

# Advocacy to Reduce Malnutrition: Using PROFILES and Nutrition Costing

Nutrition advocacy is a platform to create movement toward greater political and social commitment for nutrition in a country. It is a planned, systematic, and deliberate process that is defined and shaped by the specific country context. It engages national stakeholders by using a participatory and consensus-building approach towards a shared national vision for nutrition. Nutrition advocacy can support a given country at any stage along the way to providing nutrition services and reducing malnutrition. A central focus of nutrition advocacy is to promote accountability for nutrition and strengthen nutrition governance. For example, nutrition advocacy can serve to support: the development of a nutrition policy, investment of resources to strengthen and expand implementation of nutrition services, and greater coordination between government and nongovernmental organizations that play a role in providing nutrition services across a country. By examining the context of the nutrition situation and tailoring advocacy needs to that situation, advocacy can be more effective in igniting change and making strides toward the desired outcome of a comprehensive nutrition program.

Using a collaborative approach, the Food and Nutrition Technical Assistance III Project (FANTA), funded by the U.S. Agency for International Development and managed by FHI 360, has facilitated nutrition advocacy in several developing countries using a nutrition advocacy tool, PROFILES, and has developed country-specific nutrition costing models. The estimates generated from this tool and models are the cornerstone of this nutrition advocacy process.

## What is PROFILES and what nutrition problems and consequences are addressed in PROFILES?

Developed to support nutrition advocacy, PROFILES consists of a set of computer-based models that calculate consequences if malnutrition

does not improve over a defined time period and the benefits of improved nutrition over the same time period, including lives saved, disabilities averted, human capital gains, and economic productivity gains (or, put another way, economic productivity losses averted). PROFILES estimates are based on reduction in the prevalence of several nutrition problems, such as iron deficiency anemia; low birth weight; vitamin A deficiency; iodine deficiency; suboptimal breastfeeding practices; and childhood stunting, underweight, and wasting. To calculate estimates, PROFILES requires current country-specific nutrition data that are identified and agreed upon in collaboration with stakeholders in country. PROFILES results can be used to engage government and other high-level stakeholders in a collaborative nutrition advocacy process to identify, prioritize, and advocate for evidence-based actions to reduce malnutrition. Such actions may include developing or refining policies, implementing existing policies, identifying priority geographic areas in which selected interventions should be focused, scaling up current interventions, and introducing new nutrition interventions, among others.

## What is Nutrition Costing?

Nutrition Costing estimates the costs of implementing a comprehensive set of nutrition programs in a country or prioritized geographic area over a specific time period. Nutrition Costing is developed in country, considering the country-specific context, and is the result of a collaborative and participatory process during which multisectoral stakeholders engage in defining the assumptions on which Nutrition Costing is based—for instance, selecting necessary interventions and activities, and defining a management structure for service provision—which in turn allows identification of the required inputs for each activity and estimation of the program cost for a specified time period.

## How have PROFILES and Nutrition Costing been used in the past?

PROFILES has been used by FHI 360 in more than 20 countries; over time, the approach has evolved. Recently, FANTA used PROFILES with country stakeholders as a comprehensive platform for advocacy campaigns in Bangladesh, Uganda, Ghana, Ethiopia, Haiti, and Tanzania. Nutrition Costing was conducted in Guatemala, and in Bangladesh, PROFILES was complemented with Nutrition Costing to give estimates of both gains from improvements in nutrition and costs of addressing nutrition needs at scale. In each country, using a communication approach, country teams developed nutrition advocacy plans and targeted materials, and disseminated PROFILES results to target audiences, such as policymakers, parliamentarians, development partners, the media, civil society, and the private sector. In Uganda, these efforts contributed to the adoption of the multisectoral Uganda Nutrition Action Plan. In Bangladesh, PROFILES and Nutrition Costing were completed during a government planning year to ensure adequate resources for the implementation of national nutrition services. In Ghana, government and nongovernment stakeholders are undertaking advocacy efforts in parallel with a nutrition policy process to mainstream nutrition.

Helpful in situations where:

- The prevalence of many forms of malnutrition are high
- Investment, commitment, governance, and accountability for nutrition is low
- Nutrition services are fragmented and not holistic

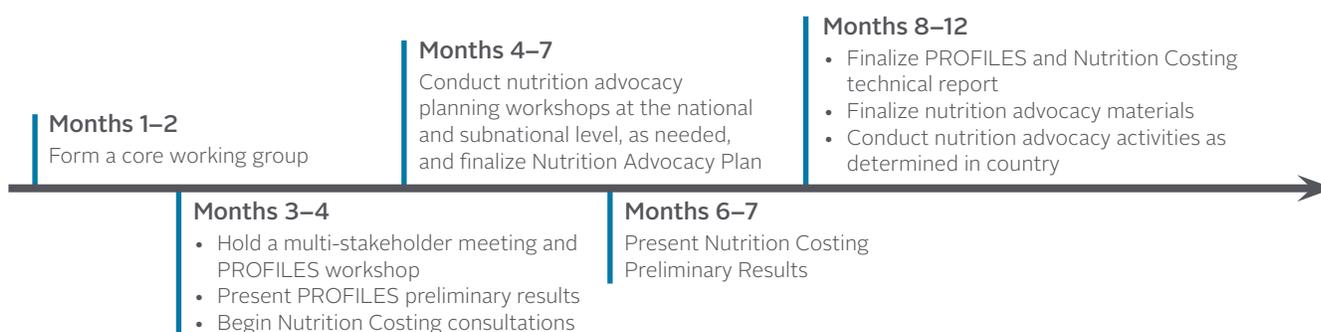
Advocacy processes for nutrition need to:

- Be based on a sound understanding of the current country context for nutrition (scale of the problem, visibility, commitment, investment, and accountability)
- Be systematic, planned, and deliberate involving key stakeholders and targeting key audiences
- Be part of a collaborative effort at the country level including multiple government and nongovernment stakeholders
- Be multisectoral, obtaining buy-in of stakeholders across sectors
- Target key audience segments who are influential and can promote accountability and good governance

These tools provide:

- Insight for action
- Consensus building and a shared vision for nutrition (“one voice”)
- Accountability and goal setting for investment in nutrition across the life cycle, including services along a continuum of care for the prevention and treatment of malnutrition

## Illustrative Timeline and Key Steps for PROFILES and Nutrition Costing



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This brief is made possible by the generous support of the American people through the support of the Office of Health, Infectious Diseases, and Nutrition, Bureau for Global Health, U.S. Agency for International Development (USAID) under terms of Cooperative Agreement No. AID-OAA-A-12-00005, through the Food and Nutrition Technical Assistance III Project (FANTA), managed by FHI 360.

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