Introduction

National development plans in Africa are increasingly recognizing nutrition as both essential for development and a social right. So far, however, this has not resulted in the large-scale provision of nutrition services necessary to reduce the high levels of malnutrition on the continent. Nutrition now has to feature more prominently in policymaking processes, and the resultant policies have to be translated into effective programs to achieve a significant reduction in the burden that malnutrition imposes on so many African households, communities, and nations. The experience of East Africa has relevance for policy and program design in other regions affected by malnutrition.

Sector-specific nutrition policies are fairly common. For example, policies exist for micronutrients (such as iodine), breastfeeding, infant and young child feeding, and food safety, along with supporting strategies and guidelines for implementation. Most of these policies do not require new legislation or new institutional structures.

Nutrition is not a sector. It is a cross-cutting development problem that needs to be integrated into the activities and policies of the agriculture, health, education, and sanitation and water sectors (among others), and featured in the priorities of broader agencies such as ministries of finance and gender. A need exists for coordinated nutrition-related policies that will require governments to put in place new institutional frameworks, dedicated budgets, tax breaks (or other incentives) for private-sector investment, and in some cases substantial changes in operational responsibilities and processes. These and similar initiatives will require a multisectoral commitment; they need to navigate a more complex policymaking pathway—with scrutiny from a broader set of actors—than do sector-specific policies.
Framework for Policymaking: Awareness, Commitment, and Resources

In relation to nutrition policy change in eastern Africa—and, more broadly, throughout the developing world—three factors are frequently noted as affecting progress: (1) awareness by senior decision leaders of the importance of nutrition to the development agenda, (2) political commitment, and (3) availability of financial resources to implement programs. All three factors must interact to produce substantive policy change effective in reducing malnutrition.

Awareness

Nutrition is rarely a top agenda item for policymakers in the region. Policy documents are drafted but not finalized, and decisions are delayed. There are three main reasons for this lack of attention.

1. Most political leaders do not recognize malnutrition when they see it. Stunting and micronutrient deficiencies are accepted as the norm rather than as problems needing urgent action, or they may be hidden from view. The adverse implications of malnutrition on child and maternal survival, intellectual development, and physical and mental productivity are not appreciated. Other issues are considered more pressing, so public nutrition policies—which policymakers would rarely object to—are dismissed as less urgent and do not get formulated or implemented.

2. Policymakers have conflicting ideas about how nutrition problems should be solved. Policy discussions are dominated by political, personal, sectoral, or other institutional interests. Negotiating the policy process takes time, and nutrition policy decisions get delayed.

3. To reduce conflict between competing interests, policymakers may be unwilling to address the underlying causes of malnutrition or to target action in the most efficient manner. Instead, second- or third-best solutions are adopted; these policies fail to reduce the number of malnourished people.

Other reasons for policymakers’ possible reluctance to take public action are shown in Box 1.

Nevertheless, progress can be achieved through win–win solutions. Activities designed to serve nutritional objectives may also address other policy interests that are either political or sectoral. In the free milk program in Kenya, for example, the agriculture and education communities both saw an opportunity to promote their specific interests: dairy development and increased school enrollment.
Commitment

The commitment of political leaders can be best focused on the following four endeavors.

1. **Delivering statements.** In this way, senior leaders can plant the “seed” to develop a broader political commitment to reducing malnutrition.

2. **Establishing high-level national coordination bodies to address malnutrition.** This builds political commitment and keeps the topic high on the development agenda, particularly if there are adequate human resources and budget.

3. **Improving nutrition’s status on the organizational chart.** This involves building respect for nutrition’s importance by dedicating an adequate number of staff and slice of the budget to nutrition. Currently, in ministries of health (or other responsible agencies), nutrition is typically given a low place in the

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**BOX 1  Reasons for Weak Commitment to Taking Public Action Against Malnutrition**

- Malnutrition is usually invisible to malnourished families and communities.

- Families and governments do not recognize the human and economic costs of malnutrition.

- Political leaders may not be aware of the rapid and cost-effective interventions available for combating malnutrition.

- There are multiple organizational stakeholders in nutrition with differing interests.

- There is not always a consensus about how to intervene to reduce malnutrition.

- Adequate nutrition is seldom treated as a human right.

- The malnourished have little voice.

- Some politicians and managers are not interested in whether nutrition programs are implemented well.
organization, with no earmarked budget and few staff positions; nutrition objectives, especially those that require coordinated action with other sectors, are consequently neglected.

4. Making informed appointments. This ensures nutrition will have well-informed advocates who can effectively promote the nutrition agenda. If those appointed to lead nutrition efforts lack the necessary academic background, experience, and leadership skills, their efforts will become sidelined in the competition between sectors and subsectors to influence resource allocations.

Resources
Resource allocations are a good measure of political commitment. In fact, governments in eastern Africa tend to leave nutrition financing almost entirely to donors. In the absence of new government revenue streams, moreover, public investments are unlikely to be made for new programs to address malnutrition because decisionmakers would rather access new funding sources than reallocate their existing funds.

