



CROSS-SECTORAL COORDINATION IN THE PUBLIC SECTOR: A CHALLENGE TO LEVERAGING AGRICULTURE FOR IMPROVING NUTRITION AND HEALTH

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Good nutrition and health for all are recognized as socially desirable objectives around the globe. It is generally accepted that national and local governments have a duty to provide the goods and services necessary for maintaining good nutrition and health. Moreover, improved health and nutrition are critical inputs for achieving broad economic growth and poverty reduction.

Malnutrition and ill health arise from a combination of causes and thus require efforts across multiple sectors to address effectively. The *health* and *agriculture* sectors are central to such efforts, reflecting their mandates to provide curative and preventative health services and to facilitate food production. However, several other sectors must contribute their efforts as well: the *education* sector, given the importance of knowledge to proper nutrition and healthcare practices; the *water, sanitation, and housing* sectors to promote hygienic environments; the *labor* sector to maintain adequate household incomes; and *public finance* and *planning* agencies to ensure that government resources are appropriately allocated.

In short, healthy and active lives for all require adequate access to food, care, employment, health services, and a healthy environment. None of these determinants of good health and nutrition is sufficient by itself; all of them are necessary. The most efficient policy approach involves, accordingly, a coordinated effort across the various public sector ministries and agencies concerned. However, most governments and government agencies are organized in a way that makes coordination across sectors difficult to achieve.

This brief considers how these organizational barriers might be overcome, particularly in relation to the public agricultural sector. We examine the structure, priorities, and core competencies of sectoral agencies in government. Based on this overview, several approaches are suggested to foster better collaboration between agriculture and other sectors of government.

Organizational Barriers to Cross-Sectoral Action

Government bureaucracies have emerged as a generally successful solution to the problem of managing the activities of states. Ideally, they are organized on the basis of clear goals, rational functional specialization of sub-units, formal operating procedures, and clear lines of authority. Most governments are organized administratively within a

framework of sectoral agencies, including separate ministries for health, education, agriculture, and other sectors. Political and administrative power is exercised within this framework, and resource allocations, incentives, and systems of accountability are managed accordingly.

However, most bureaucracies are not organized in a manner that facilitates broad, effective efforts to address a problem requiring actions across sectors. So, even though achieving good health and nutrition for all might be government's responsibility, the sectoral organization of the public bureaucracy clearly hinders undertaking the necessary joint action.

There are three overlapping barriers to effective joint action across government sectors: (1) the differing worldviews and mandates of sectors; (2) the resource allocation and planning processes within government; and (3) capacity constraints within sectors for generating necessary information.

Sectoral Worldviews

The specialized training of various sector specialists tends to lead to discrete areas of expertise and qualitatively different worldviews. In considering a development problem, experts tend to embrace information within their own discipline while disregarding other matters as irrelevant to taking action on the issue. Agriculture sector objectives, for example, relate principally to increasing yields, profits, and other benefits for producers, and they are reflected in distinctive language and methods. Health and nutrition considerations do not fit neatly into the worldview of agriculture or the sector's mandates.

Moreover, the expertise of sectoral specialists is applied within the context of formally stated mandates and objectives, which distinguish areas of institutional specialization within the government bureaucracy as a whole and define expected courses of action. These sectoral priorities are an important element in planning processes, as they are the basis by which an institution within a sector can make substantive claims on state resources. Likewise, for civil servants, personal incentives like career advancement will be linked to their contribution to the attainment of these narrowly defined objectives of the sector within which they work, rather than broader objectives requiring joint action with other sectors. Cross-sectoral efforts to improve nutrition and health also face the problem of funding, as these issues

do not represent a priority area of focus for any of the sectors involved. Agriculturalists, for example, can be expected to allocate any resources put at their disposal toward addressing their core mandate of increasing agricultural productivity—rather than devoting resources to secondary issues requiring coordinated action with other sectors.

Competing for Resources across Sectors

In general, the resource allocation processes of government budgeting and personnel management make it difficult to mount cross-sectoral action. Each sector must compete with other sectors for the resources it requires. Typically, budgeting is viewed as a zero-sum game by sector managers: funding that goes to another sector, even if for coordinated cross-sectoral activities, is viewed as a loss of resources for their own sector.

Similarly, sector-specific criteria form the basis for evaluating sector effectiveness and hence for the allocation of resources. The resource allocation mechanisms provide limited, if any, incentives for carrying out joint coordinated activities, even though they may potentially have greater impact on broader development priorities. The attainment of objectives requiring cross-sectoral, coordinated action will rarely be advanced by routine sector-planning mechanisms.

