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What makes effective advocacy? An exploration of public health nutrition advocacy in England

By

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A dissertation submitted for the Degree of Doctor of Philosophy

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Abstract

Background: This research explores aspects of the widely discussed gap between the state of public health nutrition in England and the appropriateness of government and commercial responses. Specifically, it explores the role of NGO advocacy in altering and improving this situation. Recognising that NGOs conduct their advocacy to protect the public good and shape public health nutrition policy, this research analyses the role and effectiveness of NGO advocacy in shifting and shaping the dynamics of food and nutrition policy, and how it can be measured. Drawing on interdisciplinary political theories and existing models of advocacy, the research applies an academic lens to some of the practical challenges and issues faced by NGO advocates.

Aim: The aim of this research was to understand the role and effectiveness of NGO advocacy in public health nutrition, a previously under-researched area. The research focuses on England, a country with an active NGO presence, and explored the different types of advocacy and the different ways in which advocacy success is, and could be, measured. The research has relevance for the academic literature, for our understanding of advocacy effectiveness in public health nutrition and, not least, for improving the way NGOs engage with policy and change.

Research questions: Three research questions were posed:

1. What conditions support or hinder NGO advocacy in public health nutrition?
2. What advocacy tactics are adopted by NGOs working in public health nutrition?
3. How can the effectiveness of public health nutrition advocacy be measured?

Methods: Qualitative research methods were used, primarily drawing on the experiences in England from three implemented public health nutrition policies (FOP labelling, marketing restrictions and salt reduction) and four NGOs working on public health nutrition. A combination of methods, including semi-structured interviews (N=29) and document analysis of grey literature from campaigning groups and government agencies, were used to answer each research question to aid triangulation and validation of the findings.

Main findings: Advocacy was found to be a complex mix of positions and strategies, with no single model utilised by NGOs. There is a range of 'advocacies' which mean different things, at different times, in different contexts and to different people. Advocacy was found to be intrinsically linked to external conditions, and these conditions often dictate the most appropriate approach and likelihood of success. The research demonstrated different ways in which advocacy can react to, shape and navigate these conditions as part of efforts to achieve change. As a result of the conditions, advocacy was found to be rarely straightforward or predictable, adding a layer of complexity for measuring advocacy. A number of short- and long-term indicators for measuring advocacy were identified and, drawing on the overall

findings, it is suggested that in order to get the most value from an advocacy monitoring framework, advocacy should always be contextualised within the wider conditions, and a range of different indicators should be used to reflect these different conditions. The thesis ends by reflecting on the practical implications of the research and proposing a practical framework for monitoring advocacy.

Implications: The results of this research provide insights into public health nutrition advocacy and the complexity and dynamics within which it operates. The vital role of the conditions highlights the need to contextualise any assessment of advocacy and thus utilise measures across a range of domains. Progress was found to result from both abrupt and incremental change and as such advocacy which is fluid and dynamic will be necessary in order to react, shape and navigate different conditions. While needing further refinement and research, the monitoring framework presented in this thesis is valuable as a means to identify appropriate advocacy tactics and measures, while being underpinned by the conditions at play. The measuring challenge for advocacy remains, but the proposed framework developed can aid future monitoring and refinement of advocacy and thus help improve the ability of NGOs to support improvements to public health nutrition.

Key words: Public health; advocacy; accountability; nutrition, NGOs; campaigns

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Abbreviations

ACF	Advocacy Coalition Framework
ASA	Advertising Standards Authority (UK)
BINGO	Business Interest Non-governmental Organisation
BMI	Body Mass Index CASH Consensus Action on Salt & Health
CFC	Children's Food Campaign (Sustain)
CMO	Chief Medical Officer
COMA	The Committee on Medical Aspects of Food and Nutrition Policy
CSO	Civil Society Organisation
CSR	Corporate Social Responsibility
CVD	Cardiovascular Disease
DEFRA	Department of Environment, Farming and Rural Affairs (England)
DFID	Department for International Development (England)
DH	Department of Health (England)
FAO	Food and Agriculture Organization (UN)
FSA	Food Standards Agency (UK)
EC	European Commission
EU	European Union
FOPNL	Front of pack nutrition labelling
GATT	General Agreement on Tariffs and Trade
HFSS	High Fat, Sugar, Salt
HSC	Health Select Committee
KPI	Key Performance Indicators
INFORMAS	International Network for Obesity/NCD Research, Monitoring and Action Support
LMIC	Low- and Middle-income Countries
NAO	National Audit Office
NCD	Non-communicable Disease
NFP	Not for Profit
NGO	Non-governmental Organisation
NHS	National Health Service
ODI	Overseas Development Institute
OECD	Organisation for Economic Co-operation and Development
Ofcom	Office of Communications (UK)
PET	Punctuated Equilibrium Theory
PHN	Public Health Nutrition
PINGO	Public Interest Non-governmental Organisation
QUANGO	Quasi-government NGO
REF	Research Excellence Framework
SACN	Scientific Advisory Committee on Nutrition
UKHF	UK Health Forum
UN	United Nations
WHA	World Health Assembly
WHO	World Health Organisation
WTO	World Trade Organisation

Introduction

This thesis explores the advocacy carried out by Non-governmental Organisations (NGOs) in the context of public health nutrition (PHN) policy in England, with a particular focus on exploring the role and effectiveness of advocacy. Further, it explores how to assess and measure advocacy and the potential for developing a monitoring framework for advocacy organisations to aid with the planning, monitoring and measuring of advocacy. Before being able to measure impact, any research has to clarify precisely what the processes and impacts of advocacy are or might be. The thesis set out to contribute a better and more detailed understanding of the role and effectiveness of advocacy in this complex area of advocacy.

There is a considerable literature from within the political and policy-oriented sciences which explores different aspects of advocacy in the context of policy change, and the role of lobbies and external change agents in the modern democratic process. There is less literature, however, which takes advocacy as its starting point, and even less starting from within public health, including public health nutrition, the focus of this research.. The research presented in this thesis came amid concerns about the state of PHN in England and the lack of policy progress being made towards achieving healthier diets and a healthier population. England is a country with a large NGO sector and thus offers a basis for studying the dynamics of advocacy. While findings from this study cannot automatically be ascribed elsewhere, they offer a basis upon which further research could test and amplify.

Concerns about power disparities between those representing the public good and those representing other interests were an important consideration underlying the research. Recognising the role NGOs play in the policy process as representatives of the public interest, this thesis explores some of the public health nutrition advocacy that is currently undertaken, what can be improved, and how we can better measure the advocacy efforts and the extent to which they are a success. The research has emerged from the thinking of INFORMAS – the International Network for Obesity/NCD Research, Monitoring and Action Support – which seeks to monitor and benchmark food environments and policies in order to stimulate change by developing accountability frameworks. Instead of focusing on the policies and environments themselves, the focus of the research presented in this thesis is on the role of NGO advocacy, the tactics that can be utilised to influence and shape PHN policies and how this can be measured and monitored.

The research presented in this thesis applies an academic lens to some of the practical challenges which are faced by NGOs working in the policy space to improve the state of public health nutrition. The research sheds light on the role of NGO advocacy in policy change and builds our understanding of ways that advocacy can be measured, which in turn is used to inform a proposal for a monitoring framework

for NGO advocacy. The thesis ends with a series of recommendations and considerations for the NGO community when planning, delivering and evaluating advocacy in public health nutrition, as well as recommendations for funders/donors of NGO advocacy who may be interested in better understanding its effectiveness and academics undertaking research in this area.

Chapter 1 introduces some of the key underlying concepts that relate to the research and which underpin some of the researcher's interest in this topic, including defining what advocacy is, the rationale for public health nutrition advocacy, the role of food environments and food systems in health, the tensions that exist between market and public interests, and the implications this has for advocacy.

Building on the broad concepts outlined in Chapter 1, Chapter 2 reviews the existing literature, particularly focused on the political theories, advocacy tactics and existing frameworks and approaches to measuring advocacy. The literature review is used to help interpret and understanding the research findings and is reflected on in the discussion chapter (Chapter 7).

Chapter 3 presents the aims, research questions, objectives, methods and underlying perspectives for this research.

Chapters 4-6 present the findings of this research, taking each Research Question in turn. Chapter 4 focuses on the conditions faced in public health nutrition advocacy identified from this research (RQ1), Chapter 5 reports on the tactics used by NGOs when advocating for change (RQ2) and Chapter 6 presents findings on the measures which can be used to assess the success and progress of PHN advocacy (RQ3). In each chapter a short summary and discussion is presented relating to each of the research questions, which leads into the discussion in chapter 7.

Chapter 7 discusses what these findings offer to illuminate both the theories and concepts set out in Chapters 1 and 2 in relation to our understanding of advocacy, and explores the significance of the findings for the research problem of the entire thesis – what makes for effective PHN advocacy. The chapter presents a number of conceptual models to capture some of the findings and complexities of advocacy identified from this research and ends with a proposed framework for monitoring advocacy.

Chapter 8 then draws out overall conclusions and reflections from the research, together with reflections on the process reported here. A number of important themes emerge from the research, including the range of different advocacies that exist and the intrinsic link between external conditions and advocacy itself which has implications for determining the appropriateness of different advocacy approaches and the likelihood of success.

1 Contextual review of public health nutrition advocacy and policy

This chapter sets the scene for this thesis and presents some of the issues and concerns related to public health nutrition (PHN) and the related advocacy in England. The chapter introduces some of the key underlying concepts that relate to the research and which underpin some of the researcher's interest in this topic, including exploring the role of advocacy, the rationale for advocacy in PHN, the role of nutrition and food policy in health, the tensions that exist between market and public interests, and the implications this has for advocacy. This is important for contextualising the research presented in the thesis and to understand some of the dynamics, concerns and challenges currently faced by advocacy organisations working in PHN which may have an impact on their success and effectiveness.

1.1 Defining Advocacy

The practice of advocacy has been described as having 'outpaced its theoretical development' (Gen and Wright, 2013) and thus is an area worthy of research. The Cambridge dictionary defines advocacy as 'the public support of an idea, plan or way of thinking' (*advocacy*, n.d), while Fagen and colleagues (2009) described advocacy as encompassing a range of activities to "influence decision-makers, such as litigation, lobbying, public education, capacity building, network formation, relationship building, communication, and leadership development". Advocacy has been the subject of much academic discussion, primarily driven by the political sciences, recognising the role advocacy and advocates play in policy change as one of many factors that contribute to change (see Chapter 2). Public health advocacy has been described as advocacy which specifically aims to 'reduce deaths or disability in groups of people (overall or from a specific cause)' (Christoffel, 2000) and has been researched across a range of public health issues, from tobacco, to climate change, to HIV/AIDS and women's and children's rights. In 1986, the World Health Organisation's Ottawa Charter for Health Promotion recognised advocacy as an important component of health improvement (World Health Organization, 1986).

Advocacy has been described by academics and analysts in a number of different ways, including whether the advocacy is carried out by an organisation or at a grassroots level, and whether it focuses on policy change or behaviour change. It has also been described as having a number of different dimensions, including media advocacy, political advocacy, community mobilisation, professional mobilisation and internal advocacy, (Chapman, 2004, Shilton, 2006). Lobbying and campaigning are often considered as synonymous with advocacy but are most commonly seen as specific forms of advocacy. The present research focuses on the advocacy carried out by organisations, such as NGOs, when seeking to achieve policy change.

1.2 NGO advocacy

Advocacy typically involves a wide number of stakeholders, including governments, civil society, the media, business communities, individuals and organizations, which all play a role in influencing and shaping public health issues (Shilton, 2006). This research is particularly interested in the role of NGO advocacy in policy. Public health NGOs are formal entities which form part of a wider community of civil society organisations (CSOs), typically have social or political aims and play a role in policy by advocating for policy change.

There are a large number of different NGOs in England – making it a rich terrain for this research - ranging in size, locality, issue, membership and governance. They can take the form of Royal Colleges, research charities, campaign groups, consumer organisations, grassroots organisations, academic networks and formal and intersectoral alliances. NGOs can operate at different levels of society and policymaking, including local, regional and national or international level (Acosta, 2012). NGOs have categorised according to whether they operate inside or outside formal systems, and whether they represent a specific cause or issue, or represent a particular section of society (Buse et al, 2012). Advocacy NGOs are often issue rather than constituency based (Kamat, 2004). These distinctions are revisited in more detail in the following chapter (section 2.3).

The research presented in this thesis focuses on the role of public interest NGOs (PINGOs) in influencing and shaping policy in the public interest. PINGOs seek to protect public health and can play a ‘watchdog’ role to challenge and monitor actions of the food industry and governments to ensure public health is protected and represented in policy decisions, as well as communicating with consumers about healthy diets (Lobstein et al, 2013, Brinsden et al, 2013). A number of other types of NGOs exist, including Business Interest NGOs (BINGOs) which represent the interests of business under the guise of a not-for-profit, and Quasi-government NGOs (QUANGOs) which represent a hybrid between an NGO and public sector organisation (Kamat, 2004), but are not the focus of the present research.

1.3 Types of policy

The role that NGOs play in policy change was of particular relevance to this research. The Cambridge dictionary defines policy as “a set of ideas or a plan of what to do in particular situations that has been agreed to officially by a group of people, a business organisation, a government or a political party” (*policy*, n.d.). This definition reflects the fact that policies can be agreed by any actor, not just government. This is relevant in the context of globalisation, where power is being distributed amongst a range of actors, including businesses, given increasing responsibilities to set their own policies outside of government legislation and control.

A number of different policy types have been described, reflecting differences in who sets the policy, the type of policy and the degree and type of enforcement. A distinction can be made between ‘high’ policies which are set by central government, and ‘low’ policies which may involve a number of different actors including local government. Similarly, most government policies are typically ‘vertical’ in that they involve one key focus and come from one department, such as a health department (Torjman, 2005). However, ‘horizontal’ policies are more cross-cutting and are developed by a number of departments. Stowe and colleagues (2001) make the distinction between written policies which are ‘on the books’ and reflected in briefings and papers, and those which are implemented ‘on the street’. In the same vein, policies have also been described as being ‘symbolic’ when they exist in principle but without implementation (Edelman, 1985). Policies also differ in the way they are enforced. For instance, a policy can be described as ‘hard’ when regulations and sanctions are in place to ensure implementation, while education campaigns or policies with no legal binding, sanctions or monitoring can be described as a ‘soft’ policy (Mozaffarian et al, 2015). In addition, different degrees of regulation have been described between a state of no regulation and statutory regulation, including self-regulation (administered and enforced by the regulated organisation) and co-regulation (administered and enforced by the state and regulated organisation) (Bartle and Vass, 2005). In the context of this research, an additional distinction relates to whether a policy is ‘upstream’, focused on shaping the economic, social and physical environments, ‘midstream’ and focused on influencing behaviour, or ‘downstream’ to support health services (Sacks et al, 2009). This differentiation will be revisited in section 1.6.

There is a global trend towards soft and self-regulatory policies (OECD, 2002), however the success of self-regulation across different industries is mixed, and it has been suggested that self-regulation, particularly without input from government and public health advocates, can be detrimental for achieving public health goals (Sharma et al, 2011). The best and most effective policies from a public health perspective are likely to be those that focus upstream by addressing the wider environments (Hawkes et al, 2013, McKinlay and Marceau, 2000) and have strong implementation plans and enforcement (Bryden et al, 2013). The types of policy approach taken has implications for the underlying concerns related to public health nutrition presented in this chapter, and which underpin the research in this thesis.

Neoliberalism, a political philosophy based on market freedoms in policymaking, plays a role in the type of policy seen, typically encouraging policies which are softer and more symbolic in nature, rather than enforced and widely implemented. Osborne and Gaebler (1992) described governments as typically ‘steering but not rowing’ as a result of neoliberalism, reflecting a tendency for less stringent implementation measures, and reliance on the private sector to set and monitor their own policies.

Within this context, government policies are more likely to take the form of recommendations, guidelines and voluntary actions which offer a high degree of freedom over whether or not they are adopted, without sanction, and provide opportunities for private sector to set and monitor their own policies through self-regulation.

Globalisation and global markets are also relevant here as key factors which are transforming world politics through weakened borders, flexible economies and public private partnerships (Cerny, 2010). These transformations are increasingly evident in all aspects of life, from food to travel to culture. A number of international trade agreements such as the Transpacific Partnership have emerged as a result of global markets to aid trade. However, agreements like these can pose a threat to public health nutrition and food policy as they often restrict the ability of national governments to implement strong regulations as such measures are perceived to create technical barriers to trade (Friel et al, 2013a). Furthermore, a shift away from national governing towards regional (i.e. European Union - EU) and global (i.e. UN institutions) governance has resulted in a new policy framework whereby authority is dispersed through 'multi-level governance' (van Heffen et al, 2000). This again takes away from some of the power held by national governments to implement and enforce policies. This, along with neoliberalism, arguably contribute to more business-friendly policies and political systems which are driven by market interests rather than the public interest and enables corporations to push their own priorities and idealisms as part of Corporate Social Responsibility (CSR) (Cerny, 2010).

The increase in opportunities for a range of actors to be involved and influence policies which results from neoliberalism and globalisation provides legitimate avenues for public interest advocates to influence policy and create the conditions for policy change, and also highlights the need for advocacy which protects the public interest. However, while PINGOs benefit from the opportunity to become more involved in policy and agenda-setting, they are also faced with market interest challenges when seeking to influence policies that serve the public good, an issue we return to later in this chapter (1.8). The specific roles and actions of NGOs are explored in more detail in Chapter 2.

1.4 Public health nutrition

The overarching goal of public health is to prevent disease and promote health. A public health perspective recognises the wider social determinants of health which, as described by Braveman and Egerter (2011) emphasises the need to address the social drivers of health and actions which go beyond the health system.

Public health nutrition focuses on the prevention of disease by improving diet at a population level and draws on the notion that diet impacts population health. It draws on the vast evidence that suggests a relationship between diets that are high in saturated fat, salt, sugar, processed/red meat and low in

fruit, vegetables, seeds and whole grains an increased risk of obesity and NCDs (Afshin et al, 2019). Public health nutrition encompasses the policies, health promotion and community interventions required to improve population diet and health and differs from personalised nutrition and counselling which take a more individualised and behaviour change approach to diet change.

1.5 Diet and health in England

This thesis focuses specifically on public health nutrition in England which, like many countries around the world, has experienced increasing levels of obesity and diet-related non-communicable diseases (NCDs) over the last few decades driven, at least in part, by diets high in fat, sugar and salt which result from a high reliance on processed foods and out of home food (Rauber et al, 2019). While the focus of this research is primarily on PHN policy in England, it should be noted that in many cases the policies and issues dealt with throughout this thesis are UK wide due to the governing structures of Parliament and the centralised nature of many policies.

Obesity is commonly used as a visible indicator of poor nutrition status and with, increasing levels seen in recent years in England and globally, is of particular relevance to this thesis. Obesity has gained increasing political traction over the last two decades, both in England and around the world, being described as being the new tobacco (Klein and Dietz, 2010). Both the EU (European Commission, 2014) and WHO have specific action plans on childhood obesity (World Health Organization, 2016).

England, and indeed the whole of the UK, has some of the highest levels of obesity in Europe (NCD-RisC, 2017, World Obesity Federation, 2020), with the latest data from the *Health Survey for England* (2019) suggesting that 63% of adults and 28% of Children aged 2-15 years were overweight or living with obesity in 2018. In addition, in 2018/19 there were almost one million hospital admissions to NHS hospital where obesity was recorded as the primary or secondary diagnosis, representing a steady year on year increase (NHS Digital, 2020). Figures from the Department of Health (2017) suggest that the NHS spent £6.1 billion on overweight and obesity-related ill-health in 2014-15, while the broader cost to society due to lost productivity and infrastructure changes needed is approximately £27 billion. These figures are projected to rise to 9.7 billion and £49.9 billion per year by 2050 (Department of Health, 2017).

Obesity has been described as being both an outcome of a complex web of influences (Rutter, 2012) as well a 'wicked' problem (Parkinson et al, 2017). A wicked problem is by nature a complex issue and has been used to describe social problems which do not have clear, definable, independent solutions (Rittel and Webber, 1973). Complex system maps have been developed to try and capture the complex nature of the socio-ecological interactions of obesity, highlighting the complex web of drivers and feedback loops that can contribute to obesity (e.g. Foresight, 2007, Huang et al, 2009). The research presented

in this thesis will, in part, explore how PHN advocacy can be strengthened in order to cut through some of this complexity.

The UK National Diet and Nutrition Survey (NDNS) provides data on the dietary intake of the UK population. The 2014-2016 NDNS data set published by Public Health England (2018) suggests that while diets have been improving slowly, average diets are still failing to meet the recommendations. According to this survey, saturated fat contributed on average 11.9% of calories (recommendation 11%) and free sugars contributed 11.1% of total calories (recommendation is 5%) amongst 19-64-year olds in the UK. In addition, average fibre intake was 19g per day (recommendation is 30g), average salt intake was 8.0g of salt (recommendation is 6g) and only 30% of adults and 8% of teenagers were consuming the recommended five portions of fruit and vegetables a day. Department of Health (2017) figures suggest that more than a quarter of adults and one fifth of children eat from out of home outlets at least once a week, with 18% of all meals eaten outside of the home in 2015, up from 5% in 2014. These trends in diet and health highlight the need for more, and better, policies in public health nutrition.

1.6 Food environments

This research aligns itself with the view that food choices and diets are driven by the food environments we live in, that is the “collective physical, economic, policy and sociocultural surroundings, opportunities and conditions that influence people’s food and beverage choices and nutritional status” (Swinburn et al, 2013a). This perspective challenges the misconception that diet is primarily a matter of personal choice and responsibility which has resulted in inadequate government action obesity and related diet-related diseases (Brownell et al, 2010). Concepts of ‘personal choice’ and ‘personal responsibility’ are notions constructed around an individualist philosophy and fail to capture the fact that people are exposed to a narrow range of options determined by others (Milio, 1990). Indeed, the environment can “override individual physical and psychological regulatory systems” and undermine personal choices (Brownell et al, 2010).

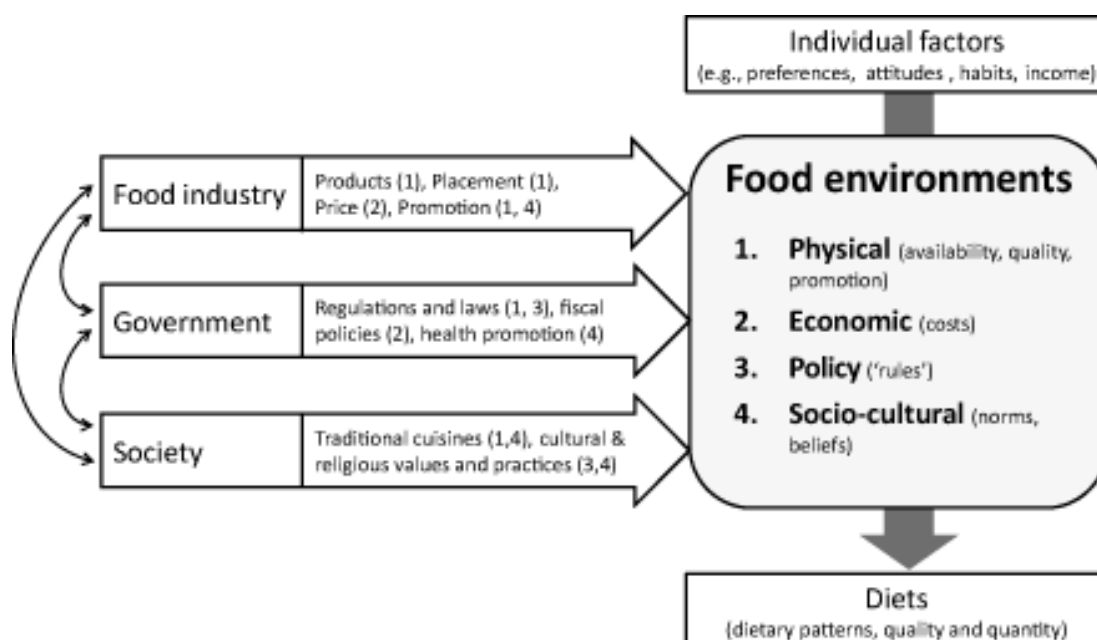
This notion that environments can influence diet and nutrition status can be traced in part to the concept of ‘food security’ which describes the policies and environments which assure food accessibility, affordability and availability, as well as the knowledge required to be food secure. Recognition of these links dates as far back to the early 19th century, beginning with knowledge about the role of minerals and chemistry, and then to the recognition of the significance of the social environment on dietary intake, particularly socio-economic determinants (Lang et al, 2009, Mason and Lang, 2017). In 1996, The World Food Summit Action Plan defined food security as existing “when all people at all times have access to sufficient, safe, nutritious food to maintain a healthy and active life” (Food and Agriculture Organization, 1996). The phrase ‘food and nutrition security’ builds on this to

acknowledge that food security and nutrition security are interdependent, and neither can be achieved without the other (Hwalla ,et al 2016). It is possible for instance to have food security but not nutrition security when sufficient or even excess calories and food quantity is available, but with inadequate nutrients necessary to ensure good health.

A healthy food environment has been described as an environment where “the foods, beverages and meals that contribute to a population diet meet national dietary guidelines, are widely available, affordably priced and widely promoted” (Swinburn et al, 2013a). Conversely, an obesogenic food environment is one where “the sum of influences that the surroundings, opportunities, or conditions of life have on promoting obesity in individuals or populations” (Swinburn et al, 1999) through the types of food which are made available and accessible and the promotion of excess consumption of foods which are high in fat, sugar or salt and is low in essential nutrients.

Figure 1.1 suggests that food environments are the product of an inter-relationship between industry, government, society and the individual. It also suggests that food environments can be considered in terms of what is or isn’t available (physical), the financial drivers (economic), the rules that are in place (policy) and the prevailing norms and beliefs that exist (socio-cultural) (Swinburn et al, 2013a). Advocacy may play a role in influencing each of these different dimensions and drivers.

Figure 1-1: The major influences on food environments



Source: Swinburn et al, 2013a

It is widely accepted that a wide combination of interventions are needed to improve the state of public health nutrition at a population level (e.g. Rutter et al, 2017). It has been argued that reducing obesity

and improving diets at a population level requires political leadership and implementation of upstream policies that focus on addressing the social and environmental drivers of obesity and food environments, in favour of individualised approaches which are either midstream and focused on public education or downstream and focused on health services and treating the outcomes of poor nutrition (Caraher and Coveney, 2004, Dorfman and Wallack, 2007, Sacks et al, 2009). Caraher and Coveney (2004) criticised public health nutrition for being insufficiently engaged with “upstream policy or the determinants of food supply, preferring instead to confine itself mainly to dietary guidelines and lifestyle factors”.

A socio-ecological model highlights the need to implement interventions at multiple levels within society, including at the policy, community, institutional, inter-personal and individual levels, to ensure that inaction at one level does not undermine the success of action at another (Lobstein et al, 2004). An Ecological Public Health approach takes this thinking further, suggesting that we need to tackle, not just the manifestations, but the social, environmental and economic forces that shape obesity and diet (Lang and Rayner, 2007). This not only requires addressing food’s material or physical environment through policies but requires the altering and reshaping of diet in the material, physiological, social and cognitive world in order to make the market, governments and the public work in favour of health (Rayner and Lang, 2012).

A number of different levels of intervention to improve diets and reduce diet-related disease have been identified, including interventions which address environmental determinants, socio-cultural drivers, behaviour patterns and energy imbalance which can lead to obesity (Swinburn et al, 2011). Importantly for this research, Swinburn et al (2011) describe the increasing political difficulty that is experienced the more upstream and population-wide the interventions are, hence the need for strong advocacy to try and reduce some of this difficulty. More details on the role of NGO advocacy is described in Chapter 2 and is a key element of the research presented in this thesis.

1.7 The food system

The food system is the term used to describe the complex mix of actors, dynamics and infrastructure which shape the production, processing, distribution and sale of food as it passes through supply chains to the marketplace. It encompasses the governance and economics of food production, the processes and actors involved and the affect that food has on health and wellbeing. The food system drives the availability, affordability and accessibility of certain food stuffs and thus is an important influence on food environments and driver of food choices and diets, not least through mass marketing and cultural drivers such as advertising. Food systems involve a complex set of interactions and policy goals which are often in conflict, for instance health goals may conflict with economic or environmental goals (Parsons and Hawkes, 2018).

The expansion of industrial and intensified agriculture, globalisation, economic growth and the rise in transnational corporations have led to significant changes to the food system (Lang and Heasman, 2015). Maxwell and Slater (2003), amongst others, describe the changing food landscape in the USA, highlighting a number of shifts, for instance from short to long supply chains, a focus on cooking skills to pre-prepared foods, local shopping to commercial retail settings, agriculture to multinational companies and concerns of deficiencies replaced with concerns about obesity and excess fat, sugar and salt consumption. A similar picture has emerged in post-war Britain where the current status quo has been described as 'productionist', emphasising the efficiency and quantity of production, often at the expense of quality (Lang and Heasman, 2015). Amongst many drives, agricultural policies are a powerful driver of modern food systems. The cost of healthy food items has risen more than the cost of unhealthy food items in high-income countries over the last 30 years, a trend that is increasingly seen in low- and middle-income countries (Wiggins and Keats, 2015). One reason for this is subsidies which have allowed the prices of products and ingredients such as sugar-sweetened beverages, sweets, fats and oil to remain relatively cheap compared to the price of fruits and vegetables which remain relatively more expensive (Jones et al, 2014).

While these newer food trends, focused on production and ultra-processing, have increased the production capacity, diet quality and access remains poor across the world. The Lancet Commission on Obesity highlighted the large number of people globally that are undernourished, affected by excess body weight or both (Swinburn et al, 2019). This is largely the result of a food system failure which does not enable distribution as needed, with high amounts of food waste seen in some places, combined with the fact that the food system and environment is increasingly based around the production and consumption of ultra-processed foods which are energy-dense, palatable, cheap, ready-to-eat, high in fat, sugar and salt, and low in essential nutrients (Monteiro et al, 2013). The current system, while supporting the notion of food security, is failing to nutrition security (Lobstein, 2009). While being a commercial success, it has been suggested that obesity signals a market failure by food systems which are failing to protect public health and future generations with appropriate policies and regulations (Moodie et al, 2006, Swinburn, 2008).

Of particular relevance to this research on public health nutrition policy and advocacy are the actors and influences on the food system. As described by Lang and Heasman (2015) there are wide number of drivers and influencers on the food system, including various government organisations, socio-cultural influences and other actors, including civil society and the media. The range of influences on the food system suggests it is both dynamic and complex and highlights, not only the dynamics and competing influences on the food system itself, but those that advocacy NGOs have to contend with in PHN advocacy.

1.8 Market versus public interests

The food system, as described, is dynamic and can evolve in response to a range of actors including NGOs, consumers, businesses and government. The array of actors and influences creates a large amount of debate and advocacy at a local, national, regional and global level on the issue food system, food environment and public health nutrition policy.

While it is simplistic to suggest that these actors can be categorised as representing either the market or public interest, it is a useful distinction to help explore some of the different views and perspectives that exist and the different message frames often seen in public health; those which favour market interests and market justice and those that favour the public interest and social justice, the latter of which is an underlying principle for public health (Beauchamp, 1976)). Dorfman and colleagues (2005) describe this framing as a key challenge in public health, because the notion of markets serving people is often more powerful than the public interest counterarguments which focus much on collective responsibility and collective good.

One underlying factor of these beliefs is the fact that food companies are mandated to generate profit and those working for them are obliged to ensure that all actions appease shareholders (Stanley and Daube, 2009, Wiist, 2006). Commonly, these goals conflict with public health objectives and interventions which are focused on improving population health and wellbeing, such as implementing taxes to reduce consumption of a product (Wiist, 2006, Stanley and Daube, 2009). A key challenge therefore when seeking to alter food environments and diet is rooted in the fact that challenges to market driven processes in the food system to improve public health will likely impact on profit and market share and are therefore not favourable to market actors who will seek to protect their own interests (Stanley and Daube, 2009).

Of particular concern from a public interest perspective is the growing dominance of multinational food and drink companies or 'Big Food' (Stuckler and Nestle, 2012) as the sector becomes increasingly concentrated. According to *Food Engineering's* 2019 annual report of the top 100 food and beverage brands, "Revenues of the top 10 companies combined stood at around \$450 billion, which is more than the collective revenues of the next 31 entrants" (Scully, 2019). The agri-food business in the UK made up £113 billion (6.4%) of the national Gross Value Added in 2016, employing 3.9million in Q1 of 2018 (DEFRA, 2018).

There is concern that food and beverage companies are employing a range of tactics to undermine public health policies, likened to the 'playbook' used by the tobacco industry (Stanley and Daube, 2009, Perl and Hamill, 2017, Brownell and Warner, 2009, Moodie et al, 2013). This includes undermining evidence by promoting weak science or research with conflicts of interest, threatening job losses, using

bullying tactics against individuals promoting public health policies, promoting voluntary guidelines and personal responsibility, funding campaigns opposing legislation and pressuring low- and middle-income countries that are in a fragile economic position (Perl and Hamill, 2017). It is also common for food companies to focus on the need to increase physical activity to offset calorie consumption and to emphasise self-regulation and personal responsibility (Koplan and Brownell, 2010). Similarly, Kreuter (2005) described how corporations often describe policy proposals which sanction or limit certain practices as a ‘threat to freedom’, a tactic which may reduce public support of the policy. Such framing tactics can lead to concerns that public health advances are “nanny state like” Kreuter (2005). In the context of creating healthier food environments, Shill and colleagues (2012) identified lobbying by food manufacturers as a major barrier to regulatory change.

A common narrative presented by food companies in the context of public health nutrition is one of individual responsibility and personal choice, thus distracting from the role that companies have in causing and acting on some of the nutrition concerns today (Brownell et al, 2010). The power of market interests in policy discussions has been shown in a range of contexts, including food marketing to children. Research undertaken as part of the EU-funded POLMARK project found that stakeholders perceived market interest groups, such as the food and drink industry, media, advertising industry, ministry of trade, to have a greater level of influence on food marketing policy compared to groups representing the interests for children and the public, including advocacy groups, scientists, health ministries and health professionals (Lobstein, 2010).

According to Wiist (2006) there is an increasing movement to challenge this growing power of transnational companies in parallel to the increasing awareness of some of the impacts this has on health, society and the environment. The recognition of this power and the need to provide a counterbalance was a key driver of this thesis and the focus on public health nutrition advocacy. This research comes from the perspective that PINGOs have an important role in re-establishing public health and the public’s interest within these policies, particularly in the context industry power, influence and tactics described. The state of policy suggests public health groups may be on the back foot in policy change, and more needs to be done to better understand how these groups can better challenge or counter industry lobbying and influence.

