established in 2006 by the governments of Brazil, Chile, France, Norway and the United Kingdom, it provides sustainable funding in order to tackle inefficiencies in markets for medicines, diagnostics and prevention for HIV/AIDS, Malaria and Tuberculosis in developing countries. It is hosted by the WHO in Geneva.

“ Take ownership of this agenda and drive it – and drive it seriously. Nutritious food has to end up on the plate of the African child and the African mother. ”

Mrs Graca Machel

The SUN Movement Secretariat is supported by Canada, France, Germany, Ireland, the Netherlands, the United Kingdom and the European Union.

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