Limited Information for Action

Finally, specialists in other sectors, including agriculture, lack expertise in recognizing either the determinants of ill health and poor nutritional status or effective approaches to address these problems. Greater capacity for analysis of these kinds of cross-cutting development challenges would increase sectoral leaders' understanding of the synergies that can be attained by concerted effort. However, it seems unlikely that, in the course of normal operations, sectors will try to build expertise on issues outside their own sphere.

In sum, there are substantial institutional and operational barriers in most countries that prevent the agricultural sector from accepting a share of responsibility for the problems of ill health and malnutrition in society. Many of these barriers are simply a reflection of a rational sectoral organization that enables government to fulfill many of its duties. In general, the goal of sustainably addressing the challenges of health and nutrition fit poorly within a bureaucratic organization and its operational processes and incentive structures.

Political Context

Advocacy is essential to foster increased attention by the agriculture sector to issues related to improved health and nutrition. The form that effective advocacy takes will depend on both the particular issue and the specific context of policy and resource allocation decisions.

“Pressing” versus “Chosen” Policy Issues

Grindle and Thomas usefully distinguish *pressing* and *chosen* policy problems.¹ When a policy concern is pressing, substantive policy reform and action to address the issue is more likely to occur than when the concern is viewed as optional, or politics-as-usual, and policymakers can choose not to address it without incurring political risk. Most of

the issues related to improved health and nutrition that involve agriculture are in the latter category, politics-as-usual. Ill health and malnutrition may be widely viewed as primarily a responsibility of the household and not of the government. Similarly, poor health, high morbidity, and food insecurity may be considered part of the environment within which a government operates, rather than as public issues to be addressed. In most developing countries, the effectiveness and legitimacy of political leaders are unlikely to be called into question because of, say, continuing rates of high infant mortality or prevalence of stunted children. Unfortunately, these are treated as political issues of choice rather than urgency.

Alternative perspectives on a health or nutrition problem can, however, reframe an issue and sharpen public perception of its urgency. Through creative advocacy, a broad understanding can be crafted that could call into question a government's legitimacy based on its attention to health and nutrition issues. The framing and definition of the policy issue is critical to determining its characterization.

Drivers of Policy Formulation

The structures and mechanisms through which a government establishes its priorities vary considerably across countries. In many countries, political parties and special interest groups engage in the policy process, contributing to its dynamism—both defining the problems to be addressed and suggesting solutions for them. Within a democratic context, the actual decisionmaking structures are primarily those instituted to enable decisions by citizen representatives, that is, legislatures and cabinets; while government institutions are primarily only responsible for implementation of the resulting policies. The overall process exemplifies what Grindle and Thomas have called *society-centered* policy processes.

In contrast, in many developing countries, democratic institutions at the national level are absent or relatively new; there is less scope for a representative electoral system to influence problem definition and agenda setting in policy debates. Often, most of the relevant expertise on a particular policy issue is found within government. In nations characterized by such *state-centered* policy processes, government institutions tend to play a significantly larger role in driving policymaking than they do in countries with society-centered policy processes.

Effective forms of advocacy will differ depending on the nature of a country's policy processes. Where society-centered processes dominate, engagement with broad civil society and political organizations will be an important component of any advocacy strategy. However, the greatest burdens of ill health and malnutrition are found in countries where state-centered policy processes dominate. In those cases, much of the advocacy effort needs to focus principally on engaging political leaders and the technocratic elites of government. These state-actors have great leeway to set government priorities and control the allocation of its resources.

Creating Openings for Agriculture to Contribute to Better Nutrition and Health

Three approaches have been used to overcome barriers to cross-sectoral action: policy champions, civil society coalitions, and community-based efforts.

Policy Champions

The state-centered nature of policymaking in many target countries, as well as the need for cross-sectoral policy responses, makes individual leadership critical in addressing ill health and malnutrition. But because efforts to improve health and nutrition do not fit neatly into sectoral programming, the institutional organization of government does not by itself produce institutional champions of, or advocates for, these issues at the highest levels.² Within national policy processes, the leaders of formal government institutions are not expected to take on responsibility for ensuring that sufficient state resources are allocated to addressing ill health and malnutrition or for addressing the multiple determinants of these problems. Without such leadership, and given limited resources and human capacity, the routine operations of government are unlikely to lead to effective public efforts to improve health and nutrition.

Because politicians and other members of the policy elite are unlikely to automatically increase the resources allocated to activities that improve health and nutrition, the motivation to do so must come from outside the formal organization and processes of government. A key advocacy strategy is to cultivate policy champions as the visible leaders of campaigns to include health and nutrition among the priorities of the government and its sectoral bodies. These champions need to be properly informed on the issues, well connected, and persistent, and they need to have access to the various venues for policy debates. These traits are more important than having technical qualifications on the issues they champion.