1.9 Public health nutrition policy recommendations

A number of upstream policies have been recommended to improve food environments, specifically obesogenic food environments, including in a number of WHO action plans, such as WHO’s Action Plan on NCDs (World Health Organization, 2013) and report of the WHO Commission on Ending Childhood Obesity (World Health Organization, 2016). The need for a package of complementary policies at

multiple levels to address obesity and NCDs is well recognised (Mozaffarian et al, 2018, Yach et al, 2005, Swinburn et al, 2013a, Hawkes et al, 2013). The key policy options commonly recognised as important for improving food environments include: Reformulation of fat, sugar and salt; restrictions on food marketing and advertising, particularly HFSS foods; the use of interpretive front of pack labelling; pricing and promotions to promote healthy food choices; fiscal measures, such as taxes; food and nutrition standards in the public sector; healthy retail food environments; and, trade agreements to support healthier food

An analysis of the cost-effectiveness of a range of interventions based on a microsimulation model by Cecchini and colleagues (2010) showed that a combination of interventions to prevent premature deaths would be most effective, however upstream policies such as marketing, labelling and fiscal measures were identified as the most effective individual policies for reducing premature deaths, compared to health promotion and individualised efforts further downstream.

It can be noted that many of these core policy areas are not unique to food and closely mirror the package of policies outlined in other public health areas such as tobacco and alcohol (World Health Organization, 2003, World Health Organization, 2010), spanning marketing, labelling, pricing and community interventions, amongst others. However, public health nutrition is in many ways a more complex public health target compared to tobacco and this standard package of policies does not fully capture the nuanced policies and actions required to support meaningful change across different elements of public health nutrition. An important reflection in the context of this thesis is that PHN advocacy and policy should ideally focus on shifting food supplies and dietary patterns, while tobacco advocacy was more focused on stopping certain behaviours (smoking) by significantly reducing the availability of all tobacco products. However, even the very process of defining a healthy diet is complex and has been the focus of much discussion. There have been a number of recent efforts to define a healthy diet for people and for the planet, for instance by the EAT-Lancet Commission (Willett et al, 2019) and in a joint FAO-WHO report (2019). Yach and colleagues (2003) present a number of reasons why food needs to be addressed differently to tobacco, including that the health concerns linked to food are the result of a complex interaction of under consumption of beneficial nutrients, high consumption of HFSS and lack of physical activity. Many of the policies seen in tobacco need to be coupled with policies that also help to shift diets and behaviours, for instance by subsidising healthy food as well as taxing unhealthy food and incentivising healthier choices (Cobiac et al, 2017).

1.10 Policy progress in England

Despite increasing political discussion about the challenge of NCDs, obesity and improving food environments at national and international levels, progress has been slow. A study based on the

INFORMAS Food-Epi framework which tracks overall government action to address food environments at national level, highlighted the slow action to implement nutrition policy across 11 countries around the world, including England (Vandevijvere et al, 2019).

Although levels of ill-health and poor diet have been increasing in England, this is not due to a total lack of action by the government and companies. The UK and England have a number of public health nutrition policies in place and a number of institutions in place to manage this, including the Food Standards Agency (FSA), Department of Health (DH) and Public Health England (PHE). An analysis of the food and nutrition policies in England, carried out by the Food Foundation and using a Food-Epi framework, scored England well for dietary guidelines, front-of-pack-labelling and school food standards, but poorly for subsidies in favour of healthier foods, planning policies that favour healthier food, advertising in children's settings and on non-broadcast media, workplace food and a lack of comprehensive implementation plan (Food Foundation, 2016, Swinburn et al, 2013a).

At the time of planning this research (2013) the key mechanism for implementing food and nutrition policies was the Public Health Responsibility Deal (PHRD), facilitated by the Department of Health. The PHRD was a multi-stakeholder platform, bringing together businesses, the voluntary sector and NGOs together in order to collectively take steps to improve elements of public health, including alcohol, food health at work and physical activity. The food network of the PHRD which led the discussion related to food focused on a series of pledges, as agreed by the food network participants, with individual organisations able to sign up to each of these with their own commitments appropriate to their business goals. The PHRD absorbed a number of policies previously focused on by the FSA, including salt reduction and labelling restrictions, built on the work of Chang4life particularly in relation to promoting fruit and vegetable consumption, and also included new policies such as calorie reduction. The PHRD was part of the Government's wider public health strategy '*Healthy Lives: Healthy People*' and accompanying call to action on obesity (Department of Health, 2011a, 2011b). The PHRD has been widely criticised for the deregulatory approach taken and the emphasis on partners setting their own pledges (Knai et al, 2018). The PHRD was arguably based on an expectation that companies would voluntarily take action to put the public interest ahead of their own (Panjwani and Caraher, 2014) and lacked government leadership, rewards and sanctions (Durand et al 2015). The government's approach to public health nutrition in England, including the PHRD, and the implications this has for public health advocacy are discussed in more detail as part of this research in Chapter 4.

1.11 Monitoring and evaluation frameworks

With the preceding sections in mind, the research presented in this thesis builds on an interest in the role of PHN advocacy in shaping policy and how advocacy success can be measured. Monitoring and

evaluation processes to define success in other sectors are common for tracking performance, holding groups to account and informing future planning based on what is working, what is not and what has changed (Table 1.1).

However, what happens when something cannot be measured, when accountability is unclear, or we do not have a good set of indicators to form the basis for a monitoring framework? This is a question pertinent to this research on PHN advocacy. If we are to assume a role of advocacy in representing public interest in policy change, and yet is often on the back foot due to other interests, we are left with questions about whether or not advocacy could do something different or better, what exactly advocacy organisations are accountable for and, importantly, how we would measure that. A clear understanding of the appropriate indicators and ways of measuring advocacy, and in turn how these could feed into a planning and monitoring framework, is currently lacking for advocacy.

Good advocacy was described by Avery and Bashir (2003) as “not being about expecting perfection, but rather a commitment to learning from our mistakes”. In this vein, developing meaningful indicators and strategic learning points is an important part of reflective learning (Devlin-Foltz et al, 2012) which allows for learning from mistakes. More details of existing efforts and research on measuring advocacy are described in chapter 2.

A range of monitoring frameworks exist for other sectors. For instance, it is common practice within businesses to use key performance indicators (KPI) to determine success. According to Price Water Coopers (2014), KPIs must be defined and clearly linked to strategy and are selected based on what is important to a particular industry, such as revenue, sales, competitor comparisons or customer satisfaction. Similarly, within the financial sector share prices and monitoring is used to determine business success and failure, while in marketing and PR numerical indicators are used to determine reach and influence of a campaign or advertisement. Monitoring of waiting times and patient satisfaction is common practice in healthcare and the quality of research and publications in Higher Education is measured using the Research Excellence Framework (REF). International advisory bodies, such as WHO, set targets on a range of factors such as health improvement which are monitored over time.

Drawing on the principles of financial auditing, accountability frameworks and social auditing help to judge social contributions of businesses, organizations and departments and the impact they have on society. Accountability frameworks are a specific process of evaluation to identify responsibilities, hold actors to account for those responsibilities and judge progress towards meeting those responsibilities. These are becoming increasingly common practice across a number of areas, including government departments, UN institutions, businesses and other organizations. They typically relate to policies and

guidelines that exist and the processes, steps and specific actions that need to be taken by different actors in order to realise the desired actions.

Table 1-1: Examples of success measures used in different sectors

Industry	Example Measures
Business	Key success factors, key performance indicators, ranks, opinions
Marketing	Key success factors, key performance indicators
Healthcare	Waiting times, screening uptake
Academia	Research Excellence Framework
Research	Journal Impact Factor
Government	Population level targets e.g. reduction of disease

Source: author

Building on some of the existing and processes frameworks, those working in public health and advocacy are becoming increasingly interested in new forms of measuring which better align with policy and advocacy goals, commonly in the form of accountability frameworks (e.g. Kraak et al, 2014). INFORMAS, an international public health network which seeks to benchmark and monitor food environments and the policies and actions that are in place globally, referred to previously in this chapter, is one such example. Specifically, the INFORMAS network developed the Food-Epi framework which benchmarks and holds governments to account for the actions they have taken towards supporting and implementing a recommended set of food environment and obesity policies, as well as BIA-obesity which does a similar thing for food companies (Swinburn et al, 2013b). The overarching framework for INFORMAS includes advocacy as contributing factor but has not gone as far as developing a specific framework for monitoring public health nutrition advocacy.

The increase in use of monitoring frameworks and auditing style processes is not without its critics, however. Power (1996) describes an “audit explosion” and raises questions about the very impact of the audits and monitoring processes themselves, arguing that they often don’t lead to the desired outcomes and create overburdensome processes for people to follow, detracting from actual goals and creating inflexibility. Furthermore, the impact element of the Higher Education REF system in England has also come under scrutiny for too much focus on production compared to perceptions of the research undertaken and real impact (Murphy and Sage, 2014). Even KPIs which are embedded into many organisational frameworks have been criticised for distracting from meaningful work (Ryan, 2015).

With many other sectors having clear mechanisms on which to measure action and hold organizations to account against norms, standards and policies, this research was interested in whether a similar mechanism or monitoring framework could be developed or even practical for PHN advocacy. It is clear from the criticisms of such frameworks that the measures themselves need to be fit for purpose, with the purpose of monitoring kept in sight. This is something that would need to be considered when exploring the feasibility of, and important considerations for, a monitoring framework for PHN advocacy.

1.12 Chapter summary

This chapter has introduced some of the underlying concepts and issues which have underpinned this research on PHN advocacy in England presented in this thesis and has highlighted some of the considerations and complexities of PHN policy, including the range of policies available, market opposition to many public health policies, the food system and its drivers, as well as of obesity itself and other health outcomes. It draws on the perspective that disease risk and diets are the result of social, commercial and environmental drivers rather than as a result of individual behaviours, and that the responsibility for change therefore lies with government and society rather than individuals. The current lack of progress in disease reduction and diet improvement, and implementing the identified range of policy options, suggests that more needs to be done to challenge the current system. The complexities that have been described not only present challenges for policy development, but for advocates wishing to influence policy and ascertaining the most effective approaches.

The research presented in this thesis will apply an academic lens to some of the real-world problems identified throughout this chapter and which are experienced by NGOs seeking change through their advocacy. The aim of this research is to improve our understanding of the role that NGO advocacy plays in public health nutrition, how it can be measured, and in turn help to strengthen the advocacy carried out by NGOs in PHN in order to shape policies. Much of the initial thinking and ideas for the research has roots in accountability frameworks and questions raised by initiatives such as INFORMAS, which included advocacy as a component of change but has not developed a mechanism to monitor advocacy itself. This research starts to fill this gap, by identifying considerations for a monitoring framework for NGO advocacy in public health nutrition.

The following chapter presents a review of the existing theories and frameworks which are pertinent to the research presented in this thesis.

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2 Literature Review on policy change and advocacy

This chapter provides an overview of the existing literature relevant to this research, including the political theory, advocacy theory, and examples of frameworks which have been proposed for measuring advocacy and ascertaining effectiveness. It focuses on what has previously been discussed and considered important in the context of the role and effectiveness of advocacy. This chapter draws on a range of academic and grey literature, including the broad political science literature, as well as specific literature on advocacy itself particularly in the context of public health. Identifying literature included in this chapter was iterative and ongoing, using databases such as Google Scholar and EBSCOHost. In order to determine relevance, the subject titles and abstracts were used. Reference lists were also drawn upon to identify further literature.

2.1 Introduction

The previous chapter set out the context to this research, exploring some of the issues related to NGO advocacy in public nutrition policy and where NGO advocacy fits into this. This chapter reviews the existing literature base which was used to identify the knowledge and research gaps that informed the specific research questions and methods used for the research. This chapter is split into three main sections, starting with a review of the political theories, frameworks and concepts related to policy change. Following this, some of the existing research and understanding of the tools, tactics and approaches of advocacy are presented, followed by a review of existing frameworks for measuring and evaluating advocacy. The chapter ends by summarising the research gaps that were identified. Due to the nature of the topics covered, the chapter draws on a mix of both academic and grey literature as appropriate. Much of the theoretical elements have come from the academic literature, while more practical considerations (particularly in section 2.3) also draw on grey literature.

Before introducing the literature relevant to this thesis, it is worth reflecting on the general advocacy literature base as a whole. Overall, it was found to be very fragmented, with a huge array of specific research studies done in a range of areas by a range of actors in range of contexts. Furthermore, research specifically on the topic of PHN advocacy, particularly in the context of the advocacy carried out by NGOs in England focused on policy in England and the UK, was very limited. Instead, the literature identified was primarily focused on the advocacy carried out in other countries, particularly the USA, by development advocacy NGOs, and on grassroots advocacy. Therefore, the literature presented in this chapter has been selected purposively and iteratively, drawing on those areas considered most relevant to PHN advocacy. It primarily draws on the broad literature base relevant to advocacy and

policy change, and where possible uses examples from public health issues such as tobacco, food and alcohol to emphasise particular points.

2.2 Theories and concepts related to policy and change

The first section of this chapter focuses on the theories and concepts of policy and policy change to try to explain how policy change happens and the nature of governance structures.

A linear process of policy development suggests that policymaking involves a series of rational and predictable steps which include agenda-setting, formulation, decision making, implementation and evaluation (Howlett et al, 2009). Many of the theories described throughout this section have been developed to challenge, not the stages themselves, but the notion that policy making is linear process with limited influence from wider conditions.

The main theories and perspectives that have been identified as relevant to this research are outlined in turn below. It starts with a reflection on evidence-based policy making, before describing a number of different political theories including Multiple Streams theory (MS), Punctuated Equilibrium Theory (PET), the Advocacy Coalition Framework (ACF), Social Movements (SM) and collective action and, finally, agenda-setting framing and narrative theories.

2.2.1 Evidence-based policy

An 'evidence-based policy' model of the policy process has evolved from the medical field – and particularly the Cochrane Collaboration approach to research (Cochrane Collaboration, n.d.) - where randomised controlled studies and other quantitative data is required to inform and validate actions and stimulate policy change (National Research Council, 2012). Such a view has roots in positivism and suggests a direct and linear relationship between policy and evidence.

However, such a relationship has been challenged by political scientists, suggesting that many moral and ethical decisions are required in policy making which cannot be made on the basis of evidence alone, and indeed that evidence alone will not provide all of the information needed for such a decision (Greenhalgh and Russell, 2009, McQueen, 2001). Instead, it can be argued that the relationship between research and policy is complex (Black, 2001) and that a range of socio-political factors also come into play alongside evidence in the policy making process (Greenhalgh and Russell, 2009). Furthermore, the range of actors, interactions and advocacy involved also influences policy in a 'chaos of purposes and accidents' attempting to influence and change policies (Sutton, 1999).

Models of evidence-informed policy recognise the role that evidence can play in policy making, while also contextualising the use of evidence and recognising that a range of policy influences will also play a role in the decision over whether or not to use the evidence, and how it is interpreted. Bowen and Zwi (2005) describe an evidence informed pathway to policy development which reflects the different

stages that evidence can inform the policy process – from sourcing the evidence, to using the evidence, to implementing the evidence - while also recognising that evidence can be rejected and is subject to a range of policy influence. Smith (2013) presented a number of models to capture the different ways in which evidence can be used as part of policy decision making process. These include the idea that findings and new knowledge drive policy decisions (knowledge-driven model), that evidence can be used to identify solutions (Problem solving model) and justify certain policy decisions and priorities (political model), that calls for more evidence being used as a tactic to delay decisions (tactical model), challenges between researchers and policymakers which make interactions hard (two-community model), the fact that a range of factors influence policy (interactive model) and that evidence can influence attitudes over time (enlightenment model) (Smith, 2013). The range of contextual factors that challenge both evidence-based policy and the linear process of policy making are relevant when exploring the role of different actors and actions in policy change.

2.2.2 Multiple Streams Theory

Kingdon's Multiple Streams theory (MS) describes policy change as occurring as the result of the alignment of conditions which creates a 'window of opportunity' for change to the status quo (Kingdon, 1984). Derived from Cohen's (1972) garbage can model of policy change, it suggests that the alignment of three processes will stimulate change rather than change occurring as the result of a predictable and linear process (Kingdon, 1984). The processes are categorised as streams of 'problems', 'politics' and 'policies', whereby the 'problem' relates to the conditions that need addressing, 'policy' to the "soup" of ideas that compete for acceptance and 'politics' to the political climate and national mood on the issue (Zahariadis, 2007). This theory suggests that only when a problem is identified, with appropriate solutions that fit in with other policy priorities, at a time when policymakers can act, and there is public support, does policy change occur. Kingdon's work suggests the policy process is evolving and dynamic, and links to agenda-setting which is described later in this section (Hill and Varone, 2017). From an advocacy perspective, this model suggests that advocacy may play a role in raising the profile of a problem (agenda-setting) and offering solutions which, when aligned with supportive politics, will help to initiate change.

2.2.3 Punctuated Equilibrium Theory

Punctuated Equilibrium Theory (PET) suggests that policy and social systems undergo long periods of stability, which can be abruptly changed at a 'critical juncture' (Baumgartner and Jones, 1993), similar to the idea of 'windows of opportunity' from MS theory. According to PET, incremental changes are the most common type of change seen as they are perceived as lower risk to policymakers, however abrupt change may occur as a result of a shock or crisis – termed 'critical events' - such as a significant shift in understanding, a new government or sudden increase in public interest on an issue (Baumgartner and

Jones, 1993). Time and resource constraints usually mean that only a limited set of issues can be focused on, however key events abruptly shift priorities. Under these circumstances, opposition to the status quo can arise amongst policy-makers and key decision-makers, thus increasing the opportunity for change and opportunity to influence actions. While MS theory suggests that the alignment of factors creates a window of opportunity, PET suggests those opportunities that arise as a result of a critical juncture are more sudden such as a specific event or crisis. PET theory suggests that an equilibrium may return after critical events or interventions, however it will likely be at a different level or have a different balance of forces.

Like MS, such opportunities may be a useful consideration for advocacy organisations and using these may help to initiate positive change as part of advocacy. As described by Masse Jolicoeur (2018), PET provides useful insight for public health actors, helping them understand the degree to which governments are more or less receptive to an issue, or evidence changes over time. One such consideration relates to the policy image, that is the knowledge and beliefs held about a policy, and how this may change over time (see 2.2.7 for more on framing), and the second relates to the policy venue, that is the body that holds the jurisdiction for change. Like with MS Theory, the interactions between these considerations may create a punctuation which in turn leads to change (Masse Jolicoeur, 2018)

2.2.4 Advocacy Coalition Framework

The Advocacy Coalition Framework (ACF) seeks to explain long periods of policy stability and maintenance of the status quo (Sabatier, 1988). Rather than focusing on a specific institution, it focuses on the organizations and actors which form a policy sub-system on a given topic (Sabatier, 1988). It suggests that a wide range of actors form coalitions based on shared ideological beliefs rather than any other type of 'functionality' and use research and information to challenge the beliefs of opposing coalitions through a process of 'policy orientated learning' (Sabatier, 1988). The beliefs of the dominant coalition are reflected in the status quo (Mahoney, 2008).

'Deep core beliefs' held by coalitions, such as the beliefs held on the role of government in policy and issues of rights and power, are mostly resistant to change. However, according to ACF, a major policy change can occur when 'policy core beliefs', such as those beliefs on issues of regulatory versus voluntary, priorities, the best policy instruments and the market role in policy, may change within the dominant coalition as a result of gradual accumulation of new information through policy orientated learning (Sabatier, 1988). The original ACF literature also attributes change to government change or other external shocks (Sabatier, 1988), while later versions suggest change can occur as the result of a process of negotiation between coalitions, when both are dissatisfied with the status quo but

differences in core beliefs prevent agreement on the specific action required. These negotiations are typically mediated by a policy broker, often a high civil servant or other government official, to aid a consensus being reached which can in turn lead to change (Sabatier, 1988, Nedergaard, 2008).

Criticism of ACF which are relevant to this research include the focus on periods of stability rather than change, the emphasis on the beliefs as the driver of collective action, rather than shared patterns of coordination, and lack of focus on strategies in relation to the policy process and policy cycle (Cairney, 2012, Schlager, 1995). In response to these criticisms later iterations of ACF have identified potential 'guidance instruments' which can be used by coalitions as part of advocacy. These include targeting policymakers or officials within elected bodies or administrative agencies, affecting public opinion via the media, altering target group behaviour via demonstration or boycotts, altering the perceptions of policy-relevant actors or by producing knowledge and information through research and expertise (Sabatier, 1999). However, these updates still fail to explore the extent to which strategies influence the coalitions and policy change, and if and how non-dominant coalitions can achieve change.

2.2.5 Collective action and Social Movements

Collective action refers to action and engagement between groups that come together in response to common grievances (Olson, 1965, Truman, 1951). An important component of collective action is 'resource mobilisation' which describes the benefit of aggregation, mobilisation and organisation of resources across networks to help achieve goals (Olson, 1965, Olson, 2008, McCarthy and Zald, 1977). An important benefit of resource mobilization is to help counter resource imbalances and help those that are resource poor to achieve their goals (Edwards and McCarthy, 2004). Resources in this instance extend beyond financial resource and can include labour capacity, allies, media, points of leverage, membership base, communication, science and access to celebrities or experts (McCarthy and Zald, 1977). With the top 10 food companies sharing a revenue of \$450 billion (Shilly, 2009), it is widely accepted that corporate interests have more power than NGOs, which is at least in part due to the financial resource available to them to undertake the range of activities described in Chapter 1 which can disrupt the policy making process (Perl and Hamill, 2017). With this in mind, mobilising and sharing resources between public health NGOs can help to overcome some of this resource disparity.

Social movements (SM) are one type of collective action focused on a social issue, typically at a community level and involving under-represented groups in society (Benford and Snow, 2000). Traditional social movements are associated with the working class, focused around contentious issues and economic and class issues (Tarrow, 2001). However, newer Movements emerged towards the end of the 20th century which are driven by the middle class and grounded in cultural and value based grievances (Tilly and Wood, 2009), mistrust of the market and the state (Rucht, 1990) and a critique of

post-industrial society and its emphasis on production (Offe, 1990). Such a model fits in with the public health conflicts described in the previous chapter.

Like other theories described here, Social Movement theories explore issues of political opportunity, and, similar to ACF, is based on the premise that collective action can be used to capitalize on this. (Tarrow, 2012) A key difference between coalitions in ACF and collective action described in SM literature is what holds the coalition members together. While ACF is rooted in the idea that beliefs bring coalitions together and are highly resistant to change, Social Movement theory describes coalitions as forming on a more ad hoc and fluid basis (Pijnenburg, 1998). Social Movements typically do not reflect the organised advocacy carried out by NGOs and other organisations which is the focus of this research, however some of the principles are valuable when exploring public health advocacy.

2.2.6 Agenda-setting, frames and narratives

The agenda-setting literature explores the different conditions and perspectives that come together to shape priorities and change. Agenda-setting reflects a cumulative impact of messaging and activities, as well as a competitive process due to there being a limit to the number of issues that be prioritised at any one time (Dearing and Rogers, 1996). Three main levels of agenda have been identified by Dearing and Roger (1996), including public, media and policy.

Linked to agenda-setting are the (related) concepts of policy images (Masse Jolicoeur, 2018)), policy narratives (Shanahan et al, 2011), framing (Borah, 2011) and storytelling (Stone, 2012), that is the way that different actors present problems and solutions, amplify a problem or reposition an issue to be more culturally and politically acceptable (Shanahan et al, 2011, Benford and Snow, 2000). This is relevant to advocacy as certain framings of issues may be more or less likely to have resonance with decision-makers. Frames have been described as an interpretive schema or package which can include metaphors, arguments and claims that can be used to bridge acceptable norms with less acceptable challenges of the status quo, often as part of social movements or advocacy (Snow, 1992, D'Anjou, 1998). Often, frames focus around the idea of 'victims' and 'perpetrators' to help amplify the causes and solutions which have been identified (Benford and Snow, 2000). The broadest frame which aims to generate widespread support for an issue has been described as a 'master frame' which can then be supported by a series of more specific frames that can be tailored towards the needs and preferences of specific groups to increase the likelihood of support (Snow and Benford, 1992). Storytelling refers to the way in which an issue is communicated to help define problems, influence debate and persuade others to act and commonly includes a range of symbols, characters, metaphors and numbers (Stone, 2012, Cairney, 2019).

Framing tensions have been described in public health and obesity, representing “a ‘tug-of-war’” between market interests which emphasise personal responsibility and take an individualised perspective to the causes and solutions of the PHN grievances faced, and public interests which highlight the cause in terms of the wider commercial, social and economic drivers, and thus focus on the need for upstream solutions and state intervention (Dorfman and Wallack, 2007). Saguy and Rieley (2005) identified a number of specific frames commonly used for obesity, largely focused on morality issues over scientific issues and relate to issues of blame, causes, risks and rights. In obesity and nutrition here have been a number of calls to shift the framing from individual responsibility towards one which focuses more on the political, social and economic drivers (Dorfman and Wallack, 2007, Ralston et al, 2018.)

Similar divisions in the way policy debates are presented by different actors have been identified in other areas of public health such as alcohol Fogarty and Chapman (2011). In the case of tobacco, reframing smoking around passive smoking and thus the impact that smoking has on the general population not just those who choose smoke, has been cited as an important driver of tobacco legislation in Australia (Chapman and Wakefield, 2001).

Related to the concept of framing is the use of narratives for conveying information and communicating a story to gain support for a particular viewpoint (Shanahan et al, 2011, Stone, 2012). Building on the framing literature, as well as other avenues of work such as communications, marketing, neuroscience and psychology, Shanahan and colleagues (2011) developed a Narrative Policy Framework (NPF) to help explain how an actor, or coalition of actors, may tactically use narratives to stimulate change, strengthen opinions of those within the coalition and influence those with divergent opinion (Shanahan et al, 2011). A policy narrative has been described as “the life blood of politics” (Shanahan et al, 2011), communicated through the strategic use of language and symbols designed to share one’s own beliefs (McBeth et al, 2005). As described in Chapter 1, strategic use of certain frames and language is particularly pertinent for ‘wicked problems’ such as public health nutrition and obesity which have multiple actors, drivers, and ultimately lack of a definitive solution (Parkinson et al, 2011).

2.2.7 Section summary

This section has described a number of key political theories and perspectives of how policy change happens. Three common themes identified across these theories include opportunities, agenda-setting and coordination between actors. The way in which advocacy organisations can take advantage of opportunities, frame messages and engage with other actors is an important theme we will return to later in this thesis, alongside considerations relating to the policy context.

2.3 Advocacy tools, tactics and approaches

We now shift our focus from the political literature to the literature which focuses specifically on advocacy. A review of the literature on advocacy suggests a wide range of tools, tactics and approaches that have been used as part of advocacy. General literature from multiple disciplines are drawn upon in this section, supported by experiences in other public health areas such as tobacco, physical activity and nutrition. The review focuses on organisational advocacy, the focus of this research, rather than grassroots advocacy and on advocacy carried out by individuals, such as by health care professionals and patient. Similarly, literature focused on litigation advocacy is not included here as it is a form of advocacy which is primarily relevant in a US context. When exploring the approaches and tactics of advocacy it is useful to make the distinction between specific actions that make up advocacy and the advocacy strategy as a whole. This section therefore starts with reviewing some of the strategic considerations for advocacy before exploring some specific tactics and approaches in more detail.

2.3.1 Advocacy strategy

Advocacy is typically described in the context of political outcomes, requiring a flexible approach with resources allocated to react to external factors as required (e.g. McGuire, 2005). In a review of the advocacy carried out by an international alcohol NGO, the authors suggest that the flexible approach allowing them to respond to opportunities as necessary was an important component of the organisation's success (Blanchard, Shilton and Bull, 2013). Policy change also takes a long time which means that advocacy needs to take place over a period of time, requiring a long-term commitment and strategy (Daube, 2006).

A number of models and practical tools for planning and strategizing have been developed across a range of sectors, including business management and social justice advocacy (Start and Hovland, 2004, O'Flynn, 2012, Klugman, 2011). These tools range from context assessment tools, such as stakeholder analysis and SWOT analysis, through to communication tools focused on messaging and marketing, and finally to policy influence tools (Start and Hovland, 2004). Few have been studied in an academic context.

The development of a Theory of Change is one such model which can support the planning and strategizing of advocacy by focusing on the intended process or stages and the anticipated result (Start and Hovland, 2004, O'Flynn, 2012, Klugman, 2011). Theories of change are based on a series of assumptions about the outcomes that can result from specific advocacy methods, actions and strategies. While a potentially useful approach for NGOs and others who are planning advocacy, the reality is it fits a linear model of change (described previously) and risk oversimplifying what is actually a complex process. This point is particularly relevant to this research and is described later on. Outcome

mapping, developed by the International Development Research Centre (IDRC) builds on this to explore how results are expected to be achieved, who will be targeted and how it will be evaluated, through an iterative process (Smutylo, 2005, Earl et al, 2001)

Forcefield analysis was developed by Lewin (1943, 1951) as a way of demonstrating the multiple forces that influence a situation, building on an interest in power distribution at individual, family and group levels. Forcefield analysis was initially influential within psychology for child and family dynamics but rapidly picked up and applied within business management, where Lewin's recognition that forces will act both for and against change was highly relevant, particularly in organisational studies. Although in some senses a simplistic and one-dimensional representation of how forces compete and how their relative imbalances will influence a situation, forcefield analysis can be a useful tool for mapping the various forces in a given context to help map what the forces are present, something which we pick up on in Chapter 7.zsz

An important strategic consideration which is highly relevant to the research presented in this thesis is whether or not an NGO works 'inside' or 'outside' the formal policy arena (Mahoney, 2008). Inside advocacy has been described as those activities which "aim to influence political outcomes through direct interaction with decision-makers" while outside advocacy has been described as advocacy activities which "aim to influence outcomes by putting pressure on decision-makers through the mobilisation of public opinion" (Dellmuth and Tallberg, 2017). Outside advocacy engages a range of other actors and techniques to communicate a message instead, or as well, as targeting policymakers directly (Kollman, 1998). A key component of advocacy relevant here is the role it plays in generating public support and mobilising citizens on a policy or issue (Shanahan et al, 2011, Gen and Wright, 2013, Kollman, 1998), This may be seen in the context of communicating the public support with policymakers (signalling) (Kollman, 1998) and/or building on support where issue interest already lies (Rasmussen et al, 2014)

Table 2.1 is adapted from Brinsden and Lang (2015) and highlights some of the key differences between the purpose and function of inside and outside advocacy, and how this influences audience, media strategy and type of advocacy tactics undertaken. It can be noted that outside advocacy is more focused on awareness raising and agenda-setting (2.1.8), while inside advocacy is more focused on supporting policy development. This distinction will be revisited in later chapters of this thesis.

Table 2-1: Inside versus outside approaches to advocacy

	'Inside' track or formal advocacy	'Outside' track or informal advocacy
Purpose of advocacy	To win change through formal channels	To change the terms of the debate from outside of the system
Preferred mode	Negotiation	Prepared to confront norms
Horizon	Short-term and specific	Long-term framing
Audience	To influence key business or government mandarins	To win public support and mobilisation
Media strategy	Not needed except to protect reputations and influence	Key to amplification
Main methods	Consultations, roundtables, advisory boards, meetings, collaborative research	Campaigns, media, petitions, lobbying, stunts

Source: Brinsden and Lang, 2015

Gen and Wright (2013) proposed a theoretical framework linking different components of advocacy to potential outcomes and impacts, within a logic model context. Connections between actions and anticipated outcomes were mapped as a way to communicate the advocacy process, as well as interactions, across different components of an advocacy strategy. As recognised by the authors, the frameworks provide no weighting to different actions and their role in change, nor do they capture individual issue dynamics.

Several specific tactics used in advocacy have been identified in the existing literature. Drawing on the general literature, as well as four specific organisation case studies (Webster et al, 2014, He et al, 2014, Blanchard, Shilton and Bull, 2013, Moore et al, 2019), some common key tactics and approaches were identified, which include the use of the media, research, working with others and the role of NGOs as a watchdog. Some of the literature related to each is described in turn below.

2.3.2 Research

The use of research and evidence-based information has been highlighted in the literature as an important component of advocacy (Webster et al, 2014, Christoffel, 2000), especially when focusing on evidence-based advocacy where advocates want to establish themselves as having expertise and credibility in the field (Berry, 2000). Where there have been public health wins, a clear evidence base on the problem, intervention effectiveness and exposure of industry tactics can be seen which allowed for a clear public health policy to be implemented (Chapman and Wakefield, 2001). The role of evidence in advocacy is explored in more detail in later chapters of this thesis.

2.3.3 Watchdog role

One unique research role of advocacy NGOs that is rarely seen by individual or community advocates is their role as independent ‘watchdogs’ that hold decision-makers from government and industry to account for their action or commitments against WHO guidelines, CSR commitments and public health messaging (Szper and Prakash, 2011, Aldashev et al, 2015, Mamudu and Glantz, 2009). This is particularly relevant in the context of changing corporate practices, a key part of advocacy described by Freudenberg (2005), but is also used in the context of government negotiations such as those seen in tobacco control (Mamudu and Glantz, 2009). Drawing on Kraak and colleagues (2014) accountability framework, NGOs have a particularly important role in the taking and sharing of account to stimulate action (Lobstein et al, 2013), however how this information is, and could be, used most effectively communicated in advocacy is largely unexplored (Brinsden et al, 2013a).

A watchdog role has been adopted by public health organisations to monitor companies in a number of ways, from comparisons between companies for their general commitments to nutrition and specific surveys on nutrient content of food, through to awards based on company action and academic benchmarking against global policies (Brinsden et al, 2013a). INFORMAS, a key influence of this thesis as described in chapter 1, is one such example of a strategic monitoring framework for both government through the Food-Epi (Swinburn et al, 2013b) and businesses through the BIA-Obesity framework (Sacks et al, 2019). There are a number of other examples, for instance Lang and colleagues (2006) explored the progress and performance of industry actions against WHO guidance while the Access to Nutrition Index (ATNI) ranks and rates company actions according to according to range of criteria related to internationally recognised nutrition policies and based on self-reported data.

2.3.4 Networks and alliances

Networks and alliances amongst civil society actors have been recognised as becoming increasingly important in the political landscape as groups seek to find common ground to achieve their goals (Acosta, 2012). Advocacy networks, alliances and coalitions were a common feature of advocacy cited in reviews of tobacco advocacy (Daube, 2013, Mamudu and Glantz, 2009), as well as physical activity advocacy (Blanchard, Shilton and Bull, 2013) and nutrition labelling (Moore et al, 2019), amongst others. Having leadership and a shared vision was highlighted as particularly important for advocacy (Blanchard, Shilton and Bull, 2013, Moore et al, 2019). Drawing on the experience of tobacco control advocacy, Daube (2013) argued that coalitions are an important part of advocacy which helps to overcome a powerful opposition.

Networking and forming coalitions has a range of benefits, including message alignment, visibility, signalling to policymakers that an issue has a large amount of support, and for pooling resources (Mahoney and Baumgartner, 2015). This is particularly important as different actors have been

described as serving different roles when generating and disseminating information. Gladwell (2000) for instance describes different types of people, including those who know a large number of people (connectors), information specialists (mavens) and those with powerful negotiation skills (salespeople). Similarly, some actors are well respected and have good connections with the policy elite and will likely focus their advocacy at a more institutional rather than radical level (Onyx, et al 2010). Often these actors are 'policy champions' who have 'expert knowledge' in the field and may be invited to be part of formal government processes, for instance in a government advisory capacity, thus providing advocacy opportunities within formal mechanisms (Devlin-Foltz et al, 2010). Alternatively, those actors who are powerful communicators can disseminate the messages emerging from the research to try and influence positions and agendas, and thus operate more 'outside' the system through the use of various frames and stories related to the issue (Shanahan et al, 2011).