Policymaking and Implementation
Enacting policies requires effective implementation. Unfortunately, however, written policy and actual practice are not often congruent, due to such factors as the following:

- Implementers may resist the priorities established in a policy document, based on their own assessment of the solutions needed. Ideally, the consensus-building process necessary to formulate nutrition policy should continue through implementation.

- Policies fail to define clearly the various elements that facilitate implementation: operational structures, guidelines and standards, financial resources, human capacity, and effective follow-up and coordination.

- Countries with loose interagency coordination mechanisms (such as Kenya, Mozambique, Namibia, and Uganda) have greater difficulty planning, coordinating, and funding nutrition-related mandates.

Countries where malnutrition has been recognized more broadly as a development problem rather than a health problem—including Lesotho, Malawi, Rwanda,
Openings for effective implementation of nutrition policies in policy processes

Skills, information, and tools needed
- Analysis of technical knowledge related to area
- Persuasion, negotiation, bargaining, networking
- Best practices and success stories, case-studies
- Field visits/real cases, pictures
- Cross-country visits/comparisons

Policy implementation
- Standards and guidelines
- Human capacity and skills
- Coordination, planning and monitoring
- Bureaucratic systems
- Financial resources

Community/district pressure

Policy statements or ramification

Problem in policymaker’s domain

Access to resources

Political commitment

Donor agencies

Nutrition policy entrepreneurs

Technical advocates

Policy nutrition champions

Interest groups/activists

Media

Source: Author.
and Zimbabwe—have moved toward a multisectoral response to malnutrition that involves most government ministries, the private sector, and nongovernmental organizations. To sustain this multisectoral response, some countries have established interministerial coordinating agencies for nutrition to promote the mobilization of resources, coordinate multisectoral planning, and undertake monitoring and research.

The direct and indirect activities required for effective implementation of nutrition policies are diagrammed in Figure 1, which demonstrates that continuous advocacy, bottom-up pressure, and donor engagement are all important components in achieving implementation of national programs.

Through continuous advocacy, policymakers are enlightened on the magnitude of malnutrition problems, their consequences, and the benefits of urgently addressing them. Unfortunately, there is often a disconnect: policymakers may not respect the advocates, who (as technical people) are their juniors in the administrative and political hierarchy. Policy champions, partnerships, and the media can cut across such barriers.

Advocacy requires multiple approaches, applied consistently and repeatedly, to communicate how the interests of different groups will be met by the nutrition policy, and it must demonstrate the real impact of action to address malnutrition. Success stories, as well as field visits to demonstrate the real suffering from malnutrition, can be very powerful tools to prompt immediate action. Improved nutrition is a fundamental element of human well-being and should be a central objective of social and economic development.

Bottom-up or grassroots pressure has been generally missing from the nutrition policymaking process. Unlike food insecurity and hunger, malnutrition is not generally identified as a priority problem by African households; communities have little understanding of the significant burden that malnutrition imposes on their well-being. Consequently, malnutrition does not create a liability for politicians. Community and civil society organizations need to mobilize people to demand services and conditions to improve their nutrition and that of their children. The grassroots communities represent a generally untapped political force that can transform the government’s approach to addressing malnourishment in the region.

Donor engagement and funding have generally dictated the commitment and motivation of eastern African governments to nutrition activities. However, this means that there is no assurance of long-term local support for nutrition action. Policy implementation that depends on donor resources may instead be shut down once donor resources are exhausted, putting at great risk existing nutrition actions in eastern Africa.
**TABLE 1** Nutritional problems with possible solutions and options for government action

<table>
<thead>
<tr>
<th>Nutrition problem</th>
<th>Possible solutions</th>
<th>Options for government action</th>
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<tbody>
<tr>
<td>Increasing (or slow reduction in) stunting or underweight among children</td>
<td>Promote exclusive breastfeeding; control marketing of breast milk substitutes</td>
<td>Legislation on marketing of breast milk substitutes</td>
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<td></td>
<td>Improve quality of complementary foods given to young children</td>
<td>Local ordinances that every home must have a toilet</td>
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<td></td>
<td>Improve sanitation</td>
<td>Universal primary education; vocational training</td>
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<td></td>
<td>Keep girls in school</td>
<td>School feeding programs in areas with high dropout rates</td>
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<td></td>
<td>Increase child spacing and reduce teenage pregnancies</td>
<td>Age-of-marriage regulations</td>
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<td></td>
<td>Improve nutrition awareness</td>
<td>Access to contraceptives for teenagers</td>
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<td></td>
<td></td>
<td>Compulsory sex education in schools</td>
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<td></td>
<td></td>
<td>Incentives for FM radio stations to provide dedicated airtime for health and nutrition education</td>
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<tr>
<td>Increasing (or slow reduction in) micronutrient deficiencies</td>
<td>Fortify foods with micronutrients</td>
<td>Tax exception on fortificants used by food manufacturers (millers, vegetable oil producers, etc.)</td>
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<tr>
<td></td>
<td>Diversify diets</td>
<td>Mandatory policy to fortify all milled grain (or vegetable oil or salt) sold in the country</td>
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<tr>
<td></td>
<td>Increase intake of micronutrient-dense foods</td>
<td>Social marketing of good nutrition behaviors</td>
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<tr>
<td>Increasing overweight and obesity among school children</td>
<td>Increase physical education/activity in schools</td>
<td>Physical education compulsory (and graded) in schools</td>
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<tr>
<td></td>
<td>Improve awareness</td>
<td>School nutrition policy in every school</td>
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<tr>
<td></td>
<td></td>
<td>Food labels in local language</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Social marketing of good behaviors</td>
</tr>
</tbody>
</table>

Source: Author.