Civil Society Advocacy Coalitions

The activities of champions of health and nutrition issues need to be coordinated with any technical efforts being promoted on these issues, to ensure that their policy influence is adequately informed. Given the problems of establishing leadership within government on cross-sectoral efforts to bring about sustained improvements in health and nutrition, there is considerable merit in the formation of a national advocacy coalition around these issues to foster such action. Such coalitions should include individuals from civil society, international agencies, and private institutions, as well as government, who are committed to achieving good health and nutrition for all, both as a human right and as a basis for human and economic development. The members of the advocacy coalition should work in a coordinated fashion to focus government attention on these issues and to increase the level of public resources allocated to address them.

Such a national civil society advocacy group may be essential to make substantive progress on these issues that are not adequately addressed in sectoral agendas, as a way of bringing agriculture and other relevant sectors

into action on health and nutrition. However, given the difficulty of establishing policy leadership on broad health and nutrition issues, the creation of such coalitions is problematic. Leadership and participation in such advocacy efforts will often depend on chance: the personal qualities of individuals—their training, experience, personal values, and vision—may prompt them to become involved. Nevertheless, such a process can also be seeded. Topical health and nutrition concerns that involve agricultural issues, such as the formulation of national food security and nutrition strategies, can often provide a kernel group of nutrition advocates, whose membership, functions, and areas of focus can then be expanded.

Community and Other Decentralized Efforts

Community-directed efforts also can provide important incentives for agriculturalists to contribute to efforts to improve health and nutrition, working in concert with other sectors. Communities' development needs rarely fit neatly into particular sectoral competencies, but rather require contributions from multiple sectors. Community demands for government assistance in addressing a problem thus provide an immediate incentive for cross-sectoral action. Where governments are strongly committed to supporting community-driven efforts, adequate leadership for cross-sectoral activities may flourish in spite of the bureaucratic organization of the sectors. Moreover, the resource conflicts between sectors typically play out at the national level; at more local levels, civil servants may have limited control over sector resource allocations, so the stakes in resource allocations between sectors are lower.

However, the ability of state agencies to work collaboratively, even in assisting communities, will vary widely. In Ghana and Uganda, government decentralization has progressed further than in most countries, but even in those countries district-level agriculturalists stated that local concerns were not necessarily more important than sectoral concerns in guiding their actions.³ These agriculturalists were still subordinate to sectoral superiors, they operated with limited resources, and many of the incentives for individual effort served to hamper cross-sectoral action to assist communities. Thus, while community-directed development may promote increased attention from agriculturalists to local health and nutrition problems, there is no guarantee that it will do so.

Conclusion

The institutional barriers faced by public sector agriculturalists when they try to improve health and nutrition are durable and strong. Consequently, an opportunistic approach may be more effective in practice than strong, programmatic action by the sector or even by several sectors. An opportunistic strategy would piggyback on existing individual activities in the agricultural sector or other sectors in an instrumental way, to address important context-specific determinants of ill-health and malnutrition. Working in this incremental manner appears more likely to be successful than mounting a large-scale cross-sectoral

effort that is a poor fit within the institutional framework of government for implementation. Such a task- or problem-oriented approach would start small, achieve short-term goals, and build on these successes iteratively to address larger problems. Individual sectoral responses will often be the best that can be realistically expected.

Consequently, one should be cautious of launching any health or nutrition program that depends on intersectoral coordination. The risk is too great that such coordination will not happen. However, an important first step is simply to ensure that the agriculture sector (or any other relevant sector) takes seriously its potential role in improving health and nutrition. Cross-sectoral coordination emerges as a practical issue once the problems of health and nutrition are

treated as politically important, stimulating leadership for action on the problems in various sectors. Coordinated efforts should follow, once such commitments are clear.

Health and nutrition can be improved through agricultural means. There are many good reasons for providing incentives to agriculturalists to address these problems in a dedicated manner. By itself, increased agricultural production is an unsatisfactory and unsustainable goal, if that increased production does not address ill-health and malnutrition. Advocacy can focus attention on specific health and nutrition benefits to which agriculture can contribute, forcing the sector to consider in greater detail who truly benefits from increased agricultural productivity, and to change its priorities and activities accordingly.

NOTES

1. M.S. Grindle and J. W. Thomas, "Policy Makers, Policy Choices, and Policy Outcomes: The Political Economy of Reform in Developing Countries," *Policy Sciences* 22 (1989): 213–248.
2. T. D. Benson, "Cross-Sectoral Coordination Failure: How Significant a Constraint in National Efforts to Tackle Malnutrition in Africa?" *Food and Nutrition Bulletin* 28, no. 2 (2007): S323–S330.
3. T. D. Benson, *Improving Nutrition as a Development Priority: Addressing Undernutrition within National Policy Processes in Sub-Saharan Africa*, International Food Policy Research Institute Research Report 156 (Washington, DC: International Food Policy Research Institute, 2008).

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