Keck and Sikkink (1999) describe a typology of the different types of tactics which can be used as part of advocacy networks, with an emphasis on the type of politics these seek to influence. These include the use of information (information politics), storytelling and communication (symbolic politics), access to powerful actors (leverage politics) and efforts to hold actors to account and oblige action (Accountability politics), reflecting the range of actions that be undertaken when organisations work collectively. However, they do not address how the networks are structured, or how resources allow them to sustain their structure

2.3.5 Media

The use of the media as part of advocacy was also a common theme in the existing literature on advocacy and public health advocacy (Dorfman and Krasnow, 2004, McGuire, 2005), and in many cases drew on the experience of tobacco control advocacy (Chapman, 2004, Lane and Carter, 2012). While often described as a component of advocacy, in other cases 'media advocacy' was referred to as a key category of advocacy (Jernigan and Wright, 1996, Chapman, 2004). Media advocacy has been described as a strategy for public health which can be used to elevate an issue and stimulate public debate and as a means for advocates to strategically communicate a story or issue from a public health perspective (Wallack et al, 1993). The use of the media in advocacy has been discussed in the context of both agenda-setting and in framing messages from a public health perspective (McCombs and Shaw, 1972, Shanahan et al, 2011, Dorfman and Krasnow, 2004), both of which were described in section 2.2. Media may be a useful tool for increasing empathy on a topic, for instance studies have shown that media coverage on obesity often focuses on childhood obesity as it is considered an easier way to get public support for the issue (Hilton et al, 2012). The use of media in advocacy differs from mass media campaigns as it targets policymakers and the public in order get support for an issue rather than

attempting to achieve behavioural change in the population through education (Dorfman and Krasnow, 2004).

Media advocacy is recognised for having played a key role in tobacco control and policy around the world by supporting campaigns and community action, having cumulative beneficial role over time and for helping to raise the profile of the issue and keep it in the public and policymaker eye (Chapman, 2004, Jernigan and Wright, 1996). New forms of media and communication such as the internet, blogs, Facebook, Twitter and YouTube have been highlighted for their potential to provide important low-cost opportunities for advocacy and new opportunities for advocacy (Hefler et al, 2013, Guo, 2014). The way in which the media is used in PHN advocacy is explored in later chapters.

2.3.6 Lobbying

The actions described in the preceding sections all relate to ways in which advocacy organisations can try to influence policies, and particularly the role they play in setting agendas and raising awareness about issues. Reflecting on the inside versus outside schema described in section 2.3.1, these are largely ways in which organisations can act outside of the formal system. Lobbying however refers more to the specific actions that can be carried out to directly target government, and particularly government officials. While broad engagement may include consultations and contribution to advisory groups (Gen et al, 2013), lobbying primarily focuses on direct engagement with key decision-makers, ministers and others (Onyx et al, 2010). Lobbying has been described as having the “potential to promote democratic participation and can provide decision-makers with valuable insights, as well as facilitate stakeholder access to public policy development and implementation” (OECD, 2014). However, the same authors go on to reflect that it is often perceived in a negative way which may result in “undue influence, unfair competition and regulatory capture to the detriment of fair, impartial and effective policymaking” (OECD, 2014). This is particularly the case in the context of commercial lobbying and behind the scenes contact, negotiation and befriending of senior decision-makers that is often seen and can result in business interests being prioritised over public interests. This is a useful consideration in the context of this thesis which primarily explores the role of advocacy in government policy change.

2.3.7 Section summary

The methods and strategies described here help to build a picture of some of the types of activities and strategic considerations of NGOs that have been previously identified in research of advocacy and which an advocate may undertake to influence decisions made by the policy elite, whether it be that of government or corporations. Much of the literature drawn on here has focused on advocacy actions which are driven by the NGOs themselves and which can be described as being outside of the system and play a role in awareness raising and agenda-setting through a variety of means and for a range of targets. The tactics and approaches that have been described will be explored throughout the rest of

thesis in the context of PHN advocacy and will help to inform some of the discussion presented in chapter 7.

2.4 Measuring and evaluating advocacy

This final section explores the ways that advocacy can be measured and evaluated, a key area of interest for this research alongside clarifying the role of PHN advocacy. Evaluating advocacy has been recognised as an emerging competency for health promotion practitioners as part of goal setting, strategy development and monitoring (Fagen et al, 2009), as well as important for helping to build trust with funders, and to build understanding of what change has occurred as a result of action (Devlin-Foltz et al, 2012). As highlighted in chapter 1, the idea of measuring advocacy builds on the logic that understanding the progress made provides an opportunity for assessing and reassessing actions to improve effectiveness (Fagen et al, 2009). It is widely recognised that this is a lack of good evaluation models for advocacy which can aid understanding of the impact of advocacy (Coates and David, 2002, Gill and Freedman, 2014, Fagen et al, 2009, Reisman et al, 2007). This section identifies some of the existing advocacy planning frameworks and evaluation frameworks that have been identified from the literature. Some of these draw on public health specifically, while others draw on the broader advocacy literature. The types of frameworks have been broken down by types, including planning frameworks, evaluations, campaign analysis and quantified approaches, before reflecting on the gaps in current frameworks and some of the challenges of measuring advocacy.

2.4.1 Accountability frameworks

As described in chapter 1, accountability frameworks provide a basis on which to hold actors to account for their responsibilities and activities. The basis of these will be key areas of work for the actor to be held to account, as well as a series of indicators to judge performance and/or progress. While no specific accountability frameworks for advocacy exist, the following sections go into detail about some of the existing planning, monitoring and evaluation frameworks that exist for NGO advocacy.

In addition, it is possible to identify some of the different civil society responsibilities that are included in government guidelines, such as those produced by WHO. For instance, the WHO's report on Ending Childhood Obesity, states that 'Civil society can play a critical role in bringing social, moral and political pressure on governments to fulfil their commitments' (World Health Organization, 2016). In the WHO Global Strategy on Diet and Physical Activity (2004), civil society was cited as having a role in leading grassroots mobilisation, raising diet and physical activity up the public agenda, dissemination information through networks, advocating for health promoting programmes and health education campaigns, organising events, monitoring and working with other stakeholders including private sector, and support putting knowledge and evidence into practice (World Health Organization, 2004). While

these are just two examples, they highlight some of the responsibilities by which civil society can be held to account for their activities within the context of supporting the implementation of global guidelines on diet and health and also some of the expectations of civil society in this space.

2.4.2 Planning frameworks

Planning frameworks link to the Theories of Change described in 2.3.1 and provide a list of actions which have been identified as being key to advocacy. Two examples of such frameworks in public health advocacy were identified in the academic literature which highlight components of successful public health advocacy.

Moore and colleagues (2013) developed the ‘Kotter Plus – 10 step framework’ for guiding and identifying necessary steps for effective public health advocacy (See Box 1), building on the Kotter 8 step process for leading change and the experience of the Public Health Association Australia. Many of the items listed link to those tactics described in section 2.3, including the notion of coalitions and relationships, framing and messaging and agenda-setting. However, despite being described by the authors as a “framework for measuring or evaluating the likely success of an advocacy intervention” (Moore, Yeatman and Pollard , 2013), the authors do not provide a basis on which to evaluate such actions and therefore the success or impact of advocacy.

Box 1: Kotter Plus – A 10 step plan

A series of steps identified to support planning of advocacy, drawing on a number of different strategic areas.

- Step 1: Establishing a Sense of Urgency
- Step 2: Creating the Guiding Coalition
- Step 3: Developing and Maintaining Influential Relationships
- Step 4: Developing a Change Vision
- Step 5: Communicating the Vision for Buy-in
- Step 6: Empowering Broad-based Action
- Step 7: Be Opportunistic
- Step 8: Generating Short-term Wins
- Step 9: Never Letting Up
- Step 10: Incorporating Changes into the Culture

Source: Moore, Yeatman and Pollard, 2013

Chapman (2004) also developed a similar planning framework for media advocacy based on the experience of tobacco advocacy, focusing on 10 considerations for advocates to consider in their planning (Box 2). Again, there is overlap with previous sections, particularly the emphasis on media advocacy and awareness raising activities. The framework provides an indication of what components

should be included in advocacy and may be useful in the planning phases of advocacy. Again, there is no evaluation component.

Box 2: Primer for public health advocacy

A list of key questions to consider when planning advocacy, incl. target audiences and messaging:

1. What are your public health objectives with this issue?
2. Can a win-win outcome be first engineers with decision-makers
3. Who do the key decision-makers answer to, and how can these people be influenced?
4. What are the strengths and weaknesses of your and your opposition's position?
5. What are your media advocacy objectives?
6. How will you frame what is at issue here?
7. What symbols or word pictures can be brought into this frame?
8. What sound bites can be used to convey 6 and 7
9. Can the issue be personalised?
10. How can large numbers of people be quickly organised to express their concerns?

Source: Chapman, 2004

In both frameworks, there is an assumption that having the identified steps in place will mean the advocacy is successful, however neither framework captures some of the wider considerations highlighted in the political literature which may support or hinder success (see section 2.2). Therefore, while helping to identify the role advocacy can play, they are limited in their value for ascertaining effectiveness. This issue is explored in more detail in later chapters.

2.4.3 Evaluation of change

Building on the planning frameworks, a number of attempts to evaluate change as a result of advocacy were identified in the literature. A key component of any measuring framework is the indicators that are used to judge progress or effectiveness. Hehenberger and colleagues (2013) suggest that these should be aligned with the goals of the organisation, SMART, clearly defined and used in conjunction with other indicators. Academic and grey literature suggests that advocacy evaluation is typically focused on three types of indicators – process, output, progress and impact (see Table 2-2). Process evaluation typically reflects on the actions taken, output evaluation focuses on the immediate results and impact evaluation on the bigger picture change and achievement of goals. These indicators capture the range of different components of advocacy which may be measured to build a picture of advocacy.

Table 2-2: Types of indicators for advocacy

Indicator	Attributes	Examples
Process indicators or outputs	<ul style="list-style-type: none"> Report on tangible activities and resources, rather than achievements (Hehenberger et al, 2013), considering both the quantity and quality of the actions (Laraia et al, 2003). Frequently used to evaluate advocacy as they are easy to calculate and are not linked to external factors, however may overemphasize actions over outcomes 	Resources, fundraising, collaborations, number of publications, specific activities, recruitment
Outcome indicators – short-term	<ul style="list-style-type: none"> Focus on the direct effect or changes that occur as a result of an activity but does not generally consider the degree to which advocacy has been able to meet long-term goals (Hehenberger et al, 2013) 	Number of downloads, media/ social media metrics and reach, signatories, supporters, leaflet distribution, website visitors, collaborators
Progress indicators - medium term	<ul style="list-style-type: none"> Focus on momentum or attitudinal shifts and help to identify milestones between outcomes and long-term impact. Often used interchangeably with outcome (Earl et al, 2001), but generally reflect more substantial changes 	Changes in public or decision-maker views; policy or message adoption; strengthened base of support and alliances; increased visibility of the issue; shift in social norms
Impact indicators - long-term	<ul style="list-style-type: none"> Relates to the attribution of outputs to longer-term goals or outcomes (Hehenberger et al, 2013). In the case of health, an impact indicator would likely refer to a reduction in disease or death at a population level. Impact indicators are important and useful when, for instance, a policy is implemented but you want to know if it has been a success (Stowe, 2001) 	Health outcomes, visible implementation of a policy, benefit to relevant citizen groups realised.

Source: Adapted from Brinsden and Lang (2015)

A number of specific evaluation frameworks for advocacy were identified which adopt a range of different indicators for change. For instance, Laraia et al (2003) identified 17 characteristics that can be used to evaluate capacity (degree of formality strategic plan), performance (efforts across individuals, social network, community, organization) and achievement (policy victories, ability to respond quickly, seen as a leader) in the context of an anti-hunger organization and their advocacy. The approach of this framework utilises a combination of process (capacity), outcome (performance) and progress/impact (achievement) indicators in order to evaluate advocacy at an organisational level.

Coates and David (2002) identified four broad considerations to help support the monitoring and evaluation of advocacy, also at an organisational level. These include measuring what the organisation values, ensuring that advocacy methods used are appropriate to the type of advocacy that is done, looking at the whole of advocacy and making an assessment of impact based on an organisational priority. In putting together these recommendations, Coates and David (2002) recognised some of the challenges of measuring advocacy, including that no one size fits all, it is a messy process and relies on

the cooperation with and of others. As such, they ensured the proposed considerations were framed around the organisations own goals as the starting point.

Keck and Sikkink (1999) have developed a framework which identifies changes in policy at various stages, including issue creation and agenda-setting, changes in positions or commitments, procedural change, influence on target actors and actual behavioural change in target actors. This recognises that advocacy is part of a process that is likely to gain momentum over time. It is a useful way to explore the progress that is being made on a policy issues but, like the planning frameworks, looks at advocacy out of context of the wider drivers of change.

Pelletier and colleagues (2013) adapted a number of indicators developed by the Consortium of Communication for Social Change in order to identify changes that may be expected to be seen if advocacy relating to communication and social change is effective, developed in the context of undernutrition and stunting (Box 3). This framework is based on a series of questions linked to the expected outcomes of a strong advocacy communication strategy, provides a guide for exploring whether advocacy has been effective against several key areas, particularly types of communication and level of dialogue. However, the questions do not link directly back to advocacy actions and thus would need further development to be used as a tool to understand the role of advocacy, and to measure or evaluate advocacy.

Box 3 - Indicators for social change in the context of undernutrition and stunting

List of questions developed to help ascertain change that resulted from advocacy in the context of undernutrition:

- Is there expanded public and private dialogue and debate on the consequences of childhood stunting?
- Is there increased accuracy of the information that people share in the dialogue/debate about the causes and consequences of childhood stunting?
- Do planned communication initiatives support people who are centrally affected by undernutrition to voice their perspectives in the debate and dialogue?
- Is there an increased leadership role being played by people disadvantaged by the issue of chronic undernutrition?
- Do debates and discussions on the reduction and prevention of childhood stunting resonate with major issues of interest to people's everyday interests?
- Do nutrition communication initiatives link people and groups with similar interests who might otherwise not be in contact?

Source: Pelletier et al, 2013

Gill and Freedman (2014) recognise that, on the one hand there is the perception that advocacy cannot be 'planned or measured with any rigor', while on the other a belief that it can be quantifiably measured. They suggest a mixture of evaluation, building on both quantifiable and qualitative insights

to advocacy. Building on a framework of public policy influence developed by Campbell and Coffman (2009), Gill and Freedman (2014) liken advocacy planning and evaluation to ‘climbing a mountain’ and suggest some planning and evaluation questions to help judge advocacy progress (See Box 4). This is a useful tool as a framework for understanding progress that is being made and allows for scope in relation to the specific issue and area being advocated on, and the particular point in time. It recognises end goals and milestones, and that progress towards an endpoint will likely be the predominant measures of advocacy. It recognises the need to change attitudes and for the organisation to have a presence in the field in order to be effective. It does not, however, provide a means to evaluate the advocacy overall, or a means to strengthen public health advocacy.

Box 4: Climbing the mountain of advocacy

Question orientated approach to planning and measuring advocacy, recognising different stages of the process

1. Attaining the summit
 - a. Planning – what is the ultimate goal, are we clear on venue and timeframe
 - b. Evaluation – did we achieve what we set out to do? Are there policy steps left to be taken?
2. Reaching the basecamp
 - a. Planning - What will move decision-makers, are there tactical efforts necessary to consolidate success or inoculate ourselves?
 - b. Evaluation - Are we gaining tangible milestones?, Are the final steps in sight?, Is the issue firmly cemented on the agenda?
3. Staging the climb
 - a. Planning - Have we developed a strong, tactically detailed strategic plan?, Do we know the “who, what, when, where, and why” of the campaign effort?
 - b. Evaluation - Was our theory of change correct?, Do we have clear indicators that we are shifting attitudes of key audiences?
4. Preparing for the climb
 - a. Planning: Do we have a good sense of the capabilities and capacities needed to succeed?, Are these capacities in place, or do they require development?, Is there a plan and organizational hub or network to do so?
 - b. Are advocates building a credible presence in the field? If this locus of work is new, are the background organizational and human capital elements being put into place?
5. Surveying the mountain
 - a. Does this issue demand a public policy intervention? does a short-, medium-, or long-term opportunity appear feasible? Are we ready to devote significant resources to an uncertain endeavour?
 - b. evaluation: have we adequately planned an approach and considered multiples scenarios? Will this algin without other strategies and programs long enough to stay the course?

Source: Gill and Freedman 2014

2.4.4 Organisational evaluation

Several organisations have developed their own practical frameworks for evaluation, particularly those working in the development sector such as Oxfam and Save the Children. Save the Children for instance

has developed a monitoring framework to help improve their accountability focused on their ultimate impact across five dimensions that affect children and young people. These include improving the lives of children, changes in policies that affect children, changes in children's participation and active citizenship, changes in equity and non-discrimination of children and changes in civil societies' capacity to support children's rights (Starling et al, 2004). Oxfam has developed a Global Performance Framework, which can be used to monitor the effectiveness of their work around the world. The Framework has six themes and effectiveness is measured according to the number of people reached through their work, for instance the number of people provided with humanitarian assistance, supported to understand hazards and uncertainty, reached to aid women empowerment, number of citizens and staff supported and given a voice, and the number of campaigns and initiatives supported (Oxfam, 2014). Both models are very organisation specific and could not be applied in this form elsewhere, though they do share the focus on impacting the lives and engagement of individuals as the main unit of measurement.

2.4.5 Campaign analysis

A common type of advocacy evaluation identified in the academic literature is campaign analysis which retrospectively reviews the success of a specific campaign organisation or advocacy on an issue, following a positive policy outcome. These types of evaluation typically take the positive policy change as the primary success indicator and then map the activities considered effective in supporting that change. For example, a number of academic papers were found relevant to public health, including on salt reduction (Webster et al, 2014, He et al, 2014), nutrition labelling (Moore et al, 2019), alcohol (Blanchard, Shilton and Bull, 2013) and tobacco (Chapman and Wakefield, 2001). In each of these the range of actions undertaken by each organisation are documented ranging from meetings held, media coverage, through to briefing papers and working with government. While this is a useful reflection, and one which can be helpful in identifying what may be useful for future programmes, they do not in themselves provide a framework on which to evaluate and measure advocacy in order to improve advocacy. There is also a risk of bias as the authors report on their own advocacy in each case.

Linked to this is the evaluation of specific activities that have been undertaken, either to assess an organisation overall or just one specific activity. One such examples in public health nutrition was an evaluation by Dodson and colleagues (2012) which looked at the quality of policy briefs used to disseminate advocacy messages. Dodson and colleagues (2012) analysed existing policy briefings on obesity based on a series of characteristics such as content type and readability in order to make a series of recommendations on how these could be improved, for instance using clear, concise and referenced messages and monitoring and evaluating the dissemination of the briefings. Media advocacy is another example of a specific advocacy action that can be measured. Dorfman and Krasnow

(2004) outline a number of ways this can be done, from measuring media reach and mentions in the media through to a policy change being successful or an organisation becoming a regular point of contact for the media on relevant issues. In the context of media awareness campaigns, campaign recall combined with intent to act on the messaging (Gibson, 2014). Other examples include measuring the engagement of champions in advocacy overtime (Devlin-Foltz et al, 2010). Such indicators may be useful for feeding into a more comprehensive matrix for understanding the role and effectiveness of advocacy.

2.4.6 Quantifying advocacy

The previous models and frameworks described throughout this section are largely qualitative and subjective measures of success, however one example of a quantified approach to measuring advocacy was identified from the literature. Donaldson and Shields (2009) developed a 24-point behaviour reporting scale to understand the advocacy actions of social service organisations and social workers in the US across three main dimensions - demonstrating influence and political skill, taking action, and identifying with and empowering clients. Across each of the 24 actions included in the scale, scoring is based on the number of times each action is undertaken by the organisation, thus providing an indication of the volume and range of advocacy undertaken (Donaldson and Shields, 2009). Such as model takes a unique approach in attempting to quantify advocacy and likely has particular value for comparing the actions of different organisations. However, as with the frameworks previously described, it lacks a dimension which captures the context and challenges of advocacy, instead placing an emphasis on volume of activities as the key indicator of success and impact.

Barkhorn, Huttner and Blaul (2013) also created a framework that aims to quantify the likely success of advocacy, primarily for the benefit of grant makers, or for us in the planning stages of advocacy. The framework or “rubric” is built as a checklist focused on internal conditions for a successful policy campaign which can be scored on a scale of 1-5 and includes the following components: the presence of a functioning institution to make the change, an open policy window, a feasible solution, a flexible advocacy strategy, strong campaign leaders, influential coalitions, a mobilized public, powerful inside champions and a clear implementation path (Barkhorn, Huttner and Blau, 2013). As reflected, this framework is more relevant to predicting the likelihood of success, rather than evaluating the degree of success that occurred.

While not an example of quantifying advocacy per se, one example of attempting to run an RCT on an advocacy programme targeting food companies was identified. The RCT study, carried out by Trevena and colleagues (2017), compares the changes in behaviour in a group of food companies exposed to an

advocacy programme delivered by an NGO, compared to a control group of companies who were not exposed to the advocacy programme. Behaviour was assessed according to the mean number of public communications supporting healthy food, news articles, comments and reports, and communications with the NGO, the presence of a published nutrition policy, commitment to the Australian government's Food and Health Dialogue (FHD) and evidence of a salt reduction plan, however the interim process evaluation does not suggest an impact of such an NGO advocacy programme (Trevena et al, 2017). This approach to measuring advocacy effectiveness may be useful, particularly from an evaluation and improvement perspective however, given the broader dynamics of policy and decision making described through this thesis, it is unlikely that advocacy, particularly political advocacy, could be isolated in such a way that an RCT could become a meaningful tool for advocacy.

2.4.7 Evaluation of existing models

Few of the models described in this section are specifically focused on public health and, with the exception of the retrospective studies, none were for PHN advocacy. Furthermore, the models do not capture and address some of the challenges and complexities for advocacy which have been described throughout this chapter. The uniqueness of the Save the Children and Oxfam approach suggest that measuring PHN advocacy will require an understanding of public health nutrition itself, the challenges and opportunities, what is currently measured and valued and what is set to be achieved. The framing of Pelletier's (2013) measures of change are focused on stunting and undernutrition, however the concepts underlying these areas may be adaptable for other nutrition issues, particularly in the context of the communication and agenda-setting function of advocacy.

One commonality of the frameworks described is the focus on policy as the ultimate goal of the advocacy. A consideration that is missing from all of the frameworks is a reflection on the context within which advocacy takes place. This is addressed best in the frameworks that look at different stages of the policy process, such as by Gill and Freedman (2014), which reflects that different outcomes will be relevant at different points. Direct attribution will likely be challenging due to issues of attribution described previously, however a model which explores both attributable factors such as the actions undertaken and their reach akin to the retrospective evaluation examples, combined with the less attributable factors described in some of the question orientated evaluation models may be one way of building a comprehensive picture of advocacy. The political theories described in section 2.2 highlight some of these factors that may be worth considering in this context.

2.4.8 Challenges of measuring advocacy

As described in Chapter 1, when setting out the principles relating to this research, advocacy lags behind other sectors in having meaningful, strategic indicators of change in which advocacy efforts can be examined so as to improve and further goals. A number of key challenges for evaluating advocacy were

identified in the literature. These help to understand why evaluation frameworks to date are limited, but also provide some considerations when seeking to understand the role of advocacy and how it could be measured.

The first challenge relates to the complexity of policy making, a common theme throughout this chapter, and indeed one that continues throughout this thesis. The complexity of advocacy and what it sets out to achieve, does not lend itself to traditional evaluation approaches (Devlin-Foltz et al, 2012, Casey, 2011), needs to be flexible and reactive (Fagen, 2009, Coates and David, 2002) and as such rarely follows the original plan (Hehenberger et al, 2015), thus making it hard to judge progress in the context of political advocacy.

A second key challenge relates to the collective nature advocacy, and issues of attribution and contribution when so many actors and actions are involved (Devlin-Foltz et al, 2012, Mayne, 2008, Hehenberger et al, 2013, Chapman, 2001). It is challenging to ascertain which specific actions or actors were the key factor that stimulated change when so much of advocacy is not only done through collective action, but through informal collaborations such as sharing information which can be hard to track (Mahoney, 2008, Devlin-Foltz, 2012). In terms of advocacy, this is particularly problematic due to the frequency of coalitions and network building.

A third challenge for evaluating advocacy is a practical one related to the fact that policy change can take a long time to be achieved (Coates and David, 2002), and may exceed the reporting period of an NGO particularly where funding is involved (Chapman, 2001). Related to this is also considerations of “deadweight”, that is what would have happened without intervention, unintended consequences, and if and how the original situation was displaced by other potentially positive outcomes from elsewhere (Hehenberger et al, 2013).

Finally, it is necessary to acknowledge that in the context of political advocacy, advocates only have the power to influence, but do not have the power to make policy changes themselves and thus goals are almost entirely reliant on the decisions of other actors (Hehenberger et al, 2013, Casey, 2011). These challenges contribute to an assessment by Moe (1980) which suggests that impact of contribution is often overestimated.

2.4.9 Section summary

Exploring ways in which we can measure and evaluate advocacy is a key focus of this research, however as described there are currently no standardised ways to measuring advocacy, or indicators that could be used for this purpose. Where models have been developed, few have been focused on public health and, with the exception of retrospective studies, none were for PHN advocacy. Throughout this section, several attempts to measure advocacy and identify appropriate indicators have been presented,

ranging from planning frameworks which identify actions that should be taken and in the context of evaluation make the assumption these actions will support change, through to evaluation frameworks based on leading questions relating to changes that have been seen, to retrospective analysis and quantifying the effect of advocacy. However, as discussed there is no one agreed framework or model of measuring advocacy that has been identified, or agreement over the types of indicators that are most valuable in this context. Further, many of the models identified do not capture the wider context and rationale for undertaking advocacy as part of the measuring framework. The specific context within which some of the models identified have been focused (for instance in the case of Save the Children and Oxfam), suggests that an understanding of public health nutrition itself will be important for understanding the role and effectiveness of advocacy in this area.

2.5 Knowledge gaps

This thesis is focused on the role of PHN advocacy in policy change, how it can be measured and assessed for effectiveness, and the potential for this to be used to inform the development of a monitoring framework for PHN advocacy. This literature review has highlighted a clear gap in the knowledge related to PHN advocacy, having identified limited examples of existing research in this area. Furthermore, relatively little research on advocacy by NGOs in England focused on policy in England was identified, with much of the literature focused on the role of development NGOs which advocate elsewhere. These gaps present a challenge for developing a monitoring framework, as there are no standardised principles or indicators that would be included. This gap is one which this research will start to fill.

To compensate for this lack of research specifically on PHN advocacy, this chapter has presented a wide range of literature on issues such as policy change, measuring advocacy and advocacy strategies. As highlighted at the start of the chapter, it can be noted that overall the advocacy literature base is in fact very piecemeal, made up of a vast array of small-scale studies and case studies available on different kinds of advocacy in different settings around the world. It is unclear why this might be, but it may be due to a lack of interest or understanding of the role of advocacy, a lack of frameworks on which to assess or research advocacy, or it may be a reflection of the unique circumstances in which advocacy takes place thus making transferability challenging, or giving the perception that it is challenging. Regardless of the reason, the breadth of literature makes it hard to make generalisations from the literature which can be applied to PHN advocacy in England, without a more in-depth exploration of PHN advocacy in England itself.

The primary focus of the policy literature outlined in section 2.2 is on policy and policy change itself, rather than on advocacy, though still recognises the role of advocacy and sheds light on some of the

contextual factors that PHN advocacy organisations may face. Indeed, few political theories take advocacy strategies as their central pillar, rather focusing on advocacy as one part of a broader policy change framework. In order to explore and understand the tactics and measures of advocacy it was hypothesised that understanding the context of the advocacy and how advocacy can best respond to these various conditions is likely to be an important consideration for this research.

The advocacy methods and strategies described in section 2.3 help to build a picture of the types of activities that an advocate may undertake to influence decisions made by the decision-makers, whether at a government or corporate level, so as to achieve change. Combined, these actions make up an advocacy strategy. A particularly interesting concept is the differentiation between inside and outside advocacy as it adds a degree of meaning to the purpose of the tactics chosen, while also reflecting that a number of complementary actions may be taken, whether an organisation prefers an inside or outside approach. While a range of actions were presented, the tactics were broadly clustered into three core areas in the planning phases of this research:

- Agenda-setting which encompasses framing and the use of media
- Holding to account which encompasses the watchdog role described
- Coalitions which encompasses all the ways in which advocacy organisations can work together
- Direct engagement with government through lobbying and other formal means

However, it is unclear the degree to which this captures all of advocacy, and whether this would be applicable in public health nutrition in England. This is something that this research explores.

The primary aim of this research was to enhance our understanding of the role and effectiveness of advocacy and explore how to measure advocacy. Section 2.4 gave an overview of the various existing frameworks and models which can be used to plan and/or evaluate advocacy. Again, like the rest of the advocacy literature, there is few overlaps and no standardisation across models. There is a strong sense that the need for better measuring frameworks would be valuable, but that they come with many challenges.

To summarise, therefore, the aim of this research was to better understand the role and effectiveness of NGO advocacy in public health nutrition policy, how advocacy can be measured and, finally, to explore the potential for using this information to inform a monitoring framework for NGO advocacy. The political literature has also highlighted some of the additional considerations that may be useful here, particularly relating to the conditions and wider context within which advocacy takes place. The literature review has identified a gap in our current knowledge around the role of PHN advocacy in England and a need to explore it in more detail, including the wider context, in order to better

understand its role and how we can measure its effectiveness, and thus build a monitoring framework. Given the nature of the existing research, it was decided that a broad exploration of the types of activities carried out as part of PHN advocacy, perceptions of PHN advocacy, the conditions faced and the actions which are considered effective and ineffective would be the best approach for this research.

The following chapter describes the research approach and methods used for this research and sets up the remainder of this thesis.

3 Methodology

This chapter presents the methodology used for the research, including the methodological framework, epistemological and ontological perspectives and provides details of the methods that were used. Qualitative research methods were used, primarily drawing on the experiences in England from three public health nutrition policies (labelling, marketing and salt) and four NGOs working on public health nutrition. A combination of methods, including semi-structured interviews and document analysis of grey literature from campaigning groups and government agencies, were used to answer each research question to aid triangulation and validation of the findings.

3.1 Introduction

The starting point for this thesis was a concern about the gap between the state of public health nutrition in England and the actions taken by government and businesses, with a particular interest in the role that NGO advocacy can play in shaping PHN policies, and how such advocacy can be measured. As highlighted in chapter 1 a number of policies, strategies and recommendations exist on food, nutrition and obesity, and yet rates of poor diet and disease prevalence continues to at best remain high, at worst continue to increase. Government implementation is weak and there is a strong industry lobby counteracting public health messages. As described in Chapters 1 and 2, there is limited existing research on advocacy in nutrition or food. Research on advocacy in general is piecemeal, and standardised indicators of effectiveness have not been developed. Theories related to policy change tend to take policy as their focus, with limited examples of exploring the process through the lens of advocacy and the role it plays. Identifying core aspects of effective NGO PHN advocacy will provide valuable insight into the PHN advocacy movement and how it can be measured which in turn and may help put it in a better position to help shape policy and ultimately improve population diets and health.

This research had both academic and practical motivations, seeking to better understand NGO advocacy in the context of political theory and policy change, as well as to develop a practical tool which could support NGOs and enhance their advocacy. To address the issues identified in chapter 1 and 2, the primary scope of this work was limited to advocacy carried out by NGOs on nutrition policies in England. However, the political structures and balance of power held by the devolved nations in the UK is complex and presents some challenges when focusing research on England and its Westminster-centred decision-making structures and culture. As such, while England has been used as the primary focus point for this research it is done so within the context of the UK, recognising that much of the policymaking in England dictates the wider UK policy and subsequently the policies in the other nations. This means that both UK wide and England's policies are explored as appropriate, but national policies from Wales, Scotland and Northern Ireland are not. In addition the 'national' level of England's policymaking was focused on, rather than the complex and multi-level decision-making power that exists

between Westminster and the cities, regions, and local authorities, reflecting that a large proportion of the food and nutrition policies that impact people's lives are determined at a national level. Furthermore, until the Brexit referendum, a degree of decision-making was also negotiated at an EU level, however this was also not explored in detail except where it had specific relevance to one of the policies explored. For similar reasons, the scope of advocacy itself that was focused on in this research was also kept quite narrow, focusing on advocacy carried out at an organisational level by NGOs working in public health nutrition, rather than exploring grassroots, corporate or international advocacy, and advocacy carried out in other fields such as the environment or tobacco. The reality is that the advocacy net can be very wide – going from direct action or civil disobedience on the one hand to 'inside track' influence on the other hand. In this research, the focus was on what organisations actually do as part of an advocacy strategy. Keeping the scope quite narrow in this way allowed for a more in-depth exploration of some of the key issues and policies pertinent to this research, rather than being distracted by some of the more complex issues of governance and other structures.

3.2 Aims and research questions

The general aim of this research was to improve our understanding of the role and effectiveness of NGO advocacy in public health nutrition policy and a question of how it can be measured, with the broader goal of exploring the potential of using this to develop a monitoring framework for NGO advocacy in public health nutrition. Three specific areas of consideration in relation to advocacy were identified from the literature which are relevant to this research. These three areas – conditions, tactics and measures – led to the research questions and forms the basis of the research approach taken (Figure 3.1). This approach was taken to guide and inform this research in order to identify critical issues relevant to this research, and has been developed based on the assumption that advocacy tactics, measures and conditions are important considerations which can aid our understanding of advocacy and how we can measure it. Each of these three areas has a different literature base which can inform our understanding of each, and which will be used to help inform the interview questions and, more importantly, used to help interpret the findings in the discussion of the research (chapter 7).

Figure 3-1: Research Approach



Source: author

The three research questions that were identified and which underpin this research are shown below and reflect different 'pillars' of advocacy that were identified from the literature review, recognising that advocacy is multi-dimensional.

RQ1: What conditions support or hinder NGO advocacy in public health nutrition?

RQ2: What advocacy tactics are adopted by NGOs working in public health nutrition?

RQ 3: How can the effectiveness of public health nutrition advocacy be measured?