**Recommendations**

Unfortunately, there is no simple checklist for bringing a nutrition agenda to the forefront of policy concerns. The following four broad considerations should be kept in mind by policy advocates at all levels.
1. **Clear and simply define the nutrition problem, then present policy solutions.**
   a. Focus on the **problems**—for example, persistent high levels of stunting, seasonal high acute malnutrition, increasing micronutrient deficiencies, and increasing obesity. The most powerful arguments are images or descriptions of real cases showing the actual burden that malnutrition imposes on individuals and their households.

   b. Suggest several solution options for the problem. Nutrition problems are usually context specific, and solutions need to be identified based on their root causes (see Table 1). Many solutions only require new operational guidelines and standards, rather than full policy reforms.

   c. Think more broadly. In addition to food fortification, micronutrient supplementation, breastfeeding, and other direct approaches, we should frame indirect solutions that can provide the basis for sustainable reductions in childhood and maternal malnutrition. Such indirect solutions include increasing educational attainment for girls, preventing teenage pregnancy and increasing the spacing between births, improving general sanitation and hygiene, addressing gender issues (women’s workload, control of household

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**Box 2  Windows of Opportunity for Nutrition Policy Change**

When the leadership of the Ministry of Health changed in Kenya, the director of the National AIDS Support and Control Program immediately approached the new leaders to renew a policy request that had been languishing for months—the requirement to have a nutritionist on staff in accredited HIV/AIDS comprehensive care centers. Within days, the permanent secretary issued a memo to this effect and called for a nutritional review of the national HIV/AIDS policy. Resources were mobilized, and an additional 50 nutritionists were hired.

Recurrent droughts in Malawi mobilized the political system to invest in household food and nutrition security. The new president had promised to aggressively address the issues of malnutrition and food insecurity. Upon his election, nutrition advocates proposed a coordinating mechanism for nutrition, under the Office of the President and Cabinet. A nutrition coordinating office was established and now coordinates and monitors nutrition activities in all sectors.
resources), changing adverse dietary and health-seeking behaviors, and improving household incomes and general welfare.

d. Be clear about the costs as well as the benefits of implementing nutrition interventions at scale. Think creatively about how to implement large-scale, simple solutions at low cost.

2. Prepare to exploit windows of opportunity.
Opportunities for policy change appear when senior decisionmakers become aware of nutrition problems and appreciate the need for action. Various events—including a disaster or other crisis, a sensational media report, a change in government or sectoral leadership, the political mood, or a political challenge by the opposition—may trigger attention to nutrition issues (see Box 2).

Nutrition advocates need to be prepared at such opportune moments with tools to assist the policy change process. These tools may include information about nutrition problems and the social benefits of addressing them; a pre-packaged design of programs (with budgets); and well-informed policy champions and media activists who can reinforce and channel the interest of policymakers.

3. Redefine focus of the nutrition community.
The nutrition community should ally with key sectors and provide them with information and program support. The community must adopt more radical approaches to increasing demand for better nutrition and engaging with community and national politics—for example, by mobilizing public awareness of systems that perpetuate malnutrition (political, cultural, or market centered). Similarly, village health workers need community mobilization skills to promote grassroots demand for local nutrition services.

The nutrition community will have to work increasingly with commercial food companies as useful partners in improving food quality. Excluding them from participating in nutrition policymaking processes, as has been the case, will result in less relevant and effective policies and programs.

The nutrition community needs to help design policies that provide vulnerable groups with greater access to services and technologies that improve their nutrition. Appropriate nutrition technologies will likely reduce dietary and nutritional differences between genders, economic groups, and rural and urban residents.

4. Understand policymaking systems—and play politics.
Malnutrition may reflect a range of nontechnical determinants, such as disparities in access to nutrition-related resources and services, marginalization, and cultural
dynamics that disempower nutritionally vulnerable groups. These are political issues that require political engagement by the nutrition community.

Accordingly, the nutrition community needs a clear understanding of the factors that make politicians feel responsible for a particular social problem, as well as of the kinds of solutions they prefer, the language they use (and respond to), and their fears and concerns. Similarly, nutrition advocates must understand the mechanics of policy processes: how policies are made, the flow of information, and the kind of issues that are considered at various stages. Advocates need to know at what points in the year the policy process is likely to speed up or slow down, and why. They also need to know the movers and shakers personally and solicit their support.

Finally, we must be aware that, whenever a major policy is enacted, some individual, political, or institutional interests will be adversely affected. Conflict is inevitable where there are competing interests in a resource-scarce context. We should not avoid conflict, however, as we promote efforts to better meet the needs of the nutritionally vulnerable and marginalized and ensure that they and their children will live healthier, happier, and longer lives.