More detail on each of these questions, the objectives and how each was approached is provided in Table 3.1

Table 3-1: Research questions and objectives

Research Questions	Primary objective	Secondary objectives	Materials	Analysis method	Reporting method
RQ1 What conditions support or hinder NGO advocacy in public health nutrition?	Explore the political, commercial and societal conditions which influence public health nutrition policy in England	<ul style="list-style-type: none"> Explore the context in which public health advocacy has taken place in England Explore the conditions which did or were perceived to have contributed to the policy development process Compare and contrast the conditions identified for three policy spotlights 	General Public health policy <ul style="list-style-type: none"> Policy documents Academic literature Other grey literature 3 policy examples <ul style="list-style-type: none"> Policy documents Websites (Ofcom, FSA, Parliament, Department of Health, National Archives) Academic literature Other grey literature 	Literature review Content analysis of documents	Description of policy process, tables of conditions for each policy and a narrative supported by quotes presented according to whether the conditions identified were political, social or commercial.
			Interview transcripts	Thematic analysis (Inductive/deductive)	
RQ2 What advocacy tactics are adopted by NGOs working in public health nutrition?	Compare and contrast the advocacy used by PHN NGOs and explore how this compares to stakeholder perceptions of what advocacy is done.	<ul style="list-style-type: none"> Identify the goals of public health NGOs and compare their approaches to advocacy Identify tactics and methods of advocacy that are used by public health NGOs Explore the perceived value of advocacy and which tactics are considered most important Identify opportunities for NGO engagement in policy development Explore the relationships and engagement between NGOs and different stakeholders Explore how NGOs hold other actors to account and the value of such activities 	4 x NGO websites AND NGO annual reports 2000-2015 x 4 NGOs	Content/thematic analysis of documents	Summary tables and a narrative supported by quotes presented thematically according to goal of activity
			Interview transcripts	Thematic analysis (Inductive)	
RQ3 How can the effectiveness of public health nutrition advocacy be measured?	Identify ways in which the effectiveness of PHN advocacy is and can be measured.	<ul style="list-style-type: none"> Identify the measures used by NGOs in their reporting of annual activities Explore perceptions of what makes successful advocacy and the indicators used to measure this 	4 x NGO websites AND 4 x NGO annual reports 2000-2015	Content./thematic analysis of documents	Summary tables and a narrative supported by quotes presented thematically according to type of measure
			Interview transcripts	Thematic analysis (Inductive/deductive)	

In order to address the research questions and objectives presented in Table 3.1, the study presented here consists of three components which are summarised below and described in more detail in sections 3.4-3.6:

1. **Documentary analysis** of the annual reports and websites of four NGOs to identify what they are doing (RQ2) as part of their food and nutrition advocacy and how they measure their advocacy (RQ3)
2. **Document review** using academic and grey literature to explore the public health nutrition landscape and development process, broadly and through the lens of three specific policies, in order to identify key conditions that influence policy development (RQ1) and therefore the advocacy looked at in this research process
3. **Semi-structured interviews** to understand perceptions of NGO advocacy (RQ2,3) in terms of activities, roles and what makes effective advocacy, as well as their perspectives on the conditions influencing public health nutrition policy and advocacy (RQ1)

3.3 Research approach

3.3.1 Theoretical concepts

As described in chapter 1, this research drew on the perspective that disease risk and diets are the result of social, commercial and environmental drivers rather than the result of individual behaviours, thus requiring upstream government policies rather than downstream interventions focused on individuals (Swinburn et al, 2013a, Brownell et al, 2010). As such, the solutions required to improve diet and reduce disease at a population level need to be upstream (focused on policies and drivers), led by governments and implemented by businesses, rather than focused downstream on individual behaviour change and personal responsibility (Swinburn, 2008).

This research was based on the view that a number of different factors influence policy, including that a range of different actors play a role and are able to exercise power in different ways and to different degrees (Buse et al, 2012). This has become more evident with shifts towards a greater degree of multi-level governance and a *laissez faire* approach to government intervention.

NGOs play an important role in influencing policy decisions in favour of the public interest. However, their relative power is often weak due to the increasing power of commercial actors or “Big Food” (Stuckler and Nestle, 2012). There is a strong evidence base for the fact that an emphasis on downstream and individualised approaches, as well as self-regulation and *laissez faire* policies, is driven by and in the market interest rather than public interest (Stuckler and Nestle, 2012). This is a major barrier that NGOs find themselves up against when advocating on a variety of issues. This research

therefore draws on the notion that upstream policy change needs a strong NGO advocacy movement which is able to exercise a degree of power and influence in the policy making process.

As noted in chapter 2, the literature base on advocacy is both vast and piecemeal and is particularly weak in the context of public health nutrition. As such, this research drew on a range of different literature sources and concepts in order to aid exploration of PHN advocacy. From the political literature, it draws on some of the key concepts from theories such as Punctuated Equilibrium Theory (PET) (Baumgartner and Jones, 1993), Advocacy Coalition Framework (ACF) (Sabatier, 1988) and Multiple-streams theory (Kingdon, 1984), particularly around agenda-setting and coalition building. These theories all focus on policy change at the centre, with actors/advocacy as one component of change. Although few of these focused on advocacy as a central pillar, with the exception of the Advocacy Coalition Framework, they provide some insight into to policy change, and the potential role of PHN advocacy within this, which may be useful for exploring and explaining some elements of PHN advocacy.

In addition to the existing theoretical basis for policy change and advocacy, there is a body of research which explores the function and activities of NGOs/civil society in change and their function in society. These highlight the types of activities that NGOs undergo, in particular the range of activities that are undertaken. The literature on measuring advocacy and frameworks for effective advocacy highlight a number of key concepts relevant to advocacy and to this research. However, none of these are comprehensive in their approach. The broad framework for indicators, identifying process, outcome and impact presented in Table 2.2, will be used to explore the types of indicators that are or could be used for measuring PHN advocacy. The other frameworks identified will be reflected on in the discussion to aid understanding and interpretation of the findings of this research.

Accountability and monitoring frameworks help to identify where responsibilities lie, and progress made towards those responsibilities. They are useful for external actors to judge progress and credibility of other actors and are also useful for internal actors to monitor and measure progress in order to identify next steps and the impact that activities are having towards final goals. Accountability frameworks have been developed in a number of areas, as described in chapter 1, but no such framework exists for advocacy. Monitoring frameworks are commonly used in public health, particularly by WHO and national governments as part of their efforts to track progress, for instance to ensure progress on NCDs (World Health Organization, 2011). INFORMAS was set up to complement the existing work of the WHO, to provide a more detailed monitoring frameworks around policy implementation and actions by governments and companies. Advocacy is included in the INFORMAS framework, however, to date no work has been done to create a specific framework for NGOs within

this. Lobstein and colleagues (2013) describe some of the way in which advocacy groups can use information in advocacy, and grouped this into four key areas – awareness, benchmarking, surveillance and monitoring, but did not go into detail about the full breadth of actions that an NGO could, or should, be carrying out, or when each of these is appropriate. More work to explore what could underpin a monitoring framework for advocacy is therefore needed.

The key concepts that emerged from the literature and which have been identified as relevant to this research, include:

- Many advocacy actions have been documented, which have a range of roles including communication and agenda-setting
- Relationships in various forms are important for advocacy, whether it be NGO coalitions or engagement with other sectors
- Measures of advocacy and what is and is not successful are not well defined, and there are no existing accountability of monitoring frameworks for advocacy
- A range of external factors can influence policy change, often but not exclusively within the political system itself

Table 3.2 summarises some of these concepts and their potential relevance to PHN advocacy. Some of these– the range of tactics, relationships, benchmarking and defining success and failure – helped inform the interview questions.

Due to the diversity of existing research, and lack of research specially on PHN advocacy, this research primarily followed an open and inductive process, however it used these the theories and concepts presented in Table 3.2 to aid the discussion of the findings in order to help make sense of the findings and explore the relevance, similarities and differences to what the research identifies in relation to PHN advocacy.

Table 3-2: Theories and relevance to advocacy

Relevant theory / framework	Authors	Relevant concepts for advocacy
Advocacy coalition framework	Sabatier (1988)	Coalitions, relationships between actors, use of research and information, status quo
Punctuated equilibrium	Baumgartner and Jones (1993)	Opportunities, conditions, change
Multiple-streams theory	Kingdon (1984)	Agenda-setting, opportunities, conditions
Evidence based policy	Lindbolm (1959), Sutton (1999), Smith (2013) Greenhalgh and Russell (2009)	Evidence-based messaging, evidence-informed policy
Collective action	Benford and Snow (2000) Tarrow (2012) Olson (2008)	Relationships and collaborations between actors, resource mobilisation
Agenda-setting	Dorfman and Krawnow (2004) Shanahan et al (2011) Chapman (2004), Stone (2012)	Media, framing, messaging, narratives, storytelling
Accountability	Swinburn (2013), Kraak (2014)	Holding actors to account, monitoring progress of policy
Forcefield analysis	Lewin (1943, 1951)	Supportive and unsupportive drivers of change, status quo
Indicators for advocacy	Various – see Lit review, chapter 2	Different types – process, outcome, progress, impact
Planning frameworks	Moore et al (2013), Chapman (2004)	Core activities which underpin advocacy

Source: Author

3.3.2 Epistemological and ontological perspective

Ontological and epistemological positions help understand the perspective of the research and the way in which the researcher views and interprets the world, and thus how theory is used and/or drives research. Ontology specifically refers to the perspectives on the state of the world and what can be known about it, while epistemology refers to the perspectives on what can be known about the world (Marsh and Furlong, 2010). Positivists suggests that the world exists independent of our knowledge and that causal statements can be identified. Meanwhile, interpretivists suggest that the world is socially constructed and seek to apply meanings to different phenomena in order to interpret the world (Marsh and Furlong, 2010).

The author has been trained in a positivist way of thinking, having initially studied in the nutrition sciences. The initial line of enquiry, to measure advocacy, therefore came from a perspective that there is one reality, which can be researched and presented in a simplified and possibly quantified way. However, during the research planning process and following the review of the literature it became clear that this was not an appropriate approach for researching advocacy, and the situation is much

more complex than a solely positivist driven research would explore. The perspective and research approach taken therefore aligns more with that of critical realism.

Critical realism presents an alternative to both interpretivism and positivism, recognising that both perspectives are required to understand a particular phenomenon (Archer et al, 2016). Like interpretivism, it suggests that meanings can be applied to better understand the broader context, however, like positivism also suggest that there is reality which exists. By bringing these two perspectives together, it focuses on the belief that, while there is one reality, it is also important to explore the social construction of that reality, and the views and perspectives of different actors (Marsh and Furlong, 2010).

3.3.3 Qualitative research

Qualitative research has been described as a research design that “usually emphasises words rather than quantification in the collection and analysis of data” (Bryman, 2016). As described, the literature on advocacy is diverse, and a lack of standardisation makes it challenging to directly lift a framework or range of concepts which could be tested in a quantified way. A quantified approach would have been valid only if an existing accountability or monitoring framework for advocacy had been identified in the literature review, and/or if there had been extensive research on PHN advocacy in England or the UK. In this case, such a framework could have been applied to the context of this research and organisations scored according to the extent that they implemented various components included in the framework. Qualitative research however builds more on the idea of meaning and allows for the exploration of the who, what and why, rather than providing any measurement (Keegan, 2009). A qualitative approach was therefore chosen for this research in order to build on the existing gaps in our understanding and to explore a range of perspectives and meanings in order to build a picture of PHN advocacy and the different elements, something which could not be achieved through quantified research. Qualitative research is commonly used for research undertaken from a critical realist perspective.

3.3.4 Method selection

The methods used in this research draw on three main components – a review of policy development to capture the conditions and process towards change, documentary analysis of NGO reports to capture advocacy activities and semi-structured interviews to explore actor perceptions of advocacy and policy change, and helps validate some of the findings from documents.

When selecting the most appropriate methods for this research, a range of individual methods were considered, from in-depth case studies, observational studies and action research, through to interviews and surveys, document analysis and literature reviews. A number of these have been used by researchers when exploring advocacy in a range of contexts:

- Policy document analysis (e.g. Nedergaard, 2008, Breton et al, 2008)
- Case studies (e.g. Breton et al, 2008, Mwatsama, 2016)
- Semi-structured interviews (e.g. Breton et al, 2008)
- Stakeholder analysis (e.g. Weible and Sabatier, 2005, Knai et al, 2010)
- Interviews (e.g. Nedergaard, 2008)
- Surveys and questionnaires (e.g. Matti and Sandstrom, 2011)
- Multi-criteria analysis and other methods of ranking/rating (e.g. Ingold, 2011, Lobstein, 2010)
- Media reports and analysis (e.g. Shanahan et al, 2011)
- Discourse analysis (e.g. Mulderrig, 2017)

It was decided that, due to the limited existing research on PHN advocacy and the broad concepts covered by the research questions, the research required a broad and ‘big picture’ outlook which would require the merging of at least two methods. Many of the methods listed above were considered to be potentially valuable for this research, but in some cases too specific for the aims of this research. For instance, an observational study looking at just one NGO or an in-depth case study on an individual policy process would have provided a very narrow data set and would not have captured the wider conditions and insight, nor allowed for generalisations related to the broader PHN advocacy that this research wanted to achieve. Analysing the media or methods which explore the broader discourse on the issues may have added some valuable insight to this research on advocacy but would have been narrow in what it explored and would have enhanced understanding in specific areas of advocacy, but not of advocacy and its role and effectiveness overall. Quantitative methods such as multi-criteria mapping and ranking/rating processes were also considered, however it was decided that it would be premature to use such methodologies when the literature base for measuring advocacy and PHN advocacy is limited. However, such methods may be useful as part of future research projects which build on the findings of the present research. The methods that were eventually chosen were shortlisted due to their potential in achieving the breadth of insight considered important for this research.

Semi-structured interviews were chosen due to their value for capturing experiences and perceptions of key actors (Galletta, 2013). Semi-structured interviews allow interviewer-sought data to emerge but give space to the interviewees to make clear what they do, did and/or think. In this particular study, the interviews were used to capture the perceptions of different actors on the role and effectiveness of NGO advocacy in public health nutrition, and to ascertain insights into how advocacy can be measured. To complement and ‘ground’ the data from the interviews, documents from NGOs and on specific

policies were analysed to provide some validation to the perspectives offered in the semi-structured interviews. The policy review specifically drew on three policy examples and explored some of the political context in which the advocacy in those three examples and raised by this research took place. Meanwhile, a document analysis of the websites and annual reports of four NGOs working in the field provided insight into what advocacy NGOs report on doing and how they measure their actions. Both of these methods built on some of the principles of case study methodologies and process tracing to help build a picture of the role of NGO advocacy in PHN policy but did not adopt case study methodology. Full case study methodology was not considered appropriate due to the diversity of both policy and NGO examples to be studied and the fact that the primary aim of the research to explore PHN advocacy and its effectiveness in broad terms, with Stoeker(1991) suggesting the term 'case study' should be reserved for "those research projects which attempt to explain [sic]holistically the dynamics of a certain historical period of a particular social unit". More detail on each of the methods used in this research and the rationale for their use is provided in sections 3.4.1, 3.5.1 and 3.6.1.

When seeking ethics approval for this research, approval was also sought for two additional methods - surveys of NGOs and a follow up Delphi process – which were noted in the approval request form as 'may be used'. In both cases, these were identified as potentially useful additions to the present research due to their 'testing' functionality. However, the data collected from the primary three methods was considered rich enough for this thesis, thus it was decided not to add further elements. In the case of the Delphi there was also a number of resource restraints that made this an impractical addition, while in the case the additional detail on each of the NGO was considered unnecessary as the aim of this research was to build a general picture of advocacy, rather than a full account of each NGO. The research as carried out can be used as a platform for future research which may encompass some of the other methods identified in the previous paragraphs, including surveys and a Delphi process.

3.3.5 Method integration

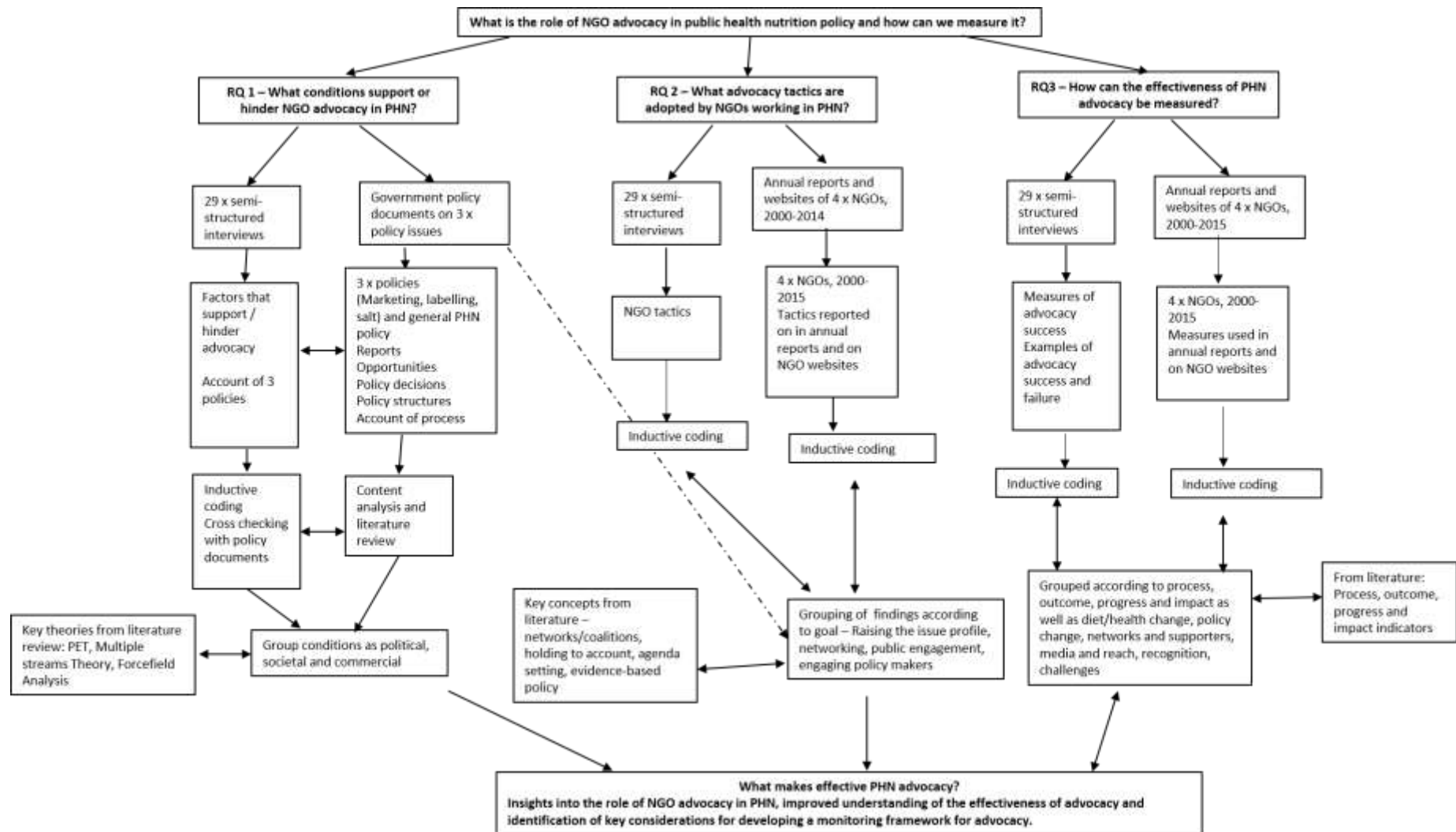
An overview of how the methods were integrated and the research process for each is provided in Figure 3.2. For every research question, two data sources were used, interview transcripts and documents. This was to increase validity of what was reported on, recognising that both interviews and documents have strengths and weaknesses (Bowen, 2009). In the case of RQ 1 the documents focused on policies, in RQ2 and RQ3 the documents used were NGO reports/website, and in all cases the semi-structured interviews were used to different extents. The different methods were carried out in parallel, and then combined for the purpose of writing up the findings and presenting a juxtaposition between the data sources. The different elements of this research can be seen as complementary, with documents supporting the weaknesses of interviews and vice versa. The analysis of policies and NGOs captures the real-life policy context and advocacy actions that are undertaken, and support and validate

the range of perceptions and reflections captured in the interview data. Meanwhile, although the documents are able to capture a degree of detail about the policy development process and opportunities for NGOs, it is likely that they do not capture all of the information. More details on the strengths and weaknesses of each of the methods is provided in sections 3.4.1, 3.5.1, 3.6.1.

It is common to use multiple methods in research to aid triangulation, and documents are commonly used alongside semi-structured interviews for this purpose (Flick, 2018). Using more than one method is useful when a contextual understanding is required (Creswell et al, 2011) and can help achieve a more complete picture than a single approach would allow (Kumar, 2019). Such an approach enables the breadth and depth of research to be extended beyond the scope of a single method (Greene et al, 1989) which may help to provide a fuller understanding, clarity and cross validation of the issues being explored, and helps to maximise strengths and counterbalance weaknesses of any one method (Creswell et al, 2011). By integrating more than one method in research it is possible to test dimensions in different ways so as to triangulate, validate and clarify findings which helps increase credibility and consistency (Creswell et al, 2011). Typically, the process of integrating methods, as described above, takes a 'mixed-method' approach which specifically refers to the integration of quantitative and qualitative methods (Creswell et al, 2011). However, in this case the integrated methods were both qualitative.

In line with the critical realist perspective, the use of both documentary analysis and interviews in the present study is particularly useful as it helps to connect the real life situations of what NGOs do to stakeholder perceptions about the role of advocacy in order add a narrative understanding to reality (Bryman, 2016, Webb, 1966). This research combines elements of descriptive analysis (what is being done) and explanatory analysis (why and how certain approaches appear to be effective) (Kumar, 2019), following an open, flexible, and unstructured approach to enquiry. This helps to map a range of different concepts which are pertinent to public health advocacy, and therefore which may be used to inform an accountability framework.

Figure 3-2: Integrating methods and research questions



Source: author

3.3.6 Timeline

This research was undertaken as a part time research programme. Studies were suspended for 14 months from April 2017- May 2018 for parental leave.

Phase 1: Scoping, literature review and research planning (2012-2014)

Phase2: Document extraction and interviews (2014-2015)

Phase 3: Data extraction and analysis (2016-2017)

Phase 4: Further analysis and write up (2018-2020)

3.4 Semi-structured interviews

3.4.1 Rationale

Semi-structured interviews were a key part of the research and were used to build a picture of the way in which different actors perceive and engage with NGO advocacy, how they view the conditions required for change, experiences of advocacy and policy change and the different definitions of success of advocacy. Understanding these perceptions and experiences was considered important for understanding the role and effectiveness of advocacy, as simply exploring what is done by NGOs would provide limited insight into advocacy effectiveness for stimulating or supporting change or potential areas of improvement.

Interviews are a commonly used method in qualitative research as they enable the researcher to explore judgements, experiences and perceptions in order to gain information that would otherwise not be accessible (Weiss, 1994, Galletta, 2013). A number of reasons to use qualitative interviews have been identified, including to develop detailed descriptions, integrate multiple perspectives, describe a process, develop a holistic description, learn how events are interpreted and identify variables (Weiss, 1994, Galletta, 2013).

There are a number of different types of interview, ranging from structured surveys through to in-depth interviews, focus groups and action research. Semi-structured interviews were chosen for this research to help explore the different perceptions and views of the participants and ensure a degree of depth was explored. There are a number of benefits to using semi-structured interviews for qualitative research, particularly the fact that they "aim to explore in-depth experiences of research participants, and the meanings they attribute to these experiences" (Adams, 2010). Unlike surveys and structured interviews, semi-structured interviews allow probing as needed to get the most out of the participant and to fully understand their perspectives. Meanwhile, the semi-structured nature also has the advantage of focusing on some key areas which are comparable between participants and minimises

the need for further rounds of research in order to get all the information required which would be necessary with a less structured approach.

However, there are also a number of challenges of semi-structured interviews. For instance, the degree of flexibility allowed in semi-structured interviews (compared to surveys or structured interviews) can create deviations between interviews which makes it more challenging to compare responses and analyse the extent of agreement or disagreement between participants, particularly in the case of anomaly responses. Similarly, the semi-structured nature of the interviews presents more opportunities for the participant to dictate the agenda, which further compounds the above point. In both cases, a question sheet (see section 3.4.4) is vital for helping the interviewer to remain on track and bringing the interview back to the questions. Sufficient piloting (see section 3.4.5) can also help to identify any areas of common deviation which can be mitigated or incorporated as appropriate into the final question sheet (Creswell et al, 2011). Interviewer bias has also been cited as a disadvantage of semi-structured interviews, due to the flexibility of the interviewer to rephrase and ask potentially leading or probing questions. Interview bias however is relevant in all interview types, and more structured interviews are more likely to include leading questions as they allow limited scope for the interviewee to answer in a way that is appropriate for them. Again, the question sheet is important here to aid the interviewer with question phrasing. Another potential issue with semi-structured interviews (and indeed all interviews) is a question about the degree of truth in the answers provided by participants (Roulston and Choi, 2018). This is a particularly pertinent question relevant to this research due to the nature of different actors, and the researchers own position working in NGOs. This is an issue that is challenging to overcome, however by using the interviews in conjunction with other methods as has been done in this research helps to validate some of the answers provided, as does interviewing a range of different actors.

3.4.2 Ethics

Approval from City University's School of Arts & Social Science's Ethics Department was received for up to 50 interviews (Appendix 1). The nature of the interviews and the actors who would be interviewed raised few ethical concerns. Four main areas of ethical consideration were identified as being relevant to this research, including consent, knowledge, right to not be involved and confidentiality. Explicit content was sought from all participants prior to undertaking interviews (consent). Where interviews were done by Skype, consent was emailed in advance of the call. As part of the consent form it was made clear to all participants that they add the right to leave the study and any data attributed to them could be destroyed upon request (right not to be involved). All participants were told about the research process, the purpose of the interview and how they would be used (knowledge).

Participants were promised full anonymity (Appendix 2) and all data collected as part of this research was stored in a locked drawer and password protected digital folders (confidentiality). The participants are referred to in this thesis by their sector only (See Table 3.3). A judgement was made for assigning each participant to a sector, with the one most relevant to the justification for the participants inclusion being used. Participants were given a chance to comment on the assigned attribution, but none disagreed with the authors' judgement.

The Ethics form (See Appendix 1) stated that participants would be informed if any direct quotes were to be used in this thesis, and that they would have the right to request a list of quotes should they wish. All participants whose quotes have been included in this thesis were informed via email once a full a draft had been written (December 2019). Implicit (no reply) or explicit (positive response) consent was given by 21 of the participants in the first instance, three of whom requested to see the quotes prior to approval to ensure they were truly anonymous. All subsequently approved the inclusion of the proposed quotes. Given the time lag between undertaking the interviews and writing up some participants had changed contact information. In the first instance, the original employer was contacted requesting a message be sent to the participant, if they had the information, as well as an internet/LinkedIn search to identify up to date information. This provided information and approval from one (1) further participant. Further follow up was not done and, due to the degree of anonymity offered and the wording of the ethics, a decision was made to include quotes for the outstanding participants (4). No quotes were shortlisted for the final thesis from three (3) of the interviews, and thus those participants were not followed up.

3.4.3 Sampling

Interviews were carried out with relevant stakeholders across the food and nutrition policy space to help answer research questions and address the objectives. Purposive sampling was used to select the participants. The following criteria was used by the researcher and supervisor to draw up a list of participants:

- Representative from an NGO known to work in public health nutrition and to have been active during the time period looked at.
- Representatives from the food industry, including manufacturer, retail and trade.
- Government employees or advisors, known to have been involved with Public health nutrition policies during the time period looked at.
- Other experts on NGO advocacy or with an interest in PHN for additional insight into the role of NGOs and to aid triangulation.

Recruitment took place via email in the first instance. In some cases, the initial introduction was done by the supervisor. A set text briefly describing the project was used to highlight the purpose of the interviews. Follow up emails were sent after 2 weeks and 4 weeks.

The response rates from different sectors are shown in table 3.3. A full list of participants and the sector description used for each is provided in Appendix 4.

Table 3-3: Response rates for interviews

Category	Description/ examples	Total contacted	interviewed	No response	declined	Lost in follow up	Response rate
NGO	Campaign, professional body, research, consumer	19	12	5	0	2	63%
Food industry	Retailer, manufacturer, trade body, ingredient, independent	13	6	4	1	3	46%
Government	Advisor, official, civil servant, arms-length	10	4	2	4	0	40%
Academia	Field expert, researcher	6	3	0	0	3	50%
Other	campaigner, consultant, media	11	4	4	2	1	36%
Totals		53	29	8	7	9	55%

Source: author

Of the 29 interviews, 26 were conducted face to face and 3 via skype. The face to face interviews took place at the interviewee's place of work, or other location suitable for them. Skype interviews were done with the camera on in order to help the rapport between researcher and participant, and to emulate face to face interviews as much as possible. Minor internet connection issues meant the skype interviews were slightly less free flowing than the face to face interviews, but overall, it was not found to hinder the interview process or the value of these interviews as data.

Participants were provided with participant information sheets via email, ahead of the interview as well as a summary of the question themes to be asked (Appendix 3). This decision was made following pilot interviews whereby interviewees appeared to struggle to think of advocacy successes/failures on the spot. All interviewees were provided the same core text prior to interview. The information was sent between 2 to 7 days in advance of the interview.

3.4.4 Interview Structure

The interviews were conducted using a semi-structured approach with an element of unstructured discussion which allowed the researcher to build an understanding of what was important to the person being interviewed. Interviewees were prompted on specific areas of work/experiences of the organisation known to the researcher if appropriate and they did not come up through the natural discussion.

The interview questions were divided into two distinct sections. The first section focused on what PHN advocacy seeks to achieve, who is doing it, what it entails and the relationships between different actors. This involved questions about the role and methods of advocacy, stakeholder interactions, the role of watchdog mechanisms and the definition of success in the context of advocacy from the perspective of each purposively selected participant. The second section focused on the effectiveness of advocacy to achieve change and the indicators used for this, with questions about examples of advocacy success and failure and personal learnings and experiences.

The interviews were primarily designed to investigate PHN advocacy from the perspective of the public health advocates themselves (the NGOs). All of the NGO participants were asked all of the questions, however for the other stakeholders not all of the questions were deemed appropriate and so were not included. Some of the questions were worded differently depending on the audience.

Table 3-4: Summary of interview questions

Asked of all participants	Altered for some	Not asked all
Define advocacy Examples of success / failure Role of benchmarking Role of NGOs Experience of salt/marketing/ labelling	How does NGO work with XYZ / How do you work with NGOs Key learnings on advocacy / key advice for advocates	Defining success Indicators used Questions on three policies

Source: author

Once examples of success and failure had been given, the participants were then prompted on the policy areas explored in the document review (see section 3.6) to understand how they perceived those policies and the advocacy surrounding them. In particular they were prompted on, the role of NGO advocacy, defining moments, challenges and the role of different actors.

Time restraints also meant that the questions in the guide were prioritised in some cases. In order to address the research questions that were prioritised included how you define advocacy, what role NGOs play, examples of successful/effective/helpful advocacy and examples of failed/ineffective/unhelpful advocacy.

3.4.5 Pilot studies

Four pilot interviews were carried out to assess whether or not the questions were right, whether they were giving the right information and whether there were any gaps in the information gained. They were also used as practice for the researcher.

The initial set of pilot interviews raised a number of concerns and questions, including the fact that a number of the proposed questions, including the ones on indicators, interactions and methods, failed to provide a detailed response from the participant. Furthermore, in order to get the detail required relating to questions about success and good practice more probing was needed in order to illicit a detailed enough response to help answer the research questions. When asking about success, it became apparent that it was not clear whether the success being asked about was that of the NGO or of the policy itself.

As a result, a number of amendments were made to the interview guide to address some of these issues, primarily in the form of clearer prompts for the researcher. For instance, participants were asked about the role of different stakeholders, specifically how they work together. When talking about success participants were probed on what was effective and why, the differentiation on the ultimate goal versus the specific goal, and the range of indicators that go with this. Similarly, in the case of failure, participants were probed on whether failure happens, if yes why and if not, why not. When discussing examples, participants were probed on salt, marketing and labelling if they had exhausted their own examples and not mentioned any one of them. This was to ensure some continuity with the other components of the research. Finally, while still maintaining a semi-structured approach, the interviews were adapted slightly to be less structured than planned to allow more insight into the context that the participant viewed the discussions that were being had.

3.4.6 Interview process

A question guide was used to direct the main areas of conversation, but this was not used to determine question order (Appendix 5). There were some prompts included in the guide for specific questions where needed to ensure conversation flowed and all areas were covered. The themes covered in the interviews closely related to the objectives focusing on some of the key issues highlighted in the literature review in chapters 1 and 2.

Overall, the interviews went well – interviewees seemed relaxed, were content to speak and offered substantive content. The flow was improved greatly following the amendments made after the pilot studies. In the majority of cases, the interviews proved useful for getting the broad perspectives sought to inform this research and to build an understanding of PHN advocacy, its role and its effectiveness.

The interviews with the industry representatives were the most challenging, and it was difficult at times to keep the interviews on track and to get answers to the questions posed. It was common for the discussions with industry representatives to move from advocacy to the policy issues themselves. In these cases, the interviewer allowed the interviews to slip into a more unstructured approach as a way of getting valuable insight and building rapport with the participant. The interviewer ensured that the participant was able to speak freely, but also ensure that the conversation came back to the prepared questions. One interview in particular was challenging as the interviewee was dismissive of PHN NGO advocacy and did not engage well with the questions resulting in little data being extracted. Another challenge related to the distinction between advocacy and policy outcomes. A reflection on this is provided in the findings (chapter 6). However, it did present a challenge in the interviews when seeking insight into the specific outcomes of the advocacy. The interviewer followed up with questions specifically on advocacy in order to get the responses needed.

3.4.7 Analysis of interviews

The analysis process for the interviews is shown in Figure 3.3. Interviews were audio-recorded using a Dictaphone. Additional notes were made throughout the interview. Clarification was sought as required. Following each interview, the interviewer made further notes reflecting on each interview in terms of the content itself as well as any key or interesting points or examples that were raised. Specific examples of policies, NGOs, people, papers, reports etc. that were identified by the participant were investigated and saved/documentated alongside the other information related to that participant.

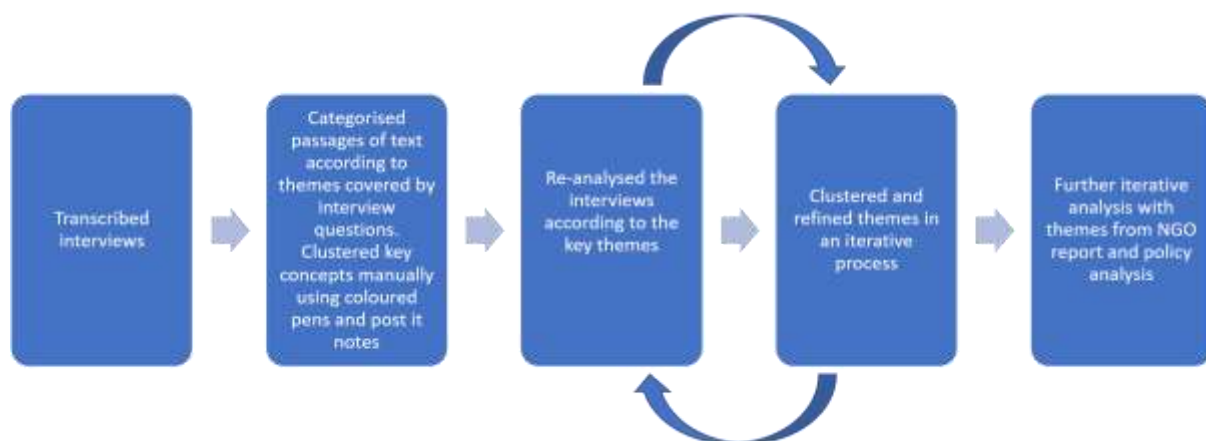
Interviews were transcribed by the researcher, with only minor adjustments made to clean up the text, for instance removal of ‘ums’. Other grammatical issues (and transcription typos) were dealt with only upon inclusion in the final text.

Transcripts were initially assessed using a deductive approach, exploring the different responses in relation to the question areas and theory – what advocacy is, what methods are used, what indicators can be used to measure, what success is and what failure is. Inductive analysis then followed, identifying further themes and clusters across the interviews.

Analysis was conducted manually using a range of different techniques, including the use of coloured pens and post-it-note’s to identify thematic clusters. The transcribed interviews were read, and colour

coded and annotated based on the themes of the questions. Key words were noted in the margins to help identify reoccurring themes. Each interview was analysed once in order to generate initial themes and clusters, and then again in light of the overall themes and concepts that emerged. Important quotes from the key themes were extracted and later used to develop the narrative and to answer the research questions. All data was stored and managed using Excel spreadsheets and tabs.

Figure 3-3: Analysis process for interview data



Source: Author

3.4.8 Interview bias

Interviewer bias was a potential area of concern. There were three main sources of this bias. Firstly, the researcher is employed by a Public Health NGO based in the UK and previously worked for one of the organisations represented in the interviews meaning they worked in a professional capacity with a number of the interview participants. It is unknown how this may have influenced the answers given, and also the way that the interview questions were asked, however it presents a risk of bias in the interviews. The unique position of the interviewer and the relationship to participants may also have meant that the interviews would not be reproducible. Furthermore, those that knew the researcher made assumptions of knowledge, and in turn the researcher on occasion inferred the meaning of specific statements when analysing the transcripts, despite full details not being provided. While the researcher is confident that accurate assumptions were made, it is fair to assume that someone external may not have made the same interpretations if they were less familiar with the issues being discussed. While these issues were hard to negate, the researcher made clear to all participants that the research was being done as part of doctoral research and all communication was done via University email addresses to aid distinction in the researchers roles. Clarification was sought during the

interviews when it was felt the information provided made an assumption of the interviewer's knowledge, although as noted this was not always captured during the interviews themselves.

In addition, a common challenge when conducting interviews is when clarification is needed on a question posed by the interviewer, and how the interviewer rephrases the questions to aid understanding. In responding, it is possible for an interviewer to guide the participants responses or prompt a specific responses. As much as possible the interviewer referred to the interview guide when asking for such clarification to avoid leading questions and maintain standardisation across the interviews.

3.5 Documentary analysis of NGO tactics and measures

3.5.1 Rationale

Documentary analysis of the annual reports of four NGOs was used to provide insight to the activities of NGOs and how they were measured. They also complemented the semi-structured interviews (3.4), as well as the policy reviews (3.6), by providing additional insight and to help validate and support some of the interviewee claims. Specifically, the documents described in this section were used to build a picture of what advocacy the four NGOs report on doing and the ways in which they measure their success, as well as to compare and contrast the activities and approaches taken by different NGOs in order to make generalisations about the overall advocacy undertaken by NGOs in public health nutrition. Retrospective analysis of an NGO to ascertain actions and changes that resulted was described in section 2.4.5 as one way that NGO advocacy can be reviewed.

Documentary analysis is a form of qualitative research that systematically uses documents to give meaning to or aid understanding of a particular issue and is commonly used in combination with other methods to aid triangulation (Bowen, 2009). A range of documents can be used in document analysis, this research focused on the official record of organization activities recorded in annual reports (O'Leary, 2014). Documents have a number of functions, including providing data on context and conditions related to a specific issue, raise questions that need to be asked in research, serve as a supplementary data source to build on the knowledge base, help track change and development of an issue, and can help verify findings and corroborate data (Bowen, 2009). In this case, the NGO annual reports primarily served to provide data on tactics and measures, but also helped to track change and verify findings from the interviews. Specifically, content and thematic analysis was adopted for this research to analyse and make inferences from the document text (Weber, 1990), with document content approached as a static, "docile container of knowledge" (Rapley and Rees, 2018).

A number of advantages and limitations of documentary analysis have been identified by Bowen (2009). Advantages include that it is an efficient method as it focuses on data selection rather than collection, documents are often readily available, documents are a cost-effective data source, and documents are not reactive and do not change with the research process. Limitations include that the documents may have insufficient details, and were not developed for the purpose of research, retrievability is sometimes low and there is a risk of biased selectivity. Bowen (2009) concludes that in most cases the advantages outweigh the limitations. These limitations were addressed in the present research by the use of multiple methods.

As described in section 3.3.4, the use of documents in this research builds on case study methodologies and process tracing. However, full case study methodology was not used on the basis that it would have led to a loss of breadth in favour of depth which would have made it hard to generalise and compare and contrast the multiple factors considered in this research.

3.5.2 Selection criteria and data sources

As previously stated, this research was interested in advocacy carried out at an organisational level by NGOs working in public health nutrition in England, rather than individual, grassroots, international corporate advocacy, or advocacy carried out in other fields of public health.

In order to decide on which NGOs to include in this research, purposive sampling based on two key criteria was used. Firstly, NGOs were considered if they were registered with the UK Charity Commission and were known by the researcher and supervisor to have advocated on at least one of the three policy issues focused on in this research (marketing, salt reformulation, marketing restrictions, see section 3.6). Secondly, specific NGOs were selected to ensure that the type and focus of the organisations looked at were varied. Four NGOs were included, including Which?, Consensus Action on Salt & Health (CASH), UK Health Forum (UKHF) and Sustain's Children's Food Campaign (Sustain's CFC), see Table 3.5.

The primary source of information used was the annual reports published by each NGO for the period 2000-2014, with additional information sought from the organisation websites as needed. These were retrieved from the NGO websites, Charity Commission website or, when those hosted on the website did not go far enough back, by request. In the case of UKHF, two 'impact reports' were used in addition to annual reports as these replaced the traditional annual reports and were therefore considered equivalent data sources. In addition to annual reports, the NGO websites were also used to identify additional information about the organisation using the 'about us' or equivalent section, and other relevant information such as documents, newsletters and the newsfeed. These were used to supplement the annual reports in order to help build a comprehensive picture of the NGO and acquire

more information about any specific activities identified in the annual reports when needed but were not directly used in the analysis. A summary of the NGOs and the documents used are in Table 3.5.

As noted in section 3.3.4, ethical approval was also granted for surveys of the NGOs. However, this was not considered necessary due to the breadth of information gathered from the annual reports, the detail gathered from the interviews and the fact that this research was primarily focused on building an overall picture of some of the NGO advocacy carried out in PHN rather than building a full account of each NGO using case study methods.

Table 3-5: NGOs included in the research

NGO and website	Type	Focus	Primary policy issues relating to nutrition	Summary of organisation goals	Documents used for analysis
Which? – established in 1957 as the Consumer Association www.which.co.uk	Citizens organisation	Citizen rights	marketing, labelling, salt	Described as existing to “make individuals as powerful as the organisations they deal with in their daily lives” [Www.which.co.uk] and seeks to achieve this by providing advice to help consumers make informed decisions, campaign to make people’s lives fairer, simpler and safer and ensure that services and products put consumers’ needs first so as to bring them better value. Which? has a number of active campaigns, supported by Which? policy positions on a range of policy issues. Food is just one issue that Which? works on through their campaigning.	Annual reports (03/04- 13/14): 11
Sustain: The Alliance for Better Food and Farming – established from the merger of two other organisations in 1999. Sustain’s Children’s Food campaign (CFC) , established to focus specifically on children’s food issues including marketing and school meals. www.sustainweb.org	Campaign alliance	Food and sustainability	marketing, labelling	Described as “the alliance for better food and farming advocates food and agriculture policies and practices that enhance the health and welfare of people and animals, improve the working and living environment, enrich society and culture, and promote equality”. It operates by running a series of projects and campaigns which address different parts of the food system. The specific campaign relevant to and used for this research is the Children’s Food Campaign which “champions children’s rights, parent power and government action to improve the food environment children grow up in”	Annual reports (02/03 – 14/15): 13
UK Health Forum (Née National Heart Forum) – established in 1980 (ceased operating in 2019) www.ukhealthforum.org.uk	Public health organisation	NCD prevention	marketing, labelling, salt	The UKHF describes its mission as to “work with and through its members to prevent disability and death from coronary heart disease (CHD) and related conditions in the UK. In order to achieve this, the NHF operates nationally and internationally” [www.ukhealthforum.org]	Annual reports (06-15): 8 Impact reports: 2
Consensus Action on Salt & Health (CASH) – established in 1995 www.actiononsalt.org.uk	Single issue campaign	Salt reduction	salt (labelling)	CASH is a charity set up by medical professionals, specifically focused on population salt reduction. The organisation was set up to challenge a particular government decision and seeks to ensure salt is made a key government policy, that food is reformulated to contain less salt and that population salt intake declines. CASH’s targets industry, government, and consumers. Their website describes themselves as ‘successfully working to reach a consensus with the food industry and Government over the harmful effects of a high salt diet, and bring about a reduction in the amount of salt in processed foods as well as salt added to cooking, and the table’	Annual reports (03/04 – 14/15): 12

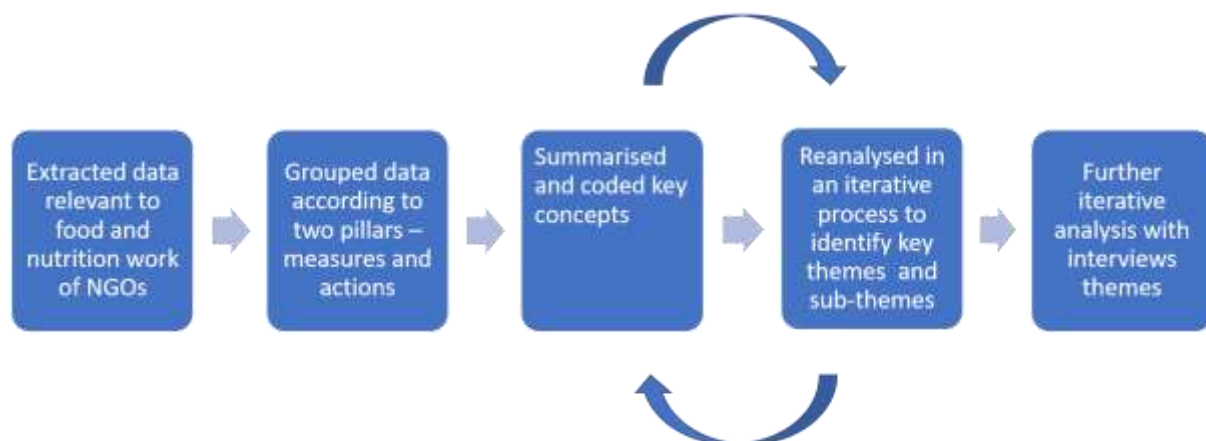
Source: Author

3.5.3 Analysis of NGO documents

The analysis process for NGO documents is summarised in Figure 3.4. Relevant information from the annual reports was extracted manually using the 'find' function in Adobe/Word. The words used for data extraction were food, nutrition, labelling, marketing, salt, obesity, and non-communicable disease in order to identify text specifically related to advocacy in these areas. The relevant passages of text were extracted and divided according to two of the research questions – tactics (RQ2) and measures (RQ3). Extracted text was then grouped thematically based on emerging themes on an iterative basis. This was initially done on an NGO by NGO basis, and then the data was combined. Codes were derived through a combination of both deductive and inductive coding. Further analysis was then done using interview data.

The primary purpose of this analysis was to identify the range and types of advocacy carried out, as well as explore themes and patterns within and across the NGOs. Details regarding measuring and evaluation of advocacy were also sought to help build a picture of what the NGOs hoped to achieve as well as how they measured their impact. The extracted text passages were analysed to help identify key themes and issues that emerged in relation to the RQs being addressed. The first phase of analysis was done per NGO, and then redone integrating the findings from across the four NGOs.

Figure 3-4: Analysis process for NGO studies



Source: author

The findings from this document analysis of NGO reports are presented throughout chapter 5 and 6. Comparisons have been made between NGOs as appropriate, but on the whole the findings have been grouped together in relation to the broad themes identified.

3.5.4 Assumptions

Most notably, an assumption has been made that NGOs report on their activities comprehensively, are transparent in their activities and that they publicly report and evaluate their actions, and therefore that annual reports are a good source of information for analysing activities and measures. As described previously, it is likely some information was not captured, and that the documents used in this case were not written with the researcher as the intended audience (Bowen, 2009). An assumption has also been made that all forms of advocacy can and were reported on. However, advocacy can also involve a 'off-record' activities such as certain elements of relationship building and conversations, and as such some activities may not have been captured. For comparative purposes, an assumption was also made in the research design that sufficiently comparable information would be accessible across the NGOs. While this did not have a significant impact on the overall data, it did limit the extent of direct comparison between NGOs that was possible and ruled out any form of quantitative comparison of the methods undertaken by each NGO.

3.6 Review of policy processes

3.6.1 Rationale

A review of the policy process drawing on available documents was also carried out as a complementary to the previously described methods. Reviewing the policy process was considered an important component of the research for aiding understanding of the role that NGO advocacy plays in policy development and considering the conditions that support or hinder PHN advocacy. This builds on the notion that change occurs within government institutions or by other politically elite actors described in Chapter 1. While there has been some research done to assess the effectiveness or potential effectiveness of nutrition policies on health, there is limited research documenting the policy development process itself, and particularly on exploring the opportunities for public health advocacy by NGOs to influence the decision-making process in food and nutrition. These opportunities are assumed to influence the advocacy tactics adopted by NGOs.

The main advantages and limitations of document analysis were described in the previous section (3.5.1) and are also relevant here. The document and literature review described in this section primarily served to provide data on context and conditions, but also helped to track change and verify findings from the interviews. As with the NGO reviews, the policy reviews also drew on content analysis, and did not embrace full case study methodology.

3.6.2 Sampling

For this research, it was decided that three different formal policy processes from within food and nutrition would be explored to better understand the role that NGOs can play in this process. Using multiple policy examples allows for the processes to be compared and contrasted and increases the validity and generalizability of any conclusions drawn. The three policies explored are referred to as

policy ‘spotlights’ to reflect that full case study methodology was not used. The spotlights will primarily provide data to help answer RQ 1 (conditions), however, some insight was also used to inform some of the findings relevant to RQ2 (tactics), specifically in relation to NGO engagement with government and opportunities for NGOs to engage in the formal policy process.

Through the lens of each of the three spotlights, the policy review provides information on the process of policy development through the lens of the formal policy process, identify formal opportunities that arose in that process for advocacy and identify key conditions that influenced the development of each policy. These were primarily used to identify the opportunities for advocacy as part of the development process, and to explore the wider conditions relevant to the policy.

An initial review was carried out to identify key policy documents such as white papers, policies and strategies so as to build a broad picture of public health nutrition in England, building on previous work (e.g. Jebb et al, 2013). This was complemented by a further document review for three specific policies using academic databases and perusal of the internet. Public documents were initially located from the relevant websites of government departments (See Table 3.6), followed by snowball sampling and information gathered in interviews, in order to identify the development process for each policy. The three policies were used to give more depth to the exploration of the policies which would not have been possible had only the broad PHN context been explored in this research. In addition, it provides an opportunity to compare and contrast the conditions in order to ascertain the extent to which conditions influencing policy, and thus advocacy, are similar or different depending on the topic being advocated on. Having three policies to draw on helps to ground the analysis and presentation of findings in some reality. These complement the interviews by providing a reality to corroborate interview perceptions of conditions.

3.6.3 Search criteria and data sources

A number of nutrition policies had been implemented in England at the time of this research, including marketing restrictions, front of pack labelling, salt reduction, school food guidelines and government buying standards, as well as a government-led 5-a-day campaign to promote fruit and vegetable consumption.

Purposive sampling was used to select the policies that were focused on in this research, using the following criteria:

- Implemented in England (or whole of UK) during the period 2000-2015
- Example of a nutrition policy recommended at a national and/or global level
- Collectively the policies would represent different policy types e.g. voluntary vs legislated
- Policy which has clear government and industry actions

Three policies were selected in order to allow for some comparison of examples, while remaining a practical amount of research to undertake for this thesis. The three chosen policies are listed below, with more information provided about each in Chapter 4.

- i) Salt reduction programme and targets (2004)
- ii) Marketing restrictions to children (2008)
- iii) Front of pack nutrition labelling voluntary scheme (2013)

While other policies met some of the criteria identified, these three were found fulfil the criteria of having clear food industry actions. The three policies differ in unique ways, for instance salt reformulation is a voluntary policy, marketing restrictions are regulated and traffic light labelling fits in with a wider EU policy framework. Traffic light labelling and salt reformulation were both incorporated into England's Government's Public Health Responsibility Deal, while marketing restrictions were not.

A document review was carried out for each policy spotlight, focusing primarily on grey literature (websites of the Department of Health, Food Standards Agency, Ofcom, Parliament), supported by academic literature (EBSCOHost, PubMed, Google Scholar). The news pages as well as publication sections of the relevant website(s) were searched, along with webpage listings from the National Archives for the relevant time period. Snowball sampling was used to locate further documents relevant to each spotlight. The primary focus was on documents from the year 2000-2015, however it became evident that earlier government strategies and reports would also be useful for contextualising the emergence of the policy discussion relevant to this research and thus have been included where appropriate.

Two main types of documents were sought from the review. Firstly, policy documents and white papers making recommendations relevant to the policy spotlights were identified in order to map the emergence of the issue as a policy priority within the government and thus better understand the conditions surrounding the policy development. The information from these documents was then used to inform the next phase which was to collect records of the policy development process in order to identify key opportunities for NGO (and other stakeholder) engagement across each of the three spotlights. Documents included meeting minutes and reports, consultation documents and responses, position papers, strategies, committee lists and other documents describing the process of policy

development. Academic literature was included if it reported on the process for any one of the policies. Relevant webpages were identified using the tabs and search functions, documents were read, and key information related to each of the objectives was manually extracted.

Summary documents of the responses to consultations were considered sufficient to identify the opportunities for engagement, who these opportunities were available to and the policy development process. Further information could have been accessed through freedom of information requests, but it was not considered necessary for the scope of this research and purpose of the policy spotlights for this research.

Table 3-6: Sources of information used in policy spotlights

Source	Website	Document type	Spotlight
Food Standards Agency	www.food.gov.uk	Webpages Newsfeed Meeting minutes Consultation documents e-news Annual reports	Salt, marketing, labelling
Department of Health	www.dh.gov.uk	Webpages Publications	Marketing, Labelling
Government archived websites	www.nationalarchives.gov.uk	Webpages	Salt, marketing, labelling
Parliament	www.parliament.gov.uk	Webpages	Salt, marketing, labelling
Ofcom	www.Ofcom.org.uk	Publications Consultation documents	marketing
Advertising Standards Authority	www.asa.org.uk	Publications	Marketing
Responsibility Deal	www.responsibilitydeal.dh.gov.uk	Webpages Meeting minutes Pledge documents	Salt, labelling
EBSCO Host PubMed Google Scholar	n/a	Academic papers	Salt, marketing, labelling

Source: author

Search terms and inclusion criteria

For the food marketing spotlight the key search terms used were (food OR nutrition) AND (marketing OR promotion OR advertising) AND (UK OR England). Documents were excluded if they referred to social marketing, non-food TV advertising, sponsorship, in-school marketing, health claims and labelling, out of context of advertising restrictions for food, reviews of efficacy or of the problem. Key

sources of information were the websites of the Food Standards Agency (and archived pages), Department of Health (and archived pages), Ofcom and ASA.

For the salt spotlight the key search terms used were (salt OR sodium) AND (reformulation OR reduction OR targets) AND (UK OR England). Documents were included unless they referred to non-dietary salt, labelling of salt, non-sodium salt, salt replacers, reviews of efficacy or of the problem. Key sources of information were the websites of the Food Standards Agency (and archived pages) and Department of Health (and archived pages).

For the labelling spotlight the key search terms used were (nutrition OR Front+of+pack OR nutrition or traffic+light or GDA or labelling) AND (UK OR England). Documents were included unless they referred to back of pack labelling, non-nutrition labelling such as country of origin or best before date, reviews of efficacy or of the problem. Key sources of information were the websites of the Food Standards Agency (and archived pages) and Department of Health (and archived pages).

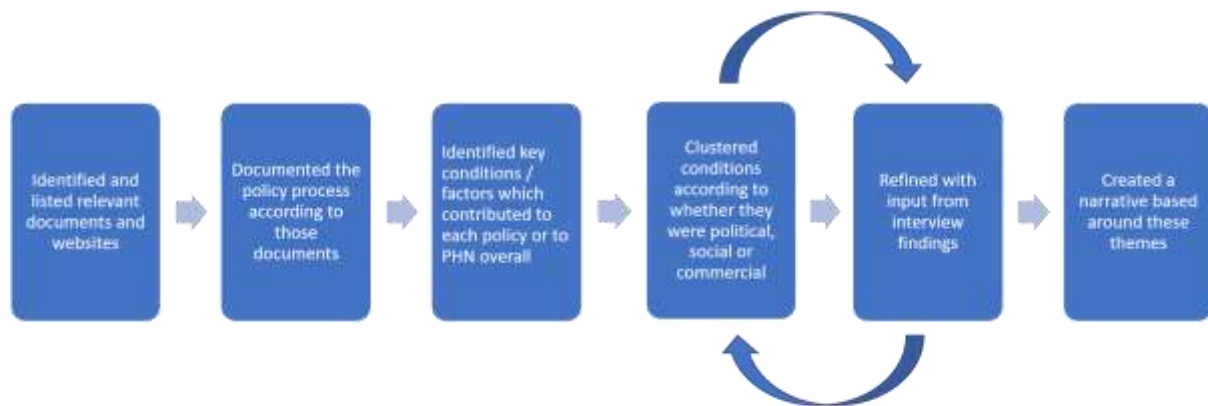
Across the three policy areas, more than 20 government reports and strategies were identified as being relevant to the research, along with an excess of 50 other sources, including academic papers, webpages, minutes, newsletters, and other documents. There was significant overlap of the relevant government strategies and reports, which tended to make multiple recommendations across all three policy areas. Accounts of the development process and opportunities for advocacy were primarily identified from webpages and referenced documents. The government reports and strategies identified are presented in Appendix 6 and drawn upon in chapter 4 (section 4.2).

3.6.4 Analysis of documents

An overview of the process for analysis is given in Figure 3.5. Documents were identified according to the criteria described above and were used as a source of information. Phase 1 of analysis focused on identifying the emergence of each of the three issues, as shown in government white papers and strategies, and was in turn used to identify which institutions led the process of development so as to inform Phase 2. Phase 2 focused on identifying the formal policy development process, in particular the advocacy opportunities within this process and the key conditions which influenced the process. Key factors that were identified for each policy were clustered according to type of condition, and these were refined with relevant information from the interviews where participants had reflected on aspects of the particular policy.

This analysis was first carried out for each of the three policy spotlights in turn before comparing the findings. For each policy, relevant information was manually extracted from documents and websites and collated in an Excel file accordingly and organised chronologically.

Figure 3-5: Analysis process for policy studies



Source: author

3.7 Data analysis

As previously described, a combination of semi-structured interviews and documents were chosen for this research in order to aid triangulation and validation of the research findings and to complement the strengths and weaknesses of the different methods used. This use of more than one method was the primary source of validation, chosen over alternative options such as using multiple data reviewers which was not considered practical owing to the nature of this research as part of doctoral research.

Data was analysed according to each of the three research questions of this study, using a combination of content analysis (in the case of policy documents) and thematic analysis (in the case of interviews and NGO document). This was based on an iterative process using primarily inductive coding.

Thematic analysis is one of three main ways that qualitative data can be processed and presented. This includes developing a narrative of a situation, identifying patterns and using them to write the findings or by indicating the frequency of occurrence (Braun and Clarke, 2006, Kumar, 2019). Thematic analysis has been described as a specific qualitative method (Braun and Clarke, 2006) and as an analysis process which can be used across different methods (Boyatzis, 1998). A theme captures important patterned responses throughout a dataset in relation to the research questions. Thematic analysis in this case has been used to provide an overview of the entire dataset which, although risks losing some depth and complexity, has been identified as useful when investigating an under-researched area (Braun and Clarke, 2006).

Themes were identified through a combination of both deductive and inductive coding and analysis, drawing on the literature and data itself in order to interpret findings and give meaning to data in a way

that speaks to the reader (Burnard et al, 2008). A process of decontextualization (initial coding), recontextualization (compare to original data), categorisation (bring subjects together, apply meaning) and compilation (conclusions) was undertaken, building on the work of Bengtsson (2016). The researcher undertook their own data extraction and interview transcriptions as part of the decontextualization process.

Initially, a very long list of themes were produced for each method for each research question. Through an iterative process these codes grouped, reanalysed and narrowed down to a final list both within each method and for each research question broadly. In the case of both document analyses, the initial grouping was dictated by the two relevant research questions (e.g. two groups, one on tactics and one on measures) and then expanded before being narrowed down. In the case of the interviews, the coding was initially done according to the key areas covered in the interviews in order to begin the process: Definition of advocacy; Tactics; Relationships; Examples of success; Examples of failure; Indicators.

The following sections go into more detail about the integration of data for each research question and the relevant findings chapter.

3.7.1 Research Question 1 (Conditions)

The data sources used to answer this question served different purposes. The semi-structured interviews enabled a reflection on the different perspectives of the conditions which support and hinder effective advocacy, the factors NGOs may need to consider in the planning, delivery and evaluation of their work, as well as participant reflections on important factors related to the three policies. The initial academic and grey literature review helped the researcher to build a picture of the overall public health nutrition landscape in England, while the review of the documents and websites related to the specific policies helped to validate and add depth to what was discussed in the interviews.

An initial search of academic and publicly available grey literature was undertaken to identify key public health nutrition policy documents from the period being explored. These were ordered chronologically and summarised to allow the researcher to build a picture of the changes over time. Following the interviews, further documents were identified through a snowball process. This also included an in-depth perusal of the websites of key institutions, including Ofcom, FSA and Department of Health. These were analysed with the specific purpose of identifying conditions or critical factors which contributed to the policy development, and which would have been faced by those advocating on the issue.

The interview transcripts were analysed to identify key conditions, both in relation the three policies examples, as well as those conditions which are more general to advocacy and public health nutrition. The analysis was done all together, keeping note of those examples specific to each policy. The quotes were initially analysed inductively to identify themes and sub-themes presented in section 4, before being grouped according to whether they represented social, commercial or political conditions. The sub-themes were identified through an iterative process of refinement.

The codes from the interviews were then used to group the findings from the document review, identifying examples of the conditions to help validate the findings. Additional themes from the documents were also noted. Overall, there was little conflict between the sources, although the nature of the literature review meant it provide more information related to political conditions than the other two areas.

A key challenge for analysis was a result of the broad framework used, and the wide range of variables this is reflected on in chapter 8.

3.7.2 Research Question 2 (Tactics)

The analysis on NGO advocacy tactics drew on data from the NGO annual reports and websites, as well from the 29-semi-structured interviews. The two data sources provide complementary perspectives on advocacy, with the NGO reports providing information on what is done, and the interviews providing more insight as to the value of different activities.

The initial analysis process involved identifying relevant passages of text from the reports and interview transcripts and extracting these from the main text. In the case of the NGO reports, relevant text was considered to be anything related to activities undertaken by the NGO in public health nutrition. For the interviews, the same process was used. Most of the interview data was from questions related specifically to tactics and holding to account, however different examples of tactics also emerged throughout the interviews in relation to relationships and interactions with other actors as well as in relation to determinants of success and failure.

Once the data was extracted, it was coded inductively through an iterative process in order to capture the full range of tactics. Initially, each of the NGOs was done separately before further refinement was done across the NGOs. Once a refined set of codes were established, the datasets were pulled together to allow for further refinement. This made it easier to reflect on the similarities and differences between the individual NGOs and interviews, while also allowing for overarching themes to be identified. A decision was made by the researcher to further refine, cluster and frame the tactics identified according to the purpose they served for the NGO. This was to help link the results to the overarching aim of the research, link the research questions and support the development of practical implications of the

research. This decision was made with the overall aim of this research in mind and the interest in developing a monitoring framework for advocacy. It was decided that by refining the categories to be more action focused there was greater scope for linking to the conditions and measures.

The codes identified were used as the themes upon which to structure the chapter (chapter 5). The process of segregating the different parts of advocacy was challenging, with a number of areas being interlinked and overlapping. In these cases, a decision was made by the author of where the information fitted best, and it was then referred back to as appropriate in other sections, both within and between findings chapters. For instance, the idea of message consistency within NGO coalitions is relevant both in the context of NGO advocacy messaging as well as building networks, while messaging which highlights public support is relevant in the context of raising the profile of an issue and representing the public. Furthermore, a lot of the inside advocacy opportunities were reflected on in the previous chapter focused on conditions, due to the political nature of these.

3.7.3 Research Question 3 (Measures)

As with the previous section, the analysis of measures builds on the NGO reports and interviews as the main data source. Again, the two data sources provide complementary perspectives on relevant to the question, with the NGO reports providing information on how advocacy is measured and reported on, and the interviews providing more insight as to the value of different measures.

The initial analysis process involved identifying relevant passages of text from the reports and interview transcripts and extracting these from the main text. In the case of the NGO reports, relevant text was considered to be anything related to measuring or reporting on the effect of activities. For the interviews, the same process was used. Most of the interview data was from questions related specifically to measures and determinants of success and failure, although examples of the way that NGOs were reflected and assessed in interview responses were also found.

Once the data was extracted, the types of indicator (what was being measured) was determined inductively to capture the range of measures that were used according to each data source (See tables 6.1 and 6.2 in Chapter 6). In the case of the NGOs, each was initially done separately before further refinement was done across the NGOs. The indicators identified were labelled according to whether they were a process, outcome or impact indicator, drawing on Table 2.2.

Once a refined set of indicators were established for each data source, the datasets were pulled together to allow for further refinement and analysis. Analysing them separately and then together made it easier to reflect on the similarities and differences between the individual NGOs and interviews, while also allowing for overarching themes to be identified. This step was done to aid the analysis of

the type of indicators used and the degree to which measures relate to actions or to goals, or to both. The final refined set of themes has been used for the structure of the chapter.

3.8 Presentation of results

As previously described, this research was grounded in qualitative methodologies, drawing on interviews and document analysis. Qualitative research is typically presented as a descriptive account, capturing the voices of the participants and document data, in a quantified way. As such, each of the results chapters (chapters 4-6) will be focused around the themes which emerged from the analysis in relation to each question, and the findings themselves will be presented with minimal commentary. Each chapter will conclude with a short discussion to provide initial answers to each of the research question in turn. An overall discussion, using the findings for each research question, is presented in chapter 7 in order to explore the links between questions, findings and to help address the research aim.

The findings of each of the research questions are presented in turn in the following three chapters (chapter 4-6), followed by a discussion in chapter 7. A more detailed reflection on the research process and methods chosen is presented in chapter 8 (8.2).

4 The public health nutrition landscape in England: Conditions supporting and hindering change

This chapter is the first of three results chapters and presents the research findings related to **Research Question 1 – What conditions support and hinder public health nutrition advocacy?** - drawing on the interviews and policy review. It begins with an overview of the public health landscape in England during the time period explored, drawing on the three policy spotlights, before presenting the main themes that emerged from this research in relation to the different political, commercial and social conditions which were identified as influencing policy and advocacy.

4.1 Introduction

The starting point of the research presented in this thesis was the need to better understand the role of advocacy in public health nutrition policy, and how it can be measured for effectiveness. This chapter focuses on the first research question which looks at the conditions that support and hinder advocacy, but also sets the scene for this research by providing some policy context to the advocacy tactics and measures presented in chapters 5 and 6. Building on the overview of PHN policy in England presented as part of the contextual review in chapter 1, this chapter presents a mix of results from the policy reviews and interviews to build a picture of some of the political conditions which influenced advocacy during the time period explored, as well as some of the broader conditions experienced by the interview participants who were involved with PHN policy development during the time of research. The purpose of this chapter was not to capture every specific condition, rather to present the types of conditions which have been faced in public health nutrition, and which may influence which tactics are used and how they can be measured. To aid with data gathering, enable some policy comparisons, and to provide context for the literature searches and interview discussions, three specific PHN policy spotlights that were negotiated during the period explored in this research – food marketing, labelling and salt reformulation – were used as the primary lens through which the conditions were explored.

‘Conditions’ in the context of this chapter and this research are taken to be the external and changeable factors which can support and hinder advocacy progress directly and indirectly. The term has been chosen in preference of others, such as context and circumstances, as it is thought to better reflect the changeable nature of the factors described and the potential relationship with advocacy.

The conditions presented in this chapter are external to advocacy by nature, but inherently impact on the policy issues that advocacy is seeking to change. Advocacy is just one factor that contributes to policy change and as such understanding the political context and interactions of various conditions in influencing policy change was identified as an important consideration when looking to explore the role and effectiveness of advocacy.

This chapter presents the findings related to research question 1, specifically focused around three key objectives:

1. Explore the context in which public health advocacy has taken place in England
2. Explore the conditions which contributed or were perceived to have contributed to the policy development process of three policies
3. Compare and contrast the conditions identified for three policy spotlights

The chapter begins with a description of the emergence of public health nutrition as an issue of interest in England to provide context for this research, and for the conditions being discussed throughout the chapter. It then presents some background and conditions related to three policy examples – salt, labelling and marketing - before presenting the range of conditions identified in this research according to whether they social, commercial and political conditions. This draws on the influences on the food environment described in Chapter 1 and in Figure 1.1. (Swinburn et al, 2014a).

4.2 Evolution of public health nutrition policy

This section gives a brief overview of public health nutrition policy, identifying the strategies, policies and reports published by central government and its departments for England and the UK that were identified as part of this research. Initially documents from the period 2000-2015 were reviewed, however a number of earlier documents dating back to the mid-1980s were also identified as relevant for exploring the way in which public health nutrition policy evolved over time and are therefore included. This review provides some insight into the way that PHN policy in England (in the context of UK policy) has evolved over the last couple of decades and thus served as a backdrop to the advocacy explored in this research. It builds on previous analyses, including a review of obesity policies in England carried out by Jebb and colleagues (2013), but with a broader focus on public health nutrition rather than just obesity.

A large number of government documents were identified as part of this research, including strategies (11), dietary guidelines (7), specific policies (7), voluntary pledges (7) and reports (19) – See Appendix 6. Exploring the content of the different strategies and documents provides insight into the different perspectives about how public health nutrition should be incorporated into health policy, and the role of government in promoting and improving population diets. The strategies identified, mainly from the Department of Health, were published every few years, each time updating the approach the government would take on a variety of nutrition issues, as well as wider health issues. The strategies provide insight to the different positions taken by the government at the time, such as the degree of

emphasis on government leadership, public behaviour and choice, and on industry responsibility, and how these approaches shift over time. The full list of the documents is presented appendix 6 and is used to inform the description of the evolution of PHN policy provided in sections 4.2.1 to 4.2.3.

A number of the documents identified were reports from parliamentary groups, committees and other arms-length bodies, such as the Health Select Committee and National Audit Office. The reports from these parliamentary groups were found to, in many cases, highlight weaknesses in the government approach at the time and make recommendations for stronger policies and/or a greater depth of policies, with more of an emphasis on societal drivers and issues of equity (e.g. Health Select Committee, 1998, National Audit Office, 2001, House of Lords, 2011).

The documents identified by no means capture the full breadth of government policy and positions, nor do they capture the discussions that have gone on behind the scenes in the formulation of these documents. However, the range of documents identified demonstrate progressive recognition of the importance of public health nutrition as a pillar of health policy. Importantly, this recognition has been demonstrated not only by health departments, but by groups and departments with an interest in wider issues such as finance (e.g. National Audit Office), food (e.g. DEFRA) and inequalities (E.g. Health Select Committee report on Inequalities, 1998, 2009), thus recognising the interconnectivity of different sectors and issues.

Three key phases of nutrition policy were identified from the documents based on shifts in ideology and priorities following changes in government (pre-1997, 1997-2010, 2010-2015). During this period, a broad range of conditions can be seen to have influenced the changes, including two general elections which resulted in party changes, growing evidence for prevention and upstream nutrition policies, leadership from the Food Standards Agency and a gradual shift of public health framing in government reports and strategies. These are discussed in more detail throughout this chapter.

4.2.1 Phase 1: Recognition of nutrition and chronic disease (pre-1997)

The 1980s through to the early 1990s were identified from the document search and in interviews as an important phase for the early development of England's and the UK's nutrition policy, demonstrated through increasing recognition of the role of nutrition in health by government. During this time, under Conservative Governments, a series of recommendations on population based nutrient intake were published for the first time. A discussion paper prepared for the National Advisory Committee on Nutrition Education (NACNE) for the Health Education Council made the first recommendations for dietary targets for disease prevention for the UK population (James, 1983). This was followed by reports

from the Department of Health's Committee on Medical Aspect of Food (COMA) which linked fat (1984) and sugar (1989) to adverse health outcomes (Department of Health, 1984, 1989). A further COMA report in 1991 provided recommendations across 33 nutrients for the promotion of health (Department of Health, 1991), shortly followed by an updated report in 1994 which further endorsed earlier recommendations for dietary targets for fat, carbohydrates (sugars), but not salt (Department of Health, 1994a). The emphasis on new dietary guidelines through this time reflects growing acknowledgement of the link between diet and ill-health at a population level.

In 1992 a new health strategy *The Health of the Nation* highlighted the need to expand the scope of health policy beyond treating sickness to include health promotion and a focus on good nutrition for all (Department of Health, 1992). A supporting action plan was published in 1994 which, while emphasising the need to improve diet and nutrition, primarily focused on choice and individual responsibility rather than on addressing the wider drivers of poor diet and ill-health (Department of Health 1994b). An evaluation of the strategy and its implementation suggested that a lack of government leadership, engagement at a local level and guidelines ultimately meant it was not effective (Department of Health, 1996).

4.2.2 Phase 2: Prevention of obesity (1997-2010)

In the late 1990s and early 2000s, now under Labour Governments, the emphasis shifted away from nutrition guidelines and towards a greater focus on prevention and addressing the drivers of poor diets. In addition, population health trends shifted and the concern which had historically primarily focused on heart disease was extended to concern about obesity.

Instrumental to this shift was the establishment of the Food Standards Agency (FSA) in 1999 following the passing of a Food Standards Act (1999). As initially conceived, the FSA was to be an independent body focused on food safety following growing mistrust amongst the public as a result of BSE and other food crises. This approach drew on the *James Report* prepared by Philip James (1997) at the request of Tony Blair and which was used as the basis for a Green Paper on food. Initially the remit of the FSA did not include nutrition in the context of public health despite recommendations included in *the James Report* (Select Committee on Food Standards, 1999), however following much pressure and growing consumer concern on the subject, particularly around the notion that nutrition is a fundamental part of food policy and public health (e.g. Lang et al, 1996, 1997), it was later included (Food Standards Agency, 2005). Following the establishment of the FSA, food responsibility within government was revised; the Ministry of Agriculture, Fisheries and Food (MAFF) was dissolved and replaced by the

Department of Environment, Food and Rural Affairs (DEFRA). The FSA then went on to lead the government's work on a range of nutrition issues alongside food safety, including salt and fat reduction, and voluntary FOPNL labelling through the 2000s.

Three main strategies were published by the Department of Health during this time. The first, *Saving Lives, Our Healthier Nation* (1999), focused on the importance of disease prevention and the need to address the underlying determinants, though maintained an emphasis on individual responsibility (Department of Health, 1999). The second, *Choosing Health, Making Healthier Choices Easier* (2004), with an accompanying action plan in 2005 shifted the focus towards supporting healthier choices, and included commitments around nutrition labelling, marketing restrictions, reformulation, access to fruit and vegetables, reducing portion sizes, school food and education (Department of Health, 2004, 2005). A third strategy, *Healthy Weight, Healthy lives: a cross government strategy for England*, was published by Department of Health (2008) in conjunction with the Department of Education, shifting the focus towards prevention with an emphasis on societal changes including promoting healthier food, incentivising health and recognising the role of the food environment. In addition, in 2008 the Cabinet Office published a cross-government food strategy *Food Matters*, drawing on the trends in food production and consumption and exploring the impact that had on the economy, society and the environment (The Cabinet Office, 2008). Although not the only focus, population health and nutrition were an intrinsic component of the report.

In addition, several reports were published during this time by the National Audit Office (2001, 2006, 2012), Health Select Committee (1998, 2001, 2004, 2009) and Chief Medical Officer (Donaldson, 2002) which made links between health, obesity and diet, and emphasised the need for a range of upstream government policies in order to achieve change. Derek Wanless published two reports on behalf of HM treasury, both of which highlighted the need to help people live healthier lives and put forward an investment case for prevention (Wanless, 2002, 2004). Key themes across these reports include marketing restrictions, clear labelling, product reformulation and improved school food. A 2001 report from the National Audit Office *Tackling Obesity in England* (National Audit Office, 2001) was considered particularly ground-breaking as it was the first government report specifically on obesity and emphasised the cost-benefit of prevention. In addition, the 2002 annual report from the Chief Medical Officer, Liam Donaldson, included obesity as a key priority, describing it as 'time bomb', a phrase which would stick and continue to be referred to over the years (Donaldson, 2002). The report highlighted the drivers of obesity and consumption and recommended government action to address this. Furthermore, the Foresight (2007) report on *Tackling obesities* highlighted the complexity of obesity

and the need to address multiple drivers and causes, reinforcing the complexities of obesity and the fact no one solution would work.

During this period, a number of policies, voluntary and legislated, were introduced. This included policies on salt reduction, fat reduction, calorie reduction, FOPNL labelling, TV marketing restrictions, school food, and school fruit and veg. In addition, a public awareness campaign - Change4Life - was launched by the government to support behaviour change.

4.2.3 Phase 3: Deregulation, voluntary action and personal choice (2010-2015)

Under the newly elected Conservative-Liberal Democrat coalition government and Andrew (now Lord) Lansley, the approach to nutrition and public health shifted suddenly in 2010. The new public health strategy *Healthy Lives, Healthy People: Our Strategy for Public Health in England* shifted responsibility for health back to individuals, and also to industry, and reduced the emphasis on the wider determinants of ill-health that previous strategies had begun to do under a Labour Government (Department of Health, 2011a).

A key component of this strategy was the launch of the *Public Health Responsibility Deal*, a public-private partnership focused on food, alcohol and workplace health which was briefly described in Chapter 1 (Department of Health, 2011c). The PHRD took a partnership approach and reflected the shift away from government leadership towards multi-stakeholder partnerships and industry-led self-regulation. The PHRD was based around a series of pledges reflecting the different elements of nutrition policy, many of which had previously sat with the FSA, including salt, labelling, calorie reduction, fat reduction, fruit and vegetable promotion. In addition, the Change4Life campaign was continued as the public engagement element of the strategy. As part of the new approach to public health, the nutrition division of the FSA was disbanded, and a new department – Public Health England – was set up. The nutrition work of the FSA in England was absorbed into the PHRD; however, the Scottish and Welsh branches retained their nutrition function and thus their involvement in some nutrition policies.

The PHRD has been widely criticised for putting businesses and behaviour change at the heart of the Deal, without sufficient leadership or accountability processes in place to ensure the public's interest was protected, instead addressing the needs and priorities of business (Panjwani and Caraher, 2014). Reports from the National Audit Office (2012), and House of Lords (2011), amongst others, highlighted the shortcomings of such approach and, in particular, the need to move away from working with industry and voluntary action towards a more regulated approach which better removes barriers to

good health. Advertising was flagged as particularly relevant in this context, never making it to pledge stage due to lack of agreement between different partners of the PHRD. In addition, Labour published a review of food and health which made a series of recommendations, including around greater regulation in relation to marketing and reformulation (Labour Party, 2013). The PHRD was disbanded in 2015 and nutrition policy was taken on by Public Health England.

To summarise, the research has identified a range of policies, documents and briefings related to PHN which have been published over the years and overall highlights some progress being made. The findings indicate a series of political waves and differing approaches between political parties which impact on the type of policies and strategies that are introduced. This is picked up in more detail in the proceeding sections, as well as in Chapters 4 and 7.

4.3 Marketing, labelling and salt reduction policies

Building on the previous section, we now turn to the three policy spotlights that were used as a lens for this research so as to provide more depth and insight into the progress, dynamics and conditions related to PHN during the time period explored in this research. Looking at specific policies also gives the opportunity to compare the policies and explore the degree to which the prevailing conditions were the same or policy specific. This section introduces each of the three policies and presents some of the key conditions which were identified as being relevant to the development of each policy, drawing primarily on the documents identified but also on the interviews. The tables presented for each policy issue are expanded on throughout later sections of this chapter.

4.3.1 Food advertising regulations

Policies that restrict the advertising of food and drink to children have emerged as a key component of health, nutrition and food policy strategies as one means to protect the health of children and the wider population, both in England and globally (World Health Organization, 2008). Arguments in favour of marketing restrictions have taken a rights-based approach, suggesting that children have the right to be protected from marketing and adverse health outcomes when engaging with media, including digital media (WHO Regional Office for Europe, 2019). Evidence reviews suggest that food is widely advertised to children (e.g. Hastings et al, 2003, Hasting et al, 2006, Kelly et al, 2007); In the UK for instance, food has been found to be the third most advertised product type on TV (Boyland et al 2011). Advertising directed to children is typically fun, interactive and used to create brand recognition and engagement. Digital advertising is of rising concern due to it being more immersive and interactive than TV and radio advertising, and also less easy to monitor (WHO Regional Office for Europe, 2019). As highlighted in

chapter 1, research has suggested marketing restrictions are one of the most cost-effective intervention for improving health outcomes at a population level (Cecchini et al, 2010).

In February 2007, the newly established Office of Communications (Ofcom) published regulations which restricted advertising of foods high in fat, sugar and salt (HFSS) to children on TV and radio (Ofcom, 2007). This followed the Communications Act (2002) and publication of the Hastings Review commissioned by the FSA, which highlighted the extent of influence that TV advertising has on children (Hastings et al, 2003). At the time when the restrictions were introduced they were one of the strongest policies in the world. The regulations stated that advertisements, including programme sponsorship, for HFSS products must not be shown in or around programmes specifically made for children or on children's TV channels. During the same period, restrictions on marketing and advertising of HFSS food to children were highlighted in a number of the reports and strategies presented in Appendix 6 and the previous section, including from the Chief Medical Officer, Health Select Committees, and Department of Health.

Two concurrent processes were evident in the development of the regulations. The first was the development of the regulations themselves under the auspices of Ofcom, and the second was the development of a nutrient profiling model to support the implementation of the regulations, led by the FSA.

Drawing from both documents and interviews, a number of conditions were identified from this research which contributed to the development of the marketing policy, as shown in table 4.1. These link to a number of the political, commercial and societal conditions identified later in this chapter. Supportive conditions included the introduction of Communications Act (2002) and establishment of Ofcom, a strengthened evidence-base, support from the public and supportive individuals (high-profile and decision-makers), while hindering conditions included industry lobbying and the challenge of overcoming different interests.

Table 4-1: Conditions that influenced food marketing policies in England

Condition	Summary	Source
Supported the development of food marketing restrictions		
The Communications Act and establishment of Ofcom	The Communications Act (2002) gave Ofcom regulatory power and initiated a review of communication regulations in the UK. This presented an opportunity for action to be taken on HFSS food advertising on TV.	Documents
FSA commitment to marketing issues and to developing a nutrient profiling model	The FSA highlighted concerns about advertising HFSS food to children and set out an Action Plan to reduce promotions to children. They supported Ofcom with the development of the regulations by developing a nutrient profiling model which could identify foods as being HFSS.	Documents
Supportive white Papers	Several White Papers and reports from the Health Select Committee published through the 2000s made a strong case for regulations. These demonstrated the support for such measures, and more broadly the need to focus on prevention and population health measures rather than an individualistic approach to health and diet.	Documents
Supportive individual	Several influential individuals were identified as supportive of marketing restrictions. Amongst others, this included Liam Donaldson (Chief Medical Officer), MP Tessa Jowell (Secretary of State for Culture, Media and Sport), MP Mary Creagh (sponsored a Children's Food Bill) and the Archbishop of Canterbury.	Documents, Interviews
Evidence	Following concerns raised about HFSS food marketing, a number of evidence reviews were commissioned in order to ascertain the link between food marketing and health. This included the Hastings review, commissioned by the FSA, and Ofcom's own review. It was noted that this evidence helped to respond to industry opposition to marketing restrictions.	Documents, interviews
Public and parent support	Public concern about marketing, including by parents, was cited as an important driver of the policy development.	Interviews
Hindered the development of food marketing restrictions		
Industry challenge	The issue of marketing was highlighted as an issue which faced a lot of industry challenge. As highlighted, the evidence helped to counter some of this challenge. Consultation responses suggest some areas of contention, including a 9pm watershed, age of child, thresholds in nutrient profiling and types of programme. The industry voiced economic concerns about the restrictions and the risk of lost profit. Inability to reach consensus was also why advertising was never incorporated into the PHRD.	Documents, interviews

Source: Author

We return to these conditions later in this chapter as well as in the discussion (Chapter 7).

4.3.2 Front-of-pack nutrition labelling

The labelling of food products emerged from the food safety agenda as a means of transparency and traceability across the food chain. Front-of-pack nutrition labelling (FOPNL) is an extension of back-of-pack (BOP) labelling and is designed to provide consumers with choice at the point of purchase in an easy to use format. It is placed on the front of food packaging to make it clear, easy to see and easier

to compare products in the same category. A number of ways to present this information have been proposed around the world, ranging from colour-coded labels, through to warning signs and Guideline Daily Amounts. There is no consistent format used globally, however evidence suggests that interpretative labelling, that is labelling that presents colours or warnings rather than numerical information alone, is easier to understand by consumers and is more likely to alter food choices (Emrich et al, 2017, Food Standards Agency, 2007c, Malam et al, 2009).

The concept of FOPNL itself has become widely accepted and adopted in England as part of efforts to provide consumers with information to enable them to consume a healthy diet, evolving from early discussions of BOP nutrition labelling in the 1980's and 1990's (Coronary Prevention Group, 1992, Luba, 1985, Shannon, 1994) and companies adopting their own FOPNL schemes in the 1990's and 2000's (Food Standards Agency, 2007a), with the first examples of FOP labelling being used as early as 1995 (The Cooperative, 2000). Much of the discourse in England during the early to mid-2000s was focused on a debate, not on whether FOPNL should be used, but the format that it should take with an emphasis on the need for consistency. There was a public health lobby calling for interpretive labelling using traffic light colours which was also supported by the FSA, and a numerical scheme developed by the food industry in the 1990's which used percentage Guideline Daily Amounts (GDAs) (Rayner et al, 2004). The focus on GDAs was not unanimous across the food industry, however, and a number of retailers and manufacturers were supportive of the traffic light scheme, joining an FSA 'supporters and adopters' group' which helped engage other companies (Food Standards Agency, 2008d). During this period FOPNL, and specifically the need for traffic light labelling as part of PHN policies, was also highlighted in a number of reports and strategies included in Appendix 6, including from the Chief Medical Officer, Health Select Committees and House of Lords Science Committee (2011), as well as in the Cabinet Office's (2008) strategy *Food Matters*.

In 2013, the UK government announced a voluntary FOPNL scheme which all food companies would be encouraged to adopt as part of the PHRD (Department of Health, 2013). The eventual Government recommended scheme which was designed to bring a degree of consistency and standardisation to the market consistent and standardised. The UK government's hybrid scheme incorporates traffic light colours, the words 'high', 'medium' or 'low', and the percentage GDAs for fat, saturated fat, sugar and salt, alongside calorie information.

The eventual announcement by the DH followed an EU Directive on Food Information Regulations (FIR) which, while falling short of mandatory FOPNL or endorsement of traffic light labelling or similar interpretative scheme, permitted national level FOPNL schemes which meant that any company adopting FOPNL had to use to the format recommended by the national government EU Regulation

(EU) No 1169/2011). The EU Regulation was not introduced without challenges however, and a report by the Corporate Europe Observatory (2010), an organisation focused on revealing tactics which have a negative impact on public interest policy-making, revealed a €1 billion lobbying campaign targeting MEPs which was carried out by the European food industry to oppose traffic light labelling in favour of GDAs. In addition, the lengthy process of negotiating the regulation may have stalled national action and the range of positions held by different European countries added to the degree of negotiation required.

Four concurrent processes were identified as having contributed to the development of FOPNL schemes in England, including the early development of FOPNL schemes by individual companies, the FSA's signpost labelling scheme, the food industry's GDA scheme and the EU Directive on Consumer Information.

A number of conditions were identified as either supporting or hindering progress, many of which have been previously described by Mwatsama (2016) in their analysis of the UK labelling policy, as well as documented in timelines on the FSA and FDF websites (Food Standards Agency, 2007a, Food & Drink Federation, 2012). The key conditions identified from the document analysis and interviews are shown in Table 4.2. Supportive conditions include the leadership of the FSA, the EU regulations, support from some food companies, evidence and framing of the issue around consistency. Hindering conditions include EU regulations and the proliferation of schemes.

Table 4-2: Conditions that influenced FOPNL policy in England

Condition	Summary	Source
Supported the development of a consistent FOPNL scheme		
Interest in BOP nutritional labelling	Existing policies and discussions relating to nutrition declarations on the back of food packages meant much of the nutrition information was already collected by companies	Documents, interviews
BSE	The BSE crisis was one of the factors that led to the establishment of the FSA. This was particularly relevant for labelling as the crisis damaged consumer trust and increased calls for extra transparency.	Interviews
FSA commitment to traffic light labelling	Although the remit of the FSA was originally just food safety, the extension to nutrition meant that there was an arms-length government body able to take leadership on labelling. As the regulator they had close contact with companies which helped bring on and engage with supporters.	Documents, interviews
Supportive white Papers	Several White Papers and reports from the Health Select Committee published through the 2000s made a strong case for traffic light labelling. These demonstrated the support for such measures, and more broadly the need to focus on prevention and population health measures rather than an individualistic approach to health and diet.	Documents
Evidence/consumer research	FOPNL is about supporting consumers through sharing information and aiding healthier choices. Early research on high medium low labelling confirmed its value meaning it discussions continued and this was later supported by FSA commissioned research highlighting that a combination labelling was the most useful for consumers.	Documents
Supportive companies	The Cooperative was the first retailer in England to engage with the concept of FOPNL. Several companies, mainly retailers, later became early adopted of the traffic light label and were members of an FSA-led supporters' group.	Documents, interviews
EU Food Information Regulations	The EU Food Information Regulations helped to put the issue of FOPNL on the government agenda. Although the FIR did not support mandatory labelling, it did include scope for national schemes. Given the extent of FOPNL used in in England and across the UK at the time, this forced a decision to be made on what the national scheme would be.	Interviews
Consensus on consistency	The framing of consistency helped bring different groups together than commit to working towards one scheme.	Interviews
Hindered the development of a consistent FOPNL scheme		
EU Food Information Regulations	Extensive lobbying from the industry is widely thought to have influenced the decision of MEPs in the European Parliament to not support mandatory FOPNL or traffic light labelling.	Interviews
Multiple schemes	A number of food companies developed a GDA scheme as an alternative to traffic lights. This meant that there was divergence in the FOPNL scheme used by adopters and turn diversified the label use and helped to increase consumer confusion.	Documents, interviews

Source: author

We return to these conditions later in this chapter as well as in the discussion (Chapter 7).

4.3.3 Voluntary salt reduction policy

Salt is widely recognised as a key risk factor of NCDs, namely raised blood pressure and cardiovascular disease. The 2013 WHO NCD targets include a target to reduce salt intake by 30% towards a target consumption of no more than 5g per day (World Health Organization, 2013). It is widely recognised that in many countries the main source of dietary salt is processed food, such as bread, ready meals and processed meat and as a result the priority policy focus has been on reformulation to lower the level of salt contained in these foods (He and MacGregor, 2009).

In 2004, the Food Standards Agency published a multi-pronged model for reducing the salt level in processed food across the UK (Food Standards Agency, 2004a). The model focused on voluntary reductions made by the food industry based on a set targets, combined with an education and awareness campaign. The initial voluntary category specific salt targets in 2006, to be met by 2009, and 2009 to be met by 2012 (Food Standards Agency, 2008b, 2008c). A particularly important role was as a mediator in the development of the salt targets in 2007.

Following the dissolving of some of the FSA's priorities, particularly in England, salt reduction was later prioritised as part of the PHRD in England and further revised targets were published in 2012 as part of the salt pledge (Department of Health, 2012b). The responsibility for salt reduction in other devolved nations remained with the other national FSA branches. Since the start of the programme in 2003, population salt intake has fallen from 9.6g/day, to 8g/day. There are however concerns that the programme has stalled, with the latest figures suggesting significantly significant slowing in salt intake decline (Laverty et al, 2019).

During this period salt reformulation highlighted in a number of reports, including by the Chief Medical Officer (Donaldson, 2002), Health Select Committees, as well as in government strategies including *Food Matters* (Cabinet Office, 2008).

A large number of conditions were found to support and hinder the progress on salt policy during the 1990s and 2000s, many of which were described by Mwatsama (2016) and He (2014) in their analysis of the politics around the salt policy, as well documented in timelines on the FSA and CASH websites and in other papers (e.g. MacGregor et al, 1999). Three key phases to the policy can be seen over a 30 year period, including: 1) pre 2000: a period that saw increasing recognition of salt as an issue of concern (alongside other nutrients), but progressed was stalled by the rejection of a target by COMA 2) 2002-2009: A clear salt strategy lead by the FSA, guided by the Department of Health, and established in conjunction with the food industry 3) 2010-2015: The strategy shifted from the FSA to the DH as part of the PHRD and has since been taken on by Public Health England.

The key conditions identified from the document analysis and interviews are shown in Table 4.3. Supportive conditions include endorsement of a 6g target by the CMO, a strong evidence base, FSA leadership, consumer support, and a lead NGO. Hindering conditions include industry lobbying, particularly in the 1990's which prevented the inclusion of salt in key government reports and the introduction of the Public Health Responsibility Deal.

Table 4-3: Conditions that influenced the development of the salt policy in England

Condition	Summary	Source
Supported the development of the salt reduction policy		
CMO support for 6g target	The new CMO appointed in 1998 was supportive of public health measures and endorsed the 6g population salt target that his predecessor had not.	Interviews, documents
Establishment of FSA and leadership on salt	The extension of the FSAs remit to include nutrition created an opportunity for them to take a leadership role on issues such as salt. The FSA led the salt reduction programme on behalf of the government, and although it was voluntary had strong buy-in from multiple sectors.	Documents, interviews
FSA industry engagement	The engagement between FSA and the food industry is credited as being a strong component of the salt programme in the UK. The leadership of the FSA ensured that all actors were included, but that the policy remained strong.	Interviews
Evidence	Evidence was an important precursor to the FSA committing to a salt reduction programme. This was a SACN review, published in 2003, which endorsed the earlier 1994 COMA recommendations relating salt and health	Documents, interviews
Lead NGO advocating for a salt policy	The role of CASH, a salt reduction campaign NGO, was important for supporting the salt reduction programme. They raised the profile of the issue and supported the FSA with the development and implementation mechanisms of the salt targets.	Documents Interviews
Public support for salt reduction	The FSA and CASH both undertook awareness campaigns as part of their activities. The public buy-in on salt reduction was referred to as something which supported the development of the policy and ease at which it could be done.	Interviews, documents
Hindered progress		
Rejection of COMA recommendations by CMO	The rejection of a salt target based on the 1994 COMA recommendations was a key factor which stalled progress on salt until the late 1990's when it was revisited by a new CMO and government.	Documents, interviews
Industry lobbying	It is acknowledged that food industry lobbying against a salt target is likely responsible for the rejection of the target.	Interviews
Responsibility Deal replacing FSA	The salt programme was moved from the FSA to the DH in the form of the PHRD in 2010. As part of this new targets were set (delayed) and catering targets were set as well. However, the lack of government leadership and the degree of industry engagement has been widely recognised as a weakness in this approach which ultimately stalled progress on salt.	Documents, interviews

Source: Author

We return to these conditions later in this chapter as well as in the discussion (Chapter 7).

4.3.4 Section summary

The review of the policy spotlights has identified a number of conditions which supported and hindered progress on each policy issue. In some cases, these conditions were unique to the policy, for instance the influence of The Communications Act and Ofcom on marketing restrictions, the EU Regulations on labelling, the proliferation of schemes for labelling, and the rejection of a salt target by COMA. However, a number of cross-cutting conditions identified across two or three of the policies were also identified, including the evidence base, leadership of FSA and tensions with food industry. These conditions are described in more detail in the following sections, drawing primarily on the interviews. The main sections – political, commercial and societal – were identified from the literature, while the sub-themes presented in each have emerged from data.

4.4 Political Conditions

The term political conditions in this thesis to refer to those conditions which emerge from government, policy and regulatory frameworks. The political conditions will impact the types of policy implemented and the trajectory of a policy. The focus of this research is advocacy in the context of policy change, and these political conditions are assumed to influence the way in which NGOs advocate and the advocacy outcomes. To summarise, the presence of political will to address an issue is vital for change, and this is strongly related to the priorities of specific Political Parties, as well as the degree of access industry has to government. The government infrastructure to take leadership on policies was also identified as important for the PHN issues described in this research. The findings presented here build on the supportive and hindering conditions presented in earlier sections and tables 4.1-4.3. and are drawn primarily from the interviews.

4.4.1 Political cycles

‘Political cycles’ refers to the political process which results from changes in government leadership. Section 4.2 presented an overview of the evolution of public health nutrition in England, highlighting a number of key phases, starting with a recognition of the role nutrition plays in chronic diseases, towards a focus on public health policy and prevention, and then to a focus on personal choice and voluntary actions. These phases can be seen to closely align with the political cycles of the period, with a greater emphasis on public health following the 1997 election in which Labour gained power, and a return to deregulation and personal choice following the 2010 election in which the Conservative party gained power as part of a coalition government with the Liberal Democrats.

As shown in the below quotes, the importance of the policy cycles and elections in policy change was reinforced by the interview data, where a number of participants reflected on left-wing governments being more favourable to public health policies, particularly regulatory policies, while right wing governments are more likely to focus on personal responsibility and deregulation.

[REDACTED]
[REDACTED]
[REDACTED] [A03 NGO]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A026 NGO]

4.4.2 Policy process

The 'policy process' refers to the formal and informal political process that goes on inside government during the process of developing a policy. The often unpredictable and non-linear nature of policy development emerged from the interviews as an important theme relating to the policy process and policy development. This non-linear process was particularly evident in the case of salt reduction but can be seen across the policies. This unpredictability was described in the interviews as a challenge for NGOs which needs to be navigated as part of their planning, described by one participant below:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A026 NGO]

Related to this is the time taken to achieve change. A time lag was evident in each of the policies looked at, which all gained momentum over several years, followed by multiple years of negotiation before the final policy was introduced. As one interview participant said "[REDACTED] [A026 NGO], while another reflected on their experience working on labelling policy:

[REDACTED]
[REDACTED] [A03 NGO]

4.4.3 Governance and leadership

Governance and leadership refer to the political structures in place, and the specific departments/institutions that are responsible for a policy, and how they manage the development process. A range of different types of leadership and governance structures were identified in this

research as important conditions for change, and which can influence advocacy and its success in different ways. This was most evident in the context of the FSA which was highlighted in sections 4.2 and 4.3 as an important government body for the development of public health nutrition policy in England, and play a role in each of the three policies focused on in this research, albeit playing a different role in each policy. As reflected previously, a review of the implementation of the 1992 *Health of the Nation* strategy also highlighted a lack of leadership one of the major factors which led to the strategy being ineffective (Department of Health, 1996).

The FSA was the key government body responsible for salt policy. As previously described, the FSA led and undertook a range of activities and played a mediator role between different actors to develop targets for salt. The FSA leadership was recognised in the interviews as being important for ensuring that the public interest was retained throughout the process and for helping with the success of the policy, despite it being voluntary. The following quote highlights this point.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]. [A010 food industry]

The fact that the FSA was independent from government and therefore able to undertake a range of activities, including the monitoring and holding account of the food industry was also identified in the interviews as an important component of the FSA's leadership on salt, as demonstrated in the below two quotes.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]. [A016 NGO]

¹ Name of senior government advisor removed

[REDACTED]
[REDACTED]
[REDACTED] [A027 Nutrition consultant]

The leadership of the FSA on FOPNL was also notable, despite the fact that the ultimate policy came from the Department of Health following the 2010 restructure. The FSA led the generation of evidence in support of the hybrid traffic light model through the commissioning an independent review of the effectiveness of different schemes on the market (Food Standards Agency, 2009), as well as bringing together a range of ‘supporters’ from different sectors with the aim of building momentum for this labelling (Food Standards Agency, 2007a).

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A019 ex government advisor]

In the case of marketing, the FSA primarily played a supportive role to Ofcom, developing a nutrient profiling model which would support the implementation of the marketing regulations developed by Ofcom by providing criteria upon which to determine which products could and could not be advertised (Food Standards Agency, 2007b, 2017). This role was instrumental in ensuring a model was developed which would restrict food items from being advertised in the most effective way. In addition, the FSA commissioned the Hastings systematic review demonstrating the relationship between marketing and health, which was used to justify much of the work on marketing (Hastings et al, 2003) The FSA also published an *Action Plan on Food Promotions and Children* (Food Standards Agency, 2004b) and challenged the Ofcom as part of the consultation phase on the regulations as to whether the proposals went far enough (Food Standards Agency, 2006).

In contrast to the leadership demonstrated by the FSA, the Public Health Responsibility Deal which replaced the nutrition remit of the England branch of the FSA in 2010, was found to involve limited government leadership, instead taking an industry led and voluntary approach without accountability mechanisms in place. The research findings highlighted a lack of leadership, the multi-stakeholder foundations and emphasis on company priorities as what ultimately led to the failure of the PHRD, noted previously. This view was echoed by a number of the NGO and academic interview participants.

² name of senior government advisor removed

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A012 NGO]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A026 NGO]

Furthermore, there was a suggestion by one participant that the pledges were weakened in order to ensure that the food industry got on board and were engaged.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A03 – NGO]

A lack of implementation mechanisms was also highlighted as one of the downfalls of the PHRD. This would likely have been exacerbated by the previous point related to the degree of food industry engagement.

[REDACTED]
[REDACTED] [A014
Academic]

Representative of the food industry tended to be more supportive of the concept and partnership approach of the PHRD, but also recognised that it had not been implemented or executed well due to insufficient leadership and the attitudes of those involved.

[REDACTED]
[REDACTED]
[A020 Food industry]

Additional conditions related to the issue of governance and leadership include the degree to which a policy is driven at a national or international level. As described in 4.3.2, the EU Regulations played an

important role in the eventual introduction of a consensus FOPNL scheme in England, providing a framework which led to a national policy.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A015
ex Government advisor]

4.4.4 Supportive individuals

The support of specific individuals, not just parties or departments, was identified as an important theme. The views and positions of individuals within government and in influential government position was identified as an important factor which can support or hinder policy change.

[REDACTED]
[REDACTED]
[REDACTED] [A015 ex government advisor]

It was evident from this research that having a champion inside government is helpful for achieving change. One such champion identified was the Chief Medical Officer Liam Donaldson who endorsed the 6g salt target in his 2001 annual report (Donaldson, 2001), and highlighted the importance of addressing ‘the obesity timebomb’ with upstream policies such as marketing, reformulation labelling, school food and education, in his 2002 annual report (Donaldson, 2002). Conversely, the previous CMO was not supportive of salt reduction and as a result failed to endorse recommendations for a population dietary target.

Supportive MPs also emerged as an important driver of change. For instance in the case of food marketing, Tessa Jowell MP who was the Secretary of State for Sport, Culture and Media wrote to Ofcom specifically asking about its plans on food advertising regulations (Ofcom, 2003), and Melanie Johnson MP, Under Secretary for Public Health, requested food companies to submit plans on salt reduction as she was concerned that progress had not been sufficient (Food Standards Agency, 2008a).

Many of the interview participants also highlighted the role that MPs can play in supporting the cause of advocates, as well as the direct influence that they have on the government processes themselves. For instance, the power held by ministers and MPs in relation to decisions in the area they work was highlighted as an important determinant of the priorities. A new health minister may help create positive conditions that support the causes of public health advocates and give traction to what is being

advocated for but may also hinder progress that had been previously made if the priorities and/or approaches significantly differ to those being advocated for.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A015 ex
government advisor]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A013 NGO]

Furthermore, supportive MPs provide an opportunity to positively influence the consensus of Health Select Committees and other core government sub-groups, which can in turn influence policy momentum. The ability of such committee reports to take positions and provide recommendations beyond the official government was line was highlighted in sections 4.3. A supportive MP may also file or support Early Daily Motions, Private Member's Bills and Parliamentary Questions which "[REDACTED] [REDACTED] [A015 government – ex civil servant]. Examples include an Early Day Motion tabled on *Salt Intake* in 1999 by MP Kerry Pollard (Pollard, 1999), and another on *Children's Food* by Mary Creagh MP in 2005 (Creagh, 2005). The fact that MP support can often come when constituents are interested in an issue was reflected on, an example of which is below:

[REDACTED]
[REDACTED]
[REDACTED] [A03 NGO].

To summarise, the interviews and policy spotlights have identified a number of political conditions which were found to influence PHN policy during the period focused on in this research. This includes the policy process and political cycles, as well as the leadership of government and supportive policy-makers which help raise an issue up the political agenda. We return to these issues in the chapter summary, and in the discussion presented in chapter 7.

³ MP name removed

4.5 Commercial Conditions

The term commercial conditions is used here to describe those conditions that emerge from or are influenced by the private sector. As highlighted in chapters 1 and 2, as well as previously in this chapter, market interests and industry lobbying are recognised as presenting a challenge for public health goals. Across the data sources there were examples of commercial interests both supporting and hindering policy change. In the case of the salt and labelling policies, the degree of alignment between market and public interests was, for a variety of reasons, found to increase over time. In the case of marketing restrictions, little alignment or examples of collaborative working between sectors was seen. The following sections represent themes linked to commercial conditions identified from this research.

4.5.1 Power and influence

Power refers to the extent to which different actors are able to, or are perceived to be able, influence decisions and shape outcomes. The power and influence of different actors is a well documented consideration in relation to policy change (see chapter 1 and 2). The power of commercial interests to influence government decisions and wider discourse came through as a key theme in the interviews, particularly with those NGOs represented. Typically, this was raised in the context of NGOs having less power and a lower degree of access to government compared to industry actors. As shown in the final quote, the degree of power difference may be influenced by the party in power.

[REDACTED]

[REDACTED] [A026 NGO]

[REDACTED]

[REDACTED] [A012 NGO]

[REDACTED]

[REDACTED]

[REDACTED] [A011 NGO]

One reason for this power is the economic power that companies hold due to the jobs they create and the support they give to the economy, which can in turn be used as a threat to prevent action.

[REDACTED]

[A012 NGO]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]. [A015 ex
government advisor]

Corporate funding and lobbying directed at political parties was also referenced as source of power.

[REDACTED]
[REDACTED]. [A013 NGO]

4.5.2 Competitiveness

Competitiveness refers to the competitive nature of business, in which companies want to achieve ‘an upper hand’ compared to their competitors. Competitiveness between industry actors is also linked to power and may support or hinder action.

[REDACTED]
[REDACTED]
[REDACTED]
[A020 – Academic]

There was also a suggestion by one food industry participant that voluntary action can aid competition, as complying voluntarily can give them a competitive advantage. The ‘level playing field’ ethos, for instance, was important in the salt reduction programme as it ensured companies were not at a disadvantage by acting.

[REDACTED]. [A021 –
Food industry]

The implications of this competitiveness for advocacy link to the role advocates in holding companies to account, which is picked up in Chapter 5.

4.5.3 Competing interests

Competing interests refers to the positions taken by different actors, and the different drivers of these positions. This research highlighted a number of cases where different positions were taken by public health and industry actors. The market feasibility and acceptability of a specific policy (solution) can be seen to have influenced the type of process and discussions that were had. The degree of tension, and the impact it had on final policy, was often found to reflect the extent to which the policy allows ‘business as usual’ for the companies and therefore varies between policy areas.

A key challenge related to marketing restrictions that was identified relates to company profit and the potential risk that restrictions have on business practices and competitiveness. As one interview participant suggested, the debate is polarised, and it is hard to find a middle ground.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A022 Food Industry]

As described in section 4.3, tensions were evident on a number of specific issues related to marketing, including whether the policy should be legislated or self-regulated, the age of child, a 9pm watershed, how HFSS products are defined and the extent to which the approach taken by government should be precautionary and what level of intervention was 'proportionate' to the problem. In this case it was financial considerations (i.e. risk of lost revenue) which dictated the discussions rather than what was in the best interest for public health. This was most apparent by the decision not to incorporate a 9pm watershed into the regulations (Ofcom, 2006).

The degree of alignment and collaboration between interests was mixed in the case of salt and opposition can be seen to have changed over time. Despite evidence of strong lobbying against salt reduction in the 1990s, the food industry can be seen to have aligned with government through the FSAs salt reformulation programme (Food Standards Agency, 2008b) and, as a result, salt the content of food can be seen to have reduced in the UK (Brinsden et al, 2013b, Pombo-Rodrigues et al, 2017). This was important as it was a voluntary programme, and thus required buy-in from industry actors. Overall, the salt policy benefited from the notion of everyone getting on board to create 'a level playing field'. The coordination of sectors facilitated by the FSA was highlighted in the interviews as a key factor which contributed to the success of the salt policy, as well for encouraging companies to work together in a way that wasn't typically seen, as demonstrated by the below two quote examples.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A018 ex government advisor]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]. [A012 NGO]

A number of tensions remained, for instance around the types of targets that should be imposed, the thresholds that the targets should be set at, and the speed at which reformulation was expected to take place. Some sectors were also particularly adverse to the targets proposed, however overall companies engaged, albeit to different degrees.

As previously described, the labelling policy discourse in England focused more on *which* approach should be taken rather than *whether* the policy should exist. As described in 5.3.2, initially there was a strong divergence, not only between public and market interests but between industry actors, over the use of traffic lights or GDAs. The support from some companies for the FSA endorsed traffic light scheme was highlighted in the interviews as particularly important for change, shown in the two quote examples below.

[REDACTED]
[REDACTED] [A03 NGO]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A010 food industry]

Linked to this is the fact that eventually all actors agreed to a consistent scheme, recognising the value this would bring and allowing for conversations on the detail of the scheme. This followed the EU Directive which specified national schemes would be permitted to ensure consistency for consumers. A number of the interview participants reflected on this and how it helped to bring a range of industry players together and led to the eventual agreement on the scheme introduced.

[REDACTED]

[A026 NGO]

[REDACTED]

[A07 NGO]

A key turning point was cited as being the decision by Tesco, a previous GDA champion, to adopt traffic light labelling. It is widely acknowledged that this decision led to many others following suit, as shown in the below quotes. However, as noted in the second quote this decision also created some tensions amongst other commercial operators.

[REDACTED]

[A026 NGO]

[REDACTED]

[A08 Food industry]

To summarise, a range of commercial conditions also influence the landscape, alongside political conditions. These include the power and influence of the food industry, competing interests and the competitiveness of companies. In many cases the commercial conditions identified hinder policy and advocacy, however they can also present opportunities for change, for instance in the case of competitiveness. We return to some of these issues in the chapter summary, and in the discussion presented in chapter 7.

4.6 Societal conditions

Societal conditions in the context of this research refer to those conditions which emerge within society, outside of the government or private sector. A number of societal conditions were identified from this research, primarily related to issue awareness and public support. The following themes are primarily drawn from the interview data.

4.6.1 Awareness and issue visibility

Awareness and visibility refer to the profile of a particular issue amongst key groups, such as the public, policymakers, business amongst others. Issue awareness and visibility was highlighted as an important condition which influences policy discussions. It is also something we return to in Chapter 5 as key focus of advocacy tactics, and in Chapter 6 as a measure of advocacy. It was recognised in the interviews that an issue often goes through phases of 'popularity' within both the political and wider societal discourse. A period of high exposure of an issue may help create conditions favourable to change, an opportunity for advocates to further their agendas and a tipping point through which progress can be seen. The following quote reflects on the fact that the topic of interest for campaigning can suddenly change, often with no clear reason why.

[REDACTED]
[REDACTED]
[REDACTED] [A013 NGO].

The specific role of NGOs in raising awareness of issues to create pressure for change was also highlighted, as shown in the below two quotes.

[REDACTED]
[REDACTED] [A020 Academic]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A025 Ex government
advisor]

Many factors were highlighted that can influence attention on an issue, whether it be the ease at which an issue gets media headlines, the visibility of the problem itself, or the prioritisation of an issue for the public. One such factor relates to the way in which the problem is framed and shifts in this over time.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A013 NGO]

Another factor relates to the type of message and whether or not it can get media headlines. As suggested by one participant, the media's interest in an issue can play an important role in determining how much traction an issue gets.

[REDACTED]
[REDACTED]
[REDACTED] [A016
NGO]

Another factor relates to prioritisation and how important an issue is, or is perceived to be, amongst consumers and in relation to other government priorities.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A014
academic]

This same point was cited as relevant for getting companies on board with a policy or action.

[REDACTED]
[REDACTED] [A08 food industry]

The FSAs salt reduction campaign was coupled with a public awareness campaign (Food Standards Agency, 2008c) and regular monitoring of public opinion/awareness about salt and food (Food Standards Agency, 2010b). The public profile of salt and the buy in and awareness of the public was cited in the interviews as a factor that helped with the initial success of the salt policy, as well as the sustained action.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A022 food Industry]

[REDACTED]
[REDACTED]
[REDACTED] [A010 food industry]

Another example was the support from parents for marketing restrictions which emerged as an important condition which helped advance the discussions on restricting marketing. It was suggested it helped to get government support for the policy, as shown in the two quotes below.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A025 Ex
government advisor]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A026 NGO]

4.6.2 Champions

Champions here refer to individuals who support a policy idea and actively support change. In the context of advocacy, having a champion can help build momentum and get campaign recognition. Celebrity support and exposure via popular media streams such as TV were highlighted by some of the interviewees as being important for creating conditions favourable for change. They may help to raise awareness and visibility of the issue, get traction within parliament or simply make the issue and advocacy harder to ignore.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A013 NGO]

For instance, the role of Jamie Oliver in school food meals regulations was highlighted by a number of participants, as demonstrated in the below quote.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A016 NGO]

Securing a champion for a campaign as part of advocacy is returned to in chapters 5 and 6 in the context of advocacy tactics and measures.

4.6.3 NGO leadership and coordination

NGO leadership refers to an instance where one NGO plays a key role in a specific policy area, while coordination reflects the way in which NGOs work together. Interview participants reflected, not only on general leadership by NGOs, but the importance of having a lead NGO on the issue. This was mostly highlighted in the context of salt reduction and Consensus Action on Salt & Health, one of the NGOs looked at in this thesis (see section 3.5 and chapter 5 for more details on CASH).

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A026 NGO]

[REDACTED]
[REDACTED]
[REDACTED] [A019 ex Government advisor]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A020 academic]

Similarly, the role that Sustain's Children's Food Campaign, also explored in this research, also undertook a range of actions in the context of marketing restrictions.

[REDACTED]
[REDACTED]
[REDACTED] [A019 ex government advisor]

Related comments were made in the interviews about the degree of coordination between NGOs, the type of problems and solutions identified, and the ways these are packaged by NGOs in their advocacy. These factors can help to shape the policy terrain and support some of the factors identified here, such as around awareness. These issues are discussed in detail in the following chapter on advocacy tactics (chapter 5).

4.6.4 Crisis /events

A crisis or event is a key moment which results in change, positively or negatively. A crisis or key event may emerge resulting in political interest and/or public interest which creates an opportunity for action on a specific issue. As described previously, significant events such as elections and government reshuffles can also create conditions which either support or hinder change which is supportive of advocacy calls.

The FSA, as initially set up, has been highlighted as an important factor in PHN policy across the UK. The establishment of the FSA was in response to the BSE crisis and widespread concern about food safety. In this particular instance it is evident that one issue, in this case PHN, can piggyback and benefit from another when the mechanisms and infrastructure are in place for increased attention.

[REDACTED]
[REDACTED] [A03NGO]
[REDACTED]
[REDACTED] [A015 ex government
advisor]

4.6.5 NGO funding

NGO funding relates to the financial support received by NGOs. The lack of money available for political advocacy was highlighted in this research as a potential hindrance to the work they can undertake.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] [A013 NGO]

[REDACTED]

[REDACTED] [A07 NGO]

It was also highlighted that funding and funding sources can also be a source of tension between NGOs, who often compete for the same ‘pots’ of money.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] [A026 NGO]

[REDACTED]

[REDACTED]

[REDACTED] [A07 NGO]

This links also to an earlier point about power and influence, where advocacy NGOs face a well-resourced opposition lobby, mainly the food industry who not only have the finances to support lobbying and public affairs, but who have access to a wealth of data and insight which is not accessible (or affordable) for NGOs.

To summarise, a number of societal conditions exist which can influence policy and advocacy. These range from awareness of the public, champions of the policy, the leadership of NGOs. In addition, crises can have both a direct and indirect effect on policy. We return to these issues in the following two findings chapters (5 and 6), as well as in the discussion (7).

4.7 Additional considerations

A number of other conditions were highlighted as being relevant to PHN policy and advocacy, but which are not specifically political, commercial or societal. These include factors such as the evidence base, opportunism and the alignment of multiple factors and are discussed in turn below.

4.7.1 Evidence

Evidence is any scientific or other information which supports the calls for a policy change in line with the intended goals. Evidence, and particularly the emergence of new evidence, came out of the review and interviews as an important condition in influencing policy change, as well as a consideration for advocacy organisations (see also chapter 5). It was clear from the research that in each policy example described, a vital part of the policy development process was the evidence for action. In the case of salt, the 1994 COMA report '*Nutrition Aspects of Cardiovascular Disease: Report on health and social subjects*' (Department of Health, 1994a) and 2003 SACN report '*Salt and health*' (Scientific Advisory Committee on Nutrition, 2003) reports were important, in the case of marketing it was the *Hasting's review* (Hastings et al, 2003) and the research done by Ofcom (2004), while for FOPNL schemes it was the FSA's independent research on the impact and benefits of three labelling schemes in use (Malam et al, 2008). The importance of these evidence reviews was highlighted in the interviews, as shown in the below two quotes from a manufacturer and ex-civil servant

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A021 food industry]

[REDACTED]
[REDACTED]
[REDACTED] [A015 ex Government
advisor]

Different types of evidence were identified which served different purposes. One important reason reflected on by some of the interview participants was the role of evidence as a counterargument to some of the claims made by opposing actors, commonly the food industry in the context of this research. The below quote from an NGO describes the importance of evidence to demonstrating the health risks associated with marketing to counter industry claims that there was not risk.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

⁴ name removed

[REDACTED]
[REDACTED] [A03 NGO]

In addition, the following quote suggests there is also value in having evidence which demonstrates that salt reduction (or another policy) is possible based on the levels of salt found in some existing products.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A07
NGO].

However, it was also highlighted that while evidence is a vital component for getting change and policies in place, it is not the only factor and it needs to be coupled with other actions and advocacy. This was particularly evident in the case of salt reduction in the 1990's, as shown by the exclusion of a population dietary target for salt intake despite evidence availability, linking back to the influence of political conditions described previously.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A013 NGO]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A02 NGO]

4.7.2 Opportunism

Opportunism refers to the process of taking advantage of a situation that arises which can be advantageous for a cause. This has been highlighted in various contexts throughout this chapter and will be returned to in the thesis discussion (Chapter 7) As described by one participant "[REDACTED]
[REDACTED] [A018 ex government advisor].

One role of NGO advocacy that was highlighted in the interviews was to take advantage of opportunities that arise and use those conditions to their advantage in achieving their goals.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A03 NGO]

[REDACTED]
[REDACTED]
[REDACTED] [A015 ex government advisor]

[REDACTED]
[REDACTED]
[REDACTED] [A013 NGO]

A number of interview participants also highlighted the need for NGOs to, not only take advantage of opportunities and use them in their advocacy, but to actively look for opportunities and horizon scan in order to ensure they are ready to act at opportune moments.

[REDACTED]
[REDACTED]
[REDACTED] [A011 NGO]
[REDACTED]
[REDACTED]
[REDACTED] [A026 NGO]

There was also some discussion of opportunism in the context of advocacy organisations shaping and creating opportunities to achieve change, as well as being prepared to take advantage of opportunities and understanding the system in which you are working in order to be able to navigate.

[REDACTED]
[REDACTED] [A03 NGO]
[REDACTED]
[REDACTED]
[REDACTED] [A015 ex Government
advisor]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A08 food Industry]

Opportunism is returned to in the following chapter in the context of ways that NGOs are able to engage with the government as part of their advocacy.

4.7.3 Alignment of multiple factors

An observation from the research which was emphasised by the interview data is the fact that policy change and positive PHN conditions emerge from the alignment of multiple conditions. In all three policies used for this research, it was clear that many conditions supported and hindered change. As previously described, the combination of evidence, supporters, the government approach and FSA leadership were evident across all three. In addition, the labelling policy benefited from EU regulations and the marketing restrictions benefited from the Communications Act (2002).

The quotes below provide some reflections on this point.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A016
NGO]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A018 ex government advisor]

[REDACTED]
[REDACTED] [A027 nutrition consultant]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A022 Food industry]

We return to issues of evidence, opportunism and the alignment of conditions in the context of advocacy in later findings chapters, and will discuss these further in the discussion chapter, Chapter 7.

4.8 Chapter Summary

The research findings presented in this chapter illuminate our understanding of the landscape in which the PHN advocacy discussed in this thesis takes place, and some of the conditions which helped to shape this landscape. It helps provide answers to research question 1 by presenting some of the conditions which helped shape the landscape, and which can support or hinder advocacy itself, and the progress it makes.

Overall, the findings demonstrate that the political landscape was vital in underpinning the development of each of the three policies discussed, and that the peaks and troughs of public health policy reflect these wider politics. The findings highlight the way in which the policy terrain was subject to, and influenced by, many policy statements, reports and strategies from government departments and other government bodies. The UK underwent major political changes in this period and this chapter has shown some of the subtle ideological shifts – notably from a population to a more individualised approach – that can come with such changes, and the way this can influence specific policies.

The findings identified a number of conditions which appeared to support public health nutrition policy. Government leadership was highlighted as particularly important in determining the extent of progress and support for a policy issue. Conditions which presented a challenge to such policies included the 2010 election which gave the Conservative government power and the subsequent introduction of the PHRD. The PHRD not only reflected a deregulatory approach of the government, but an industry-driven approach based around pledges with no independent monitoring or accountability.

Given that the primary focus of this research is on advocacy with the view to informing a monitoring framework for PHN advocacy, it is useful to reflect on some of the implications the findings presented in this chapter may have on advocacy itself, and what may be important to reflect on in later chapters.

Firstly, the different conditions identified can support or inhibit public health nutrition policy, and thus by default the success of PHN advocacy itself. The conditions presented reflect a mix of factors, some of which are relevant at different points in time, and some of which have both supportive and hindering properties (e.g. the EU regulations). Overtime the balance of supportive and hindering conditions can

change, and in turn influence the nature of the policy discussions, the need for advocacy, and the progress that NGO advocacy can make towards goals.

Related to this are the similarities and differences identified between the three policy spotlights, providing useful insight to some of the important conditions which PHN advocates have faced and should potentially consider in future advocacy planning. The majority of conditions identified in this chapter are relevant to two, if not three of the policies, thus helping make some generalisations for PHN advocacy in England. This includes the emergence of new evidence, the leadership of the FSA, the weaknesses of the PHRD, policy champions and public support. In other cases, the conditions were unique to each of the policies, for instance the introduction of the Communications Act (2002) for food marketing, the EU regulations for labelling and the history of salt in relation to the COMA recommendations. In addition, some of the conditions, particularly relating to the degree of opposition, were seen to be more relevant to some of the policies. Furthermore, the changeability of the landscape, particularly the political landscape, has emerged as an important condition in the context of policy change. The political landscape through the 2000s allowed for some progress in public health policy, but changes in 2010 meant a return to a focus on population health rather than individual health. For advocacy, we can reflect that this changes the needs, priorities and expectations of advocacy over time and suggests a need to understand the policy being advocated for and what opportunities or mechanisms may be important for progressing advocacy goals.

Overall, this chapter has described the range of conditions which were identified from the findings as having supported or hindered policy and advocacy, drawing on both interview data and three policy spotlights. It provides valuable insights which help us to answer the first research question posed at the start of this research, that is a question of what conditions support and hinder PHN advocacy in England. The interaction between the identified conditions and advocacy itself are an important theme that will be picked up in the discussion in chapter 7.

The following chapter presents the research findings related to the tactics and approaches to advocacy.

5 Advocacy tactics and approaches

This chapter presents the research findings related to **Research Question 2 – What advocacy tactics are adopted by NGOs working in public health nutrition**. It presents the tactics that were identified in the research findings, grouping them according to some of the key themes that emerged in relation to tactics and goals, drawing on the data from interviews and document analysis of NGO reports.

5.1 Introduction

The literature presented in Chapter 2 identified range of actions that can be carried out as part of advocacy. However, there was limited research identified which specifically focused on the advocacy carried out by NGOs in public health nutrition. This chapter therefore explores some of the ways in which PHN NGOs operate and the activities that they prioritise. The findings inform the answer to Research Question 2 and, along with the findings presented in the previous and following chapter, help to build a picture of PHN advocacy carried out by NGOs and what is or might be effective. The specific research objectives relevant to this chapter included a desire to:

- Identify the goals of public health NGOs and compare their approaches to advocacy
- Identify tactics and methods of advocacy that are used by public health NGOs
- Identify opportunities for NGO engagement in policy development
- Explore the value of advocacy and which tactics are considered most important
- Explore the relationships and engagement between NGOs and different actors
- Explore how NGOs hold other actors to account and the value of such activities

This chapter primarily draws on data from the documentary analysis of annual reports of four NGOs as well as insights from the semi-structured elite interviews. Where appropriate, data presented in chapter 4 has been reflected on to help validate and support what is being described, particularly in relation to government engagement. The two main data sources presented here provide complementary perspectives on advocacy, with the NGO reports providing information on what was done, and the interviews providing more insight as to the awareness of different activities and the perceived value of each by different actors. In both cases, relevant passages of text from the reports and transcripts were analysed and coded according to the types of activity referred to. Through an iterative process, these were refined into a list of activities, as well as grouped as several themes which form the structure of this chapter. More details on the methods used were described in Chapter 3. The two data sources have been integrated and used as appropriate across the sections.

The chapter starts with a description of the different activities carried out by each of the NGOs, before presenting the findings in more detail according to the broad themes emerging from the research. A

range of activities and considerations for advocacy are explored, including agenda-setting, public engagement, forming coalitions and influencing/engaging government and industry. This closely aligns with the approaches identified in the literature review in chapter 2, though have been adapted according to the research findings and emphasis on different actions.

5.2 Types of advocacy and NGOs

As reflected in the literature in chapter 2, NGO advocacy involves a number of different activities which have different roles. When exploring the roles and activities of NGOs in the interviews it was clear from the findings that NGOs are not seen as a homogenous entity and the different NGOs exist and work in different ways. The interview participants reflected on the differences between NGOs, typically in relation to the degree to which the NGOs engages with government and the degree to which they work inside or outside of the system. This fits with the inside/outside distinction presented in the literature review in Chapter 2. The following two quotes highlight this point, as well as the complementary nature of different approaches.

[REDACTED]

[A026 NGO]

[REDACTED]

[A013 NGO]

In addition, it was evident from the array of actions presented in the reports and the advocacy descriptions in the interviews that the breadth of actions that make up a campaign are important. When discussing attributes of effective advocacy, a number of the interview participants reflected on the breadth of activities carried out by an NGO or as part of a campaign, spanning media, engagement with government, public campaigns.

[REDACTED]

[A026 NGO – research]

As described in Chapter 3, the four NGOs used in the research were selected due to their different focuses and priorities. An overview of each of the NGOs was provided in Table 3.5 in chapter 3 and the range of activities undertaken by each of the NGOs that were identified in this research are presented in Table 5.1.

A number of similarities and differences between the four NGOs are shown in Table 3.5 and 5.1. For instance, both CASH and UKHF were set up by medical professionals and it was evident from the annual reports that they undertake academic work and policy analyses alongside or as part of their wider advocacy. Sustain's CFC and Which? on the other hand were found to be more consumer and public orientated, and this was reflected by the more extensive reporting of engaging the public in campaigns throughout their annual reports. Food and nutrition policy underpin the entirety of the work of CASH and Sustain's CFC, while food is just one component of the work that UKHF and Which? undertake.

Overall, there were a lot of similarities identified in the activities of CASH, Which? and Sustain's CFC, particularly in their use of the media, engaging with formal policy processes, undertaking surveys and forming coalitions and networks. The activities of CASH represent the greatest breadth of actions, with public driven campaigns being the only action listed in Table 5.1 that was not identified in the CASH annual reports. UKHF was found to undertake the narrowest range of activities, and did not engage in any public engagement activities, unlike the others.

The proceeding sections will explore some of these areas and specific activities in more depth. In some cases, overlap was found, and in these cases were discussed in the area considered most relevant and then referred back to in the other. Four overarching themes relevant to advocacy were identified from this research and are used to present the findings throughout the rest of this chapter. These include raising the profile of an issue, networks and coalitions, representing the public and influencing decision-makers.

Table 5-1: Specific tactics identified in the NGO annual reports

NGO	Summary of activity types	Issue profile						Networks and coalitions			Public engagement and representation					Influencing and engaging decision-makers				
		Policy analysis	Tracking of government progress	Evidence translation and info sharing (briefs and reports)	Reactive media	Awareness media	Dissemination media	Engagement with actors at meetings/dialogues	NGO coalitions – formal or informal	Building broad alliances/membership	Consumer-led advocacy campaign	Public engagement	Annual/reoccurring awareness campaign	Celebrity engagement	Public opinion surveys	Consultations	Advisory boards a multi-stakeholder platforms	Supporting or leading bills, PMQs and EDMs	Targeting specific MPs	Product surveys
CASH	Carries out a range of activities, both inside and outside the system. Product surveys and related media are a key part of their activities to raise awareness about salt, dietary sources and to stimulate industry reformulation. Of the NGOs looked at CASH demonstrated the most engagement with industry and industry actions.	y	y	y	y	y	y	y	y	y	n	y	y	y	y	y	y	y	y	
Which?	Which? operates both inside (member of lots of groups, high politician access) and outside (monitoring, challenging) Government. Activities appear targeted at both corporations who provide the products to consumers and the government level policies that influence this. As a consumer organisation they undertake a lot of public engagement activities.	n	y	y	y	n	y	y	y	y	y	y	n	n	y	y	y	y	y	y
Sustain's Children's Food Campaign	Majority of activities appear focused on challenging government, holding to account, running publicity campaigns, getting consumer support and presenting the evidence. Some but not a lot of examples of working inside the system.	n	y	y	y	y	y	y	y	y	y	y	n	y	y	y	y	y	y	y
UK Health Forum	Strong emphasis on working with government e.g sitting on many panel and committees, undertaking research for government, responding to consultations and working with government authorities. Publish a number of reports and briefings, highlighting action that needs to be taken by government and food companies.	y	y	y	y	n	n	y	y	y	n	n	n	n	n	y	y	n	n	n

Source: Author

5.3 Raising the profile of an issue

The first of the four themes we will focus on is ‘raising the profile of an issue’ which refers to the way in which advocates work to ensure that other actors are aware of the issues that are being advocated on. This was highlighted in chapter 2 primarily in the context of agenda-setting and framing.

Across the interviews there was a strong consensus about the role of NGOs and NGO advocacy in taking a position and seeking change on a particular issue.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] [A09 NGO]

[REDACTED] [A012 NGO Campaign]

[REDACTED]

[REDACTED]

[REDACTED] [A022 Food industry]

[REDACTED]

[REDACTED] [A020 Academic]

These comments suggest that an important consideration in the context of advocacy and raising the profile of an issue is the messaging and positioning of NGOs, and the means of communication used to disseminate these messages. A number of important components of messages were highlighted, including that they are evidence-based, clear, solution-orientated and consistent, as well as the way that messages are disseminated, particularly in the context of media. These are each described in turn.

5.3.1 Messaging

Evidence-based messaging

As described in Chapter 4, the evidence-base of advocacy messaging emerged as a particularly strong theme across the interviews in the context of the conditions. In the quotes below, evidence is cited as important for credibility, developing positions and ensuring accuracy of those positions.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] [A03 NGO]

[REDACTED]
[REDACTED]
[REDACTED] [A029 NGO]

[REDACTED]
[REDACTED] [A05 Campaigner]

This point was particularly apparent in the discussions with industry and government representatives. The first quote below highlights an industry perspective of wanting to see the evidence of effectiveness for what they were being asked to do by advocates, while the second quote suggests that evidence is a ‘weapon’ that NGOs can give to political leaders to be used in a political fight.

[REDACTED]
[REDACTED]
[REDACTED]
[A021 food Industry]

[REDACTED]
[REDACTED]
[REDACTED]
[A09 Academic]

The importance of evidence-based messages was further emphasised in some of the critiques of NGOs which referred to inadequate and inaccurate evidence as a potential weakness of NGOs, as demonstrated in the below three quotes.

[REDACTED]
[REDACTED]
[REDACTED] [A010
food Industry]

[REDACTED]
[REDACTED]
[REDACTED] [A027 Nutrition
Consultant]

A number of research-based activities were identified as being undertaken by the NGOs as part of their advocacy, including reports, briefings, policy analyses and information service platforms, all of which would have helped to shape their messaging and strengthen the evidence base. For instance, the UKHF reports to 'develop international modelling collaborations and to 'coordinate the production of two Lancet series of NCDs and obesity' [UKHF Annual Report 2012-13], while CASH reported on a number of academic publications related to their work, including tracking salt reductions in key food categories such as bread, and documenting the UK's salt reduction journey. A number of other specific activities are provided below.

With the support of the British Heart Foundation, we are now beginning a major project to research, and report on, how a system of statutory regulation for non-broadcast advertising could be implemented.

[Sustain Annual Report 2006-07]

In response to the Leatherhead Report, we produced our own report to highlight this fact and to provide examples of products in each of the problem categories which already meet the targets.

[CASH Annual Report 2013-14]

The NHF published a report commissioned by the Department of Health on mapping the regulatory controls and the gaps on the marketing of high in fat, sugar and salt processed foods (HFSS) to children and young people.

[UKHF Annual Report 2011-12]

Message clarity

Message clarity refers to the extent that advocacy is focused on clear and simple messaging. The need for clear messaging was highlighted in the interviews as important for gaining traction and understanding amongst key audiences, as shown in the below quotes.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] [A025 ex government advisor]

[REDACTED]
[REDACTED]
[REDACTED] [A013 NGO]
[REDACTED]
[REDACTED]
[REDACTED] [A01 NGO]

Furthermore, tailoring messages for different audiences to ensure they have what they need was also cited as an important consideration, recognising that different audiences' value different things. As shown by the quotes below, a government department may respond best to evidence and solution orientated messaging, while MPs may respond to messaging focused on their constituency needs.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A01 NGO]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A025 ex Government advisor]

Linked to this are messages which focus on public opinion and the human-interest story. This is discussed in more detail in 5.5 but is useful to reflect on here as a type of message that might be used by NGOs to target certain audiences as part of their advocacy. Two quotes reflecting this point are below.

[REDACTED]
[REDACTED]
[REDACTED] [A020 Academic]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A08 Food Industry]

Message consistency

Message consistency reflects the alignment of messaging used by different actors. The interview participants reflected on the need for consistency in messaging across the NGO sector, demonstrating a united view and position on an issue.

[REDACTED]

[REDACTED]

[REDACTED] [A015 ex government advisor]

[REDACTED]

[REDACTED]

[REDACTED] [A03 NGO]

Similarly, a lack of consistency between NGO messaging was highlighted as problematic for government and industry when trying to create the will for change as it can create confusion, thus further emphasising the need for NGOs to align their messages.

[REDACTED]

[REDACTED] [A016
NGO]

[REDACTED]

[REDACTED]

[REDACTED] [A010
food Industry]

This links to section 5.4 which will focus on networking and supporters as a part of advocacy and highlights the value of NGOs working together as part of their advocacy.

Overall, we can see from these findings the importance of ensuring that the messaging used in advocacy is appropriate and tailored in order to gain traction and help raise the profile of a particular issue.

5.3.2 Media

Media describes both the traditional and social public dissemination of messages, through TV, radio, internet and social media. A range of different ways in which advocacy messages can be communicated were identified in both datasets and many of the activities identified fulfil this role (see table 5.1). For instance, using the media, contributing to the formal policy process, running public campaigns, publishing reports and networking all help to raise the profile of an issue. This section will focus specifically on the role of media in advocacy which was highlighted as particularly important and

common across both data sets for the raising the profile of an issue. The other means of raising the profile of an issue have a range of purposes, and are identified throughout this chapter, for instance contributions to the formal policy development process are in 5.6 and public campaigns in 5.5.

The interviewees presented media as an important advocacy mechanism for communicating a message and for helping set the agenda, something of particular relevance in the context of this section on raising the profile of an issue. A range of perspectives on this point are shown below.

[REDACTED]

[REDACTED] [A02 NGO]

[REDACTED]

[REDACTED] [A014 Academic]

[REDACTED]

[REDACTED]

[REDACTED] [A010 Food industry]

The media was also described as a key source of NGO power as it is a channel for communicating about key issues, reaching a range of people including the public and decision-makers.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] [A012 NGO]

[REDACTED]

[REDACTED] [A022 Food industry]

The NGO reports also provided some insight into the different ways that the media is commonly used as part of communication in advocacy. For instance in the reports of Sustain's CFC and CASH the media was primarily described as a dissemination and awareness raising tool. There were also examples of the NGOs reacting to external stories in the media and being approached for comment. In addition, some of the interview participants highlighted the media as a source of power for NGOs.

The most common example of media use identified in the annual reports was as a dissemination mechanism for research done by the NGOs, for instance relating to a recent survey they had done. In these cases, the media was described as being supportive of their campaigns.

CASH has had a busy year campaigning to reduce salt in our foods with strong media support for our surveys, reaching millions of people.

[CASH Annual Report 2010-11]

We attracted media attention with our report, *Soft Drinks, Hard Sell*, exposing misleading marketing of soft drinks to children and their parents.

[Sustain Annual Report 2011-12]

In October 2011 we were joined by other public health advocates in criticising the Department of Health's grossly inadequate obesity "call to action" and received considerable media coverage.

[Sustain Annual Report 2011-12]

The reports also included examples of the media being used to raise awareness on a particular topic, with reference to it being used to maintain the public profile of an issue.

Kept the issue in the public eye – not only in the UK but internationally – through countless appearance on TV and radio, in newspapers and magazines, and at a variety of public events and conferences

[Sustain Annual Report 2005-06]

Our media work in 2008 – 2009 has focused mainly on food eaten outside the home. We feel that this sector has not made as much effort as the retail sector in reducing the amount of salt it adds to its products, perhaps because there is no requirement to provide labelling or nutritional information. Our aim this year has therefore been to raise awareness of the fact that foods bought outside the home may be very high in salt.

[CASH Annual Report 2008-09]

Echoing this, the interviews highlighted the role of the media for raising awareness about an issue, and for disseminating the findings of research, recognising that the research itself is unlikely to reach important end users, including the public. This was highlighted in a number of the interviews, however, was more prominently discussed in the interviews with government advisors. More discussion on public engagement and representation is in section 5.5.

[REDACTED]
[REDACTED] [A01 NGO]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A025 ex Government advisor]

On a similar note, the media was highlighted as having a role in putting pressure on ministers and MPs to act by presenting an issue and a perception of risk if action is not taken. This point was primarily discussed by the campaign NGOs interviewed.

[REDACTED]
[REDACTED]
[REDACTED] [A013 NGO]
[REDACTED]
[REDACTED] [A016
NGO]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A02 NGO]

In the case of CASH, there were a number of references across their reports to their use of media and PR as a key component of their campaign. CASH also referred to examples of being asked by the media to respond to an external story.

As in previous years, CASH has continued to invest much time and effort in waging a vigorous PR campaign, with press releases distributed proactively, roughly on a monthly basis.

[CASH Annual report 2006-07]

CASH was contacted by a Sunday Times journalist asking for comment on a story concerning misleading labelling on Tesco products. The resulting story appeared on the front page of the paper, including a prominent quote from Professor Graham MacGregor.

[CASH Annual Report 2004-05]

Finally, despite the strong and positive emphasis on media as part of advocacy, a number of criticisms about the way the media is used were highlighted, primarily related to the emphasis on media coverage itself rather than the change that has occurred as a result. This links back to earlier comments on message quality, and the need for careful consideration about what is said and how it is presented.

[REDACTED]
[REDACTED] *[A019 ex Government advisor]*

Overall, we can see that developing clear, consistent and evidence-based messaging, and using the media to raise awareness and disseminate messages, are two keyways in which NGOs work to raise the profile of an issue as part of their advocacy. Media in particular is a common theme in both the advocacy literature and in the findings of this research, and in the following chapter we will return to it as a measure of advocacy effectiveness.

5.4 Networks and coalitions

This section focuses on the collaboration seen between NGOs, an important element of advocacy identified in the literature presented in chapter 2, as well as in this research. Collaborations between NGOs and other actors are also reflected elsewhere in this chapter. The proceeding sections specifically explore the engagement identified between NGOs and the public (5.5) and NGOs and decision makers (5.6).

It was evident from the reports that the NGOs do not work in isolation and collaboration can take a variety of forms. The NGO reports identified a number of ways in which the NGOs reported to engage with other NGOs. Collaboration between NGOs was found to have a number of functions, including to create common positions, develop consistent messages, provide a platform for shared and complementary actions and to give power and credibility to those organisations. In most cases, NGO collaboration was described as positively in the interviews, however some tensions around competition and funding challenges were also highlighted.

There were various examples across the reports of NGOs working together as part of their advocacy. In some cases, this was a collaboration between a couple of organisations working on a specific project, campaign or action, as demonstrated in the examples below. This includes NGOs working together on an ad-hoc basis, writing joint statements and consultation responses, doing joint research and supporting each other's campaigns.

We have continued to work with partners to make the case for the traffic light colour-coded nutrition labelling scheme developed by the Food Standards Agency (FSA), and have joined the official supporters and adopters' group for the scheme.

[Sustain Annual Report 2007-08]

CASH and other health charities including the British Heart Foundation, Which?, UK health Forum and Diabetes UK fed into the consultation on the type, and also the look and feel of the labelling.

[CASH Annual Report 2013-14]

There were also examples of the collaboration being more formalised through broader coalitions of organisations working together through their membership or other alliances. For instance, Sustain is set up as an alliance, and the working group of the Children's Food Campaign is made up of various NGOs and other interested parties.

[We have continued] to build a powerful non-governmental organisations (NGO)/professional public health nutrition lobby to challenge the health damaging sectors of the processed food industry

[UKHF Annual Report 2007-08]

Our Children's Food Campaign, in partnership with the British Heart Foundation, has continued to pressure industry and Government to improve food standards and restrict the marketing and promotion of unhealthy and unsustainable food.

[Sustain Annual Report 2014-15]

The role of coalitions was also raised in the interviews, either as complementary to an organisations existing activity or as the primary way in which NGOs worked on policy issues as shown in the second quote below.

[REDACTED]

[REDACTED]

[REDACTED] [A02 NGO]

[REDACTED]

[REDACTED] [A01 NGO]

One benefit of collaborations that was highlighted in the interviews was for bringing together a range of organisations who have different approaches to their advocacy and therefore collectively employ a range of actions as part of advocacy on an issue.

[REDACTED]

[REDACTED] [A013 NGO]

[REDACTED]

[REDACTED] [A026 NGO]

[REDACTED]

[REDACTED] [A016 NGO]

Another benefit of collaborating is the consistency in messaging this can bring, as described in section 5.3.1.

There was a sense from the interviews that NGO collaboration provides additional power and legitimacy to the organisations and to their messaging, in addition to the public support. With collaboration comes strength in numbers, something which was suggested results in a degree of power for the NGOs, something which is particularly important when NGOs are commonly seen to have less power compared to other actors. In turn this can support the credibility of messages.

[REDACTED]

[REDACTED] [A026 NGO]

[REDACTED]

[REDACTED] [A016 NGO]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A012 NGO]

While the overall relationship between NGOs was described as positive and beneficial, a number of challenges also emerged from the data. For instance, as shown in the below quotes, when trying to establish common positions and common ground there is a risk that one organisation's messaging doesn't get the traction they think it deserves which in turn can directly and indirectly the funding available to them. For instance if an issue is perceived as not being prioritised it may not receive as much funding directed at it, and similarly organisations are perceived to become in competition with each other for funding if they are all working on the same issue.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A09 NGO]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A07 NGO]

Overall, collaborations between NGOs can be seen as a key feature of NGO advocacy which can help to progress goals and gain traction. We return to this in the discussion in Chapter 7.

5.5 Representing and engaging the public

Representing and engaging the public in advocacy is documented in the existing literature, particularly in the context of development NGOs, and refers to the way in which advocates interact with members of the general public, explicitly and implicitly. Through the interviews and annual reports, a number of examples of representing and engaging the public were identified however, overall, the actions described were very 'top down' with little evidence of engagement or empowerment of communities in policy.

Across the interviews, there was a lot of discussion around the role that NGOs play in terms of representing the views of the public and giving them a voice in policy discussions, as demonstrated in the quotes below.

[REDACTED]

[REDACTED] [A07 NGO]

[REDACTED]

[REDACTED]

[REDACTED] [A015 ex government advisor]

[REDACTED]

[REDACTED] [A05 campaigner]

[REDACTED]

[REDACTED] [A03 NGO]

[REDACTED]

[REDACTED] [A011 NGO]

However, a number of participants phrased the engagement and representation of the public in terms of ‘shaping opinions’, which iterates this idea of a top down approach to engagement and representation which is focused on garnering public support, rather than advocacy which is driven from the bottom up.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] [A08 food industry]

[REDACTED]

[REDACTED] [A025 ex Government advisor]

[REDACTED]

[REDACTED] [A07 NGO]

This top down focus was explicitly reflected on by one participant, who suggested there was limited grassroots activism evident in public health nutrition, while another reflected on the need to engage

communities to understand what problems they face and what policies would benefit them, and that this process is vital for ensuring NGO legitimacy.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] [A010 food industry]

[REDACTED]

[REDACTED]

[REDACTED]

[A09 NGO]

The NGO reports provided some insight into the way that the public are engaged as part of the organisation's strategies. This was most apparent in the Sustain's CFC and Which? reports, which referred to building alliances and strategically engaging consumers in elements of their campaigns to give the public a voice. In the case of Which?, a consumer organisation, the key priorities they work on are driven by the public themselves, whereas the driver of the issues was less apparent in the Sustain reports.

The voice of the consumer is essential to Which?'s campaigning work, and in 2007/08 we have been actively engaging people to ensure that their views and experiences reach policymakers and industry directly.

[Which? Annual Report 2007-08]

[Sustain is] increasingly focused on raising public awareness and involvement. An eye-catching campaign leaflet was developed which incorporated postcards for individual public supporters to send to their MP and also to the Sustain office.

[Sustain Annual Report 2004-05]

In addition to raising public awareness about salt through our high-profile media campaign, we continue to educate the public and health professionals on the importance of salt reduction through dedicated pages on our website for consumers and health care professionals, and through our resources.

[CASH Annual Report 2006-07]

The use of specific campaigns was found to be the main way that the NGOs in this research worked with the public, with the goal of engaging the public and raising awareness of the issue. These campaigns typically took one of two forms, either as an awareness raising campaign which is ongoing, or a policy focused campaign which has a specific relevance at a point in time. The campaigns themselves often encompass a number of the different tactics referred to throughout this chapter, with the main difference being that the campaigns are typically used to build a support base for calls to action and to engage members of the public.

One important reflection here is the way that campaigning differed between the NGOs. For instance, the Children's Food Campaign which is used as one of the NGOs in this research is a specific campaign in itself of an umbrella organisation, Sustain, while also running a number of sub-campaigns as part of the activities of the Children's Food Campaign. Meanwhile, in the case of Which?, information was taken specifically from the food campaign area of work, which again included a number of specific sub-campaigns. CASH was initially set up as a campaign NGO on a specific topic, and runs an annual Awareness Week campaign, alongside their other advocacy. No examples of campaigning were found in the UKHF reports.

Capturing public opinion and using this to frame messages to achieve change was identified across both datasets. This was briefly reflected in section 5.3 around messaging. As demonstrated in the quotes below, demonstrating public support for an issue taps into a particular mindset of MPs and companies who want to follow public demands on issues, while also serving as a resource to NGOs to build legitimacy.

[REDACTED]

[REDACTED] [A01 NGO]

[REDACTED]

[REDACTED]

[REDACTED] [A02 NGO]

[REDACTED] [A025 ex government advisor]

[REDACTED] [A012 NGO]

Two examples of public opinion surveys identified in the annual reports are presented below, the first from CASH is an example of a survey used to get information on the level of consumer awareness about salt. The second is an example from Which? and explores consumer understanding in relation to food

labelling. In both these examples, the results were used to help support policy calls on the respective issues.

Over 2,000 people took part in a survey we carried out in conjunction with the parenting website Netmums to find out how much parents know about salt and children's health and why it is important to limit the amount of salt children eat. Almost all those who took part (99.5%) knew that eating too much salt is linked with raised blood pressure. But far fewer knew that salt is linked with stomach cancer, osteoporosis and aggravation of the symptoms of asthma reflecting the need to raise public awareness about the other negative health effects of eating too much salt.

[CASH Annual Report 2007-08]

We published new research that showed how confusing such schemes are for the consumer and demonstrated that the FSA system is the most useful. Nearly all (97 per cent) consumers were able to identify correctly and compare recommended levels of nutrients using the 'traffic light' system. On the other hand, almost three quarters (73 per cent) of consumers said that different types of labels would be confusing. One consistent scheme will allow consumers to make informed and healthy decisions every time they buy food. We will be putting pressure on retailers and manufacturers to adopt the FSA scheme.

[Which? Annual Report 2005-06]

Related to public awareness is the role of education and the overlaps that exist with advocacy. As discussed in chapters 1 and 2, there are a number of tensions between upstream and downstream approaches to population change, and the role of education in PHN strategies is one these. The industry representatives in particular described education as part of the activities required when working towards healthier diets and improved health.

[REDACTED]
[REDACTED] [A021
food Industry]

[REDACTED]
[REDACTED] [A022 *food
Industry]*

Although there were examples of the NGOs distributing resources and information materials to the public, the NGO and academic interviewees tended to reflect on education in the context of raising awareness and getting support for a policy change rather than as the driver of change in its own right.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A014]

Academic]

[REDACTED]
[REDACTED] [A07 – NGO]

To summarise, a number of different approaches for engaging the public as part of advocacy have been identified here, with a particular focus on top down engagement, a discussion we return to in chapter 7 in the context of legitimacy.

5.6 Influencing and engaging with decision-makers

This section reflects on the way that NGOs were reported to engage directly with decision-makers both within government and industry in order to influence their positions and actions. These two factors have been grouped together to reflect on the fact that much of the NGO advocacy identified in this research focused on targeting companies in parallel to governments. In addition, the ways in which NGOs hold these actors to account as part of their engagement is presented.

5.6.1 NGO-Government interactions

As reflected in chapter 2 and in section 5.2 of this chapter, one way of looking at NGOs and their activities is to determine whether or not they work inside or outside of the formal policy making process. The previous sections in this chapter have primarily reflected on some of the outside and informal ways that NGOs seek to influence decision-makers, through media, research and engaging the public. This section will therefore reflect on some of the inside and more formal and direct tactics that can be used by NGOs.

The interviews presented a fairly weak relationship between government and NGOs in England. However, as described in Chapter 4 a number of opportunities can arise for NGOs to engage with formal policy processes which allow for interactions between government and NGOs. Some of the key opportunities identified from the policy spotlights are presented in Table 5.2. These can be broadly summarised as being committees, consultations, government-funded research, multi-stakeholder platforms (primarily in the context of PHRD) and supporting Bills and Early Day Motions (EDMs). A

number of these opportunities were invitation only (primarily the committees), while others were open access (particularly consultations). In some cases, the action itself as driven by the NGO (in the case of EDMs and direct MP engagement).

Table 5-2: Examples of interactions between NGOs and government identified in this research

Opportunity for engagement	Type	Policy issue	Access
FSA nutrition committee	Committee	General	Invitation
DH food and drink forum	Committee	General	Invitation
Stakeholder meetings for target setting	Committee	Salt	Invitation
Supporters and adopters' meetings/ group	Committee	Labelling	Invitation
Stakeholder roundtable	Committee	Labelling	Invitation
Ofcom consultation 1	Consultation	Marketing	Open
Ofcom consultation 2	Consultation	Marketing	Open
Nutrient Profiling consultation (FSA- led) 1	Consultation	Marketing	Open
Nutrient Profiling consultation (FSA- led) 2	Consultation	Marketing	Open
Nutrient profiling consultation (FSA- led) 3	Consultation	Marketing	Open
Consultation 1	Consultation	Salt	Open
Consultation 2	Consultation	Salt	Open
Consultation on FOPNL types	Consultation	Labelling	Open
Department of Health Consultation on FOPNL	Consultation	Labelling	Open
Consultation on sugar criteria for labelling	Consultation	Labelling	Open
FOPNL framework pre-consultation document	Consultation	Labelling	Open
Responsibility Deal food working group	PHRD	General	Open
Multi stakeholder platform and engagement through pledges	PHRD	General	Open
Health Select Committee inquiry on Obesity (oral)	Hearing	General	Invited
Health Select Committee inquiry on Obesity (written)	Hearing	General	Open
Commissioned research projects	Research	Marketing	Open
Funded projects	Research	Salt	Open
Workshop on FOPNL	Workshop	Labelling	Invitation
Supporting or leading on Bills, PMQs and EDMs	Bills/PMQs/EDMs	General	Open (NGO driven)
Targeting specific MPs or government officials	Targeting MPs	General	Open (NGO driven)

Source: author

Responding to consultations and participating in hearings was common practice across the NGOs. Consultations are opportunities for the NGOs to present an argument which either supports or challenge policy proposals, while participation in hearings is more of a way to raise the profile of an

issue and to get it on an agenda. The policies presented in chapter 4 highlighted a number of consultation processes that NGOs were able to contribute to in all policies.

We also gave evidence to the Health Select Committee Inquiry into obesity, which came out with some strong recommendations for action by the food industry and government.

[Which? Annual Report 2003-04]

The campaign has also responded to a large number of relevant consultation documents. Key among these have been those issued by the Food Standards Agency on its nutrition profiling system and “traffic light” signposting scheme, which the campaign supports as a robust method of defining “junk” food, so that it can be properly regulated.

[Sustain Annual Report 2005-06]

CASH respond to Government consultations that cover health issues. We also attend relevant stakeholder meetings in relation to these consultations.

[CASH Annual Report 2005-06]

Examples of multi-stakeholder platforms, working groups, consultation meetings and advisory groups were also cited throughout the annual reports as opportunities for the NGOs to engage. This ranged from engaging with the PHRD, to working with FSA on salt targets, and to discussing labelling with FSA, DH and other parties.

The UKHF (NHF) has been active in the DH Responsibility Deal and been challenging industry for more progress on salt reduction, alcohol by volume reductions and sponsorship and marketing.

[UKHF Annual Report 2012-13]

CASH attended all scheduled meetings with the DH and fought strongly to ensure significant reductions were made.

[CASH Annual Report 2014-15]

CASH joined the Associate Parliamentary Food and Health Forum at the end of 2002 and Professor MacGregor has been invited to speak on a number of occasions. This forum enables us to put questions forward for discussion

[CASH Annual Report 2003-04]

Much of the discussion around government in the interviews focused on these multi-stakeholder platforms. Overall, they were not considered that favourably, instead reflecting a weak relationship between government and NGOs, as described in the previous chapter (chapter 4).

[REDACTED]
[REDACTED]
[REDACTED] [A016 NGO]

As highlighted previously, there were a number of examples of NGOs engaging directly with government officials and MPs, but outside of existing policy development processes. For instance, there were examples of the NGOs working directly within central government and Westminster, targeting MPs and supporting or initiating Bills, Early Day Motions and Prime Minister Questions. Unlike the previous examples, these activities would likely be more agenda-setting focused than policy development.

An Early Day Motion (EDM) has been signed by over 40 MPs on the salt content of foods and the need to make reductions. We will be targeting more MPs to help carry this EDM through in the Autumn.

[CASH Annual Report 2003-04]

Our work to protect children from junk food advertising and marketing has dominated the year and we have pursued two bills in Parliament. The first, sponsored by Baroness Thornton, called for a 9pm watershed for junk food television adverts. The second, introduced by former consumer minister Nigel Griffiths MP, called for stopping all forms of junk food marketing aimed at children.

[Sustain Annual Report 2007-08]

Furthermore, the NGO reports also provided examples of NGOs campaigning on a particular policy issue through more informal avenues. This includes activities such as writing to MPs, lobbying ahead of party conferences, as well as general campaigning (5.6) and using the media (5.3).

We take the opportunity at all three-Party conferences and our Summer Parliamentary reception to talk about the broader programme of work carried out by Which?

[Which Annual Report 2005-06]

In Spring 2010, we worked closely with the British Heart Foundation to lobby MEPs in the run-up to a plenary vote in the European Parliament on whether traffic light labelling should be made mandatory across the EU. We sent a joint letter to all UK MEPs and national broadsheet newspapers, and also encouraged our supporters to write to their own MEPs through an online action

[Sustain Annual Report 2010-11]

Government interviewees described their relationship with NGOs based on perceived ‘helpfulness’ of the organisation, and the extent to which the NGOs provided solutions and constructive input or that they were more adversarial and ‘shouty’. The ‘unhelpful’ NGOs were described as being time consuming and adding additional burden to the department.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] [A015 NGO]

A number of opportunities have been identified for NGOs to engage with government through formal processes, though overall the engagement between them has emerged as weak. Different NGOs engage with government to different extents, and this reflects back to the types of NGOs and activities described at the beginning of this chapter.

5.6.2 NGO-industry interactions

The relationship between NGOs and industry was discussed in the interviews. Compared to government interactions and the engagement between NGOs, the engagement with industry was described as being weak and adversarial. Key concepts that emerged in the discussions focused on lack of trust, comparison to tobacco industry and opportunities for more dialogue. The annual reports provided limited examples of industry and NGOs engaging, with the exception being CASH who engaged with the purpose of survey follow up (see 5.6.3).

The relationship between NGOs and industry was generally presented as adversarial. Sectors blamed each other for the state of the relationship and there appeared to be a mutual lack of trust in each other. As demonstrated in the quotes below, NGOs and academics focused on the nature of food industry tactics and positioning as a basis not to work with industry.

[REDACTED]
[REDACTED]
[REDACTED] [A02 NGO]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A016 NGO]

Meanwhile, the industry and some government representatives focused on the narrow and generalised perception that NGOs often have of industry actors, and a general lack of trust between NGOs and industry, as detrimental to engagement and progress.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A019 – ex government advisor]
[REDACTED]
[REDACTED]
[REDACTED] [A025 food Industry]

A dialogue between food industry actors and NGO actors came across as the main opportunity for the two sectors working together.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A07 NGO]
[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED] *[A028 food industry]*

The key purpose of dialogue that was described was as a way to understand each other's perspectives. This was described as a two-way process, with recognition that both 'sides' need to improve their dialogue with the other as shown in the quotes below. The first quote is particularly interesting as it criticises the perception that an NGO which seeks to understand the position of the private sector as part of their strategy, is weak and no longer representing the public interest.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] *[A09 NGO]*
[REDACTED]
[REDACTED]
[REDACTED] *[A016 NGO]*
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] *[A08 food Industry]*

There was some reflection on the fact that there might be a role for some NGOs to take on the role of working with industry, akin to the inside/outside approach seen when engaging with government.

[REDACTED]
[REDACTED]
[REDACTED] *[A013 NGO]*

Finally, although there was little discussion on the reason for the distrust between sectors, it is possible to reflect on the comparisons with the tobacco industry which were highlighted in chapters 1 and 2, as well as in some of the interviews. A number of NGO and academic actors who were interviewed made comparisons between the food and tobacco industries, suggesting that the history of tobacco companies is a reason not to work with food companies and for the lack of trust between the two sectors.

[REDACTED]
[REDACTED]
[REDACTED] [A020 academic]

However, there were examples of the food companies themselves citing this comparison as an underlying factor contributing to the lack of trust and lack of progress in food.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A021 food industry].

Overall, the findings suggest a weak relationship between NGOs and industry actors, although some opportunities for engagement were identified.

5.6.3 Holding actors to account

As noted in chapter 2, an important role of NGOs is to act as independent monitors of government and industry actions and commitments and have a role in holding them to account. This is a unique role the NGOs have as it is not a role that the other major actors – government and industry – tend to play. There was a general consensus across the interviews that the ‘watchdog’ role is an important function of NGO advocacy in public health nutrition, and the way in which NGOs can influence government and industry.

[REDACTED]
[REDACTED] [A016 NGO]
[REDACTED]
[REDACTED] [A019 ex Government advisor]

There was extensive reference to examples of holding to account throughout the NGO reports. The main mechanism for this is through surveys which highlight progress towards goals, and in the context of this research is most commonly seen in relation to the food industry and their products. This was particularly seen in the Annual Reports of CASH, Sustain’s CFC and Which? (See Table 5.1) The surveys focused primarily on the food industry and benchmark progress towards meeting targets or acting in line with the NGO’s campaign goals. This research was often presented in the form of a report and was

distributed and promoted via the media. In the case of Sustain's CFC and Which? the surveys tended to focus broadly on a specific policy area, such as labelling, marketing or reformulation.

In April 2012 we launched Checkouts Checked Out, a report highlighting the continued marketing of junk food at the tills and queuing areas of supermarkets and other retailers.

[Sustain Annual Report 2013-14]

In 'Cereal Offenders', we drew attention to the high levels of fat, sugar and salt in breakfast cereals

[Which? Annual Report 2003-04]

CASH appeared to have the most prolific survey campaign, repeating surveys over time and presenting the findings as league tables, with the best and worst examples highlighted. The data was used to highlight progress according to targets, surprising sources of dietary salt, and using the low examples to show that salt reduction is possible⁵.

The surveys were also found to play a role in the wider NGO strategy. For instance, CASH was found to carry out multiple repeat surveys on the salt content of different products and food categories throughout the year to track progress over time. The surveys were also presented in reports, disseminated through the media and used as the basis of dialogue with companies, as previously described.

We carried out a survey of 81 ready-made salad dishes on sale in supermarkets and other food outlets such as Pret a Manger, McDonalds and Coffee Republic. The results showed that some salads contain around 6g of salt in a single serving.

[CASH Annual Report 2005-06]

There were also examples of the NGOs using surveys and benchmarking in the context of government policy, highlighting gaps and weaknesses in policy and the areas for improvement. This was particularly relevant in the context of the Government's PHRD, described in the previous chapter, where NGOs played a watchdog role in relation to the voluntary pledges.

⁵ www.actiononsalt.org.uk/salt-surveys for more information

Our *The Irresponsibility Deal?* report, published in September 2011, examined the first wave of Responsibility Deal food pledges and concluded that a voluntary approach was unlikely to be successful because it could be – and already was being – ignored by the food industry.

[Sustain Annual Report 2012-13]

We also published our *Hungry for Change* report which looked at the efforts of UK governments and the food industry over the last five years to help consumers make healthier choices. [...] The report recognised positive initiatives, such as improvements in the quality of school meals, but it also highlighted significant problems that remained, from confusing health and nutrition claims on products packed with sugar, salt or fat to the continuing poor quality of hospital food

[Which? Annual Report 2008-2009]

While the NGO reports were useful for identifying specific examples of holding to account, the interviews provided more insight around the role that this can play. Two key functions of this benchmarking work were identified in the interviews. The first was to leverage action by identifying the problem, what action is needed and where it is most needed, as demonstrated in the quotes below.

[Redacted]
[Redacted]
[Redacted]
[Redacted] [A026 NGO]

[Redacted]
[Redacted] [A016 NGO]

The second value of benchmarking activities that was emerged was to incentivise change amongst companies, feeding into a competitive business model and building on the internal market driven competitiveness of companies, as shown in the below selection of quotes.

[Redacted]
[Redacted] [A012
NGO]
[Redacted]
[Redacted] [A010 food industry]

[REDACTED]

[REDACTED]

[REDACTED] [A020 Academic]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] [A07 NGO]

Linked to this point of incentive, is a reflection on the way in which the survey data is presented. Typically the framing of benchmarking is in the context of highlighting gaps and where progress is needed, but an argument for also highlighting areas of improvement and good practice was put forward by some of the industry participants who suggested that recognition of what they have done is equally valuable in terms of incentivising further change. It was recognised that in many cases this was not regularly done in practice, although a number of NGOs were starting to do this in their work.

[REDACTED]

[REDACTED]

[REDACTED] [A022 food industry]

[REDACTED]

[REDACTED]

[REDACTED] [A019 ex government advisor]

5.7 Chapter summary

This chapter presents the findings related to RQ 2 – what advocacy tactics are used by NGOs – primarily drawing on data from the interviews and NGO annual reports. The policy review and exploration of conditions presented in the previous chapter was also drawn on as appropriate. The data sets present useful parallels on the NGO tactics, with the reports providing insight into what is done and the interviews providing more insight into the role different actions play and the value they have in the context of policy change. Combined, these help to build a picture of not only the tactics used, but the role of different NGO actions and what should be prioritised and considered when planning and monitoring advocacy. This also provides insight on other considerations such as messaging and framing which did not come across in the reports.

Both the interviews and annual reports presented a similar picture of the PHN advocacy carried out by NGOs in England. It was clear that the advocacy is focused upstream, targeting government and the processed food industry, but that it has a number of functions including to raise the profile of an issue,

forming networks, engaging decision-makers and engaging and representing the public. Specific areas of alignment between the two data sets include the focus on media, collaboration and evidence/research. These closely relate to the themes that were drawn from the literature and presented in Chapter 2.

An important finding that has emerged from the data presented in this chapter is the breadth of the advocacy carried out by NGOs working in food and nutrition, and the complementary nature of these actions. Much of this breadth is seen between NGOs, however, is was also evident within the NGOs. breadth is an important consideration for exploring opportunities to develop a monitoring framework for advocacy. A number of the interview participants reflected on the idea of inside and outside NGOs, which was also described in chapters 1 and 2. On the one hand, 'outside' actions were described by some participants as 'shouty' and focused on the media and other public and visible forms of advocacy. Often, but not always, this type of advocacy is used when an issue is not on the government agenda, or when the government is not perceived to be acting sufficiently. On the other hand, less visible and public-focused actions were also described, focusing more 'inside' the formal policy development process and involving meetings, dialogue and other direct interactions with government and other key decision-makers on topics which are under negotiation. This breadth is picked up as a key theme in Chapter 7.

Although not a tactic in its own right, messaging emerged from the interview data as relevant to this research in terms of the effectiveness and legitimacy of an NGO. A number of key message qualities were identified, including that they are clear, evidence-based, solution-orientated and tailored to different audiences, while also drawing on the views and perspectives of the public where possible. This suggests that the way in which messages are crafted is an important consideration when looking to plan effective campaigns.

Chapters 1 and 2 touched upon issues relating to actors, power tensions, as well as policy theories such as Advocacy Coalition Framework which focus on interactions between NGOs as a core part of advocacy and policy change. As such, a key question in the interviews focused on relationships and how NGOs work with different actors as part of their advocacy. The key findings related to relationships were that collaboration between NGOs is important for joint messaging, power and credibility. Meanwhile, tensions were highlighted between NGOs and industry actors, and a mixed relationship highlighted between NGOs and government which is primarily focused around specific actions related to the development of a policy. There was some suggestion that more dialogue between industry and NGOs could be helpful, building on the existing work that is done for instance by CASH as follow up to surveys. Although there was some evidence of engaging the public as part of NGOs campaigns, there was limited

evidence of the advocacy in this research looking to empower the public or to take a bottom up approach. However, the interview participants highlighted the importance of NGOs representing the public and this was cited as another part of credible NGOs.

The role of NGOs in holding government and industry to account was discussed in the interviews and numerous examples were found in the NGO reports. Surveys help to identify issue and incentivise change, particularly amongst the food industry by identifying gaps and weakness in current approaches. It was suggested that NGOs should also highlight positive examples in order to create incentive for action and to highlight where progress has been made. The media was highlighted as an important tool used by NGOs to help with message dissemination and raising awareness and was used to help share the findings of the benchmarking surveys. Overall, the media was seen as a valuable part of NGO advocacy, though there was some reflection on the quality of the news story and ensuring that media coverage is not the only focus. This links to some of the findings presented in the following chapter on measuring advocacy.

Throughout this chapter a number of cross-cutting considerations which may be valuable for helping NGOs to improve their activity portfolio have been identified. These include understanding the attributes of a credible NGO or campaign, the way in which they represent the public, opportunities for dialogue with the industry to increase trust and understanding, understanding where different NGOs sit, and finally what activities help increase the power of the NGOs. These considerations will be important for identifying measures and developing a monitoring framework for advocacy which we return to in the following chapters. Overall, this chapter has presented a number of tactics that PHN advocates can and do undertake as part of their advocacy with a particular emphasis on the rationale and context for many of these actions which aid our understanding of the role that NGO advocacy plays in public health nutrition.

The following chapter, the final of the three results chapters of this thesis, continues with some of the themes identified in this chapter and explores the measures of these advocacy tactics in more detail.

6 Measuring public health nutrition advocacy

This chapter is the final results chapter and presents the research findings related to **Research Question 3 - How can the effectiveness of public health nutrition advocacy be measured?** – drawing on the data collected from interviews and NGO reports. It describes the range of measures which are either used in practice or perceived to be important when exploring the effectiveness of advocacy and is presented according to the type of measure identified.

6.1 Introduction

A key component of this research is a question of if and how we can measure PHN advocacy by NGOs and how such measures could inform a measuring framework for advocacy. The literature presented in Chapter 2 highlighted the lack of consensus around how to measure and report on NGO and advocacy impact. It presented a number of different ways that advocacy can be measured, ranging from planning frameworks to impact assessments and retrospective studies. In many cases these frameworks measured just one dimension of change, and did not link back to goals, specific tactics or conditions. Measuring and understanding progress is a vital part of any ongoing evaluation for improvement and can be considered particularly important for NGOs which often struggle to find a voice in the policy process against powerful interests. The indicators and approaches presented in this chapter will be used alongside the findings of the previous chapters to propose a number of considerations for a framework to support planning and monitoring r PHN advocacy in order to improve our understanding of the specific role that advocacy plays in the development of public health nutrition policies in England, as well as serve as a practical tool for NGOs (see Chapter 7).

This chapter therefore explores the ways in which the effectiveness of PHN advocacy can be measured. The analysis is based on the specific indicators used by NGOs and other stakeholders when discussing or reporting on advocacy, while also drawing on the attributes of successful advocacy which were described by the interview participants. This chapter builds on the previous chapter which focused on advocacy tactics, focusing on the specific measures and attributes of success of these activities. The findings presented in this chapter inform the answer to research question 3. The specific objectives relevant to the research presented in this chapter were to:

- Identify the measures used by NGOs in their reporting of annual activities
- Explore perceptions of what makes successful advocacy and the indicators that are or could be used to measure this

This chapter, as with the other findings chapters, draws on the documentary analysis of annual reports of four NGOs as well as semi-structured interviews. In these, participants were asked how they define advocacy success, and what metrics/measures they believe should be used to evaluate it. They were

also asked for examples of successful and unsuccessful advocacy. For both data sources, relevant passages of text from the reports or interview transcripts was analysed and coded according to the types of indicator or measures included. Through an iterative process, these were refined into a list of types of indicators identified from each data source, as well as grouped as several themes which form the structure of this chapter. More details on the methods used were described in Chapter 3. To help aid the categorisation of indicator type, the indicators identified were also grouped according to whether they measured process, outcome, progress and impact, drawing on Table 2.2 presented in chapter 2.

This chapter starts with a brief reflection on the way success is reported on and described in each of the two data sets, and some of the key indicators identified in each which are summarised in Tables 6.1 and 6.2. In turn, these indicators were used to identify the cross-cutting indicators that emerged from this data which have been used to present the findings in this chapter. In each of these sections, data is presented from the NGO reports and then from the interviews, providing more detail on some of the specific indicators that were identified from each source. The chapter discussion reflects on the findings and makes a number of observations which will be discussed in more detail in chapter 7.

6.2 NGO reporting of success

It is first important to reflect on the different ways in which activities were reported on by the four NGOs, reflecting the different reporting styles and approaches to assessing advocacy that are used. These differences presented some challenges for analysis and made it difficult to directly compare the reports, thus word frequencies or other quantitative measures were not appropriate. The differences are in themselves interesting, and the data collected still allowed the researcher to build a picture of the elements of advocacy that each NGO prioritises for reporting purposes.

The annual reports of CASH, Sustain's CFC and Which? all contained a combination of activity description, outcomes and progress being made towards goals, as well as some indication of future priorities. Unlike the others, the UKHF reported almost solely on a description of activities undertaken and plans for the following year. Interestingly however, in 2014 the UKHF introduced a specific impact report, which focused on several case studies of work from the year and the direct outcomes and progress made as a result of those actions.

The range of advocacy actions presented in the reports was described in chapter 5 and are therefore not reported on again, however it is relevant to note that a significant proportion of all the reports was based on a description of activities (process measures) rather than on results and outcomes. A range of measures were identified from across the reports, with the most common being media coverage,

government and industry action, number of supporters and campaign recognition. The main indicators identified from the NGO reports are described in Table 6.1.

Table 6-1: Indicators identified in the NGO annual reports and interviews

Type	Category*	Description	NGO reports where used
Impact	Diet change (6.4)	Reported dietary change, for instance reduction in salt intake	CASH
Impact	Health outcome (6.4)	Indication that health has improved in the population of interest, for instance reduced BP, heart disease or obesity	CASH
Impact / progress	Government policy or action (6.5)	Examples of government action or commitment in line with specific policy e.g. introducing a new policy on labelling	All
Impact/ progress	Industry commitment or action (6.5)	Examples of industry acting or commitment in line with specific policy e.g. reducing salt content or committing to traffic light labelling	All
Outcome	Inaction (6.5)	When NGO specifically reports on a lack of progress by government or industry, or a concern not being upheld	Sustain's CFC
Outcome	Media coverage (6.7)	Any description of media coverage achieved by an NGO, for instance reach, named examples, number of articles	Sustain's CFC, CASH
Outcome	Reach (6.7)	Examples of resource distribution and readers, for instance number of leaflets distributed, followers on social media, event attendance or website visitors.	All
Outcome	Public support and mobilisation (6.8)	A specific type of supporter, this refers to descriptions of engaging the public, for instance the number of individuals who joined or took part in a campaign activity, wrote letters etc.	CASH, Sustain's CFC, Which?
Outcome	Reaction (6.6)	When a specific reaction is described, either positively or negatively, to a specific action or process undertaken by the NGO e.g. government positively respond, or industry criticises position through the media or statements	CASH, Sustain's CFC
Process/ outcome	Campaign or organisation Recognition (6.6)	Examples of the campaign being recognised as effective e.g. through an award or invitation to prestigious event or committee	Sustain's CFC, CASH
Process/ outcome	Support received (6.8)	Examples of new supporters, allies or relationships between NGO and others, particularly from high-profile actors	All
Process / outcome	Access to the policy process (6.6)	Used to categorise actions relating specifically to policy process, such as expert committees or advisory groups, typically by invitation	UKHF, Which?
Process	Collaborations (6.8)	Used to describe any description of collaboration between the NGOs and other actors, including with high-profile actors	UKHF, Sustain's CFC, CASH
Process	Sustained action (6.9)	When organisation refers to ongoing efforts on a specific issue	Which?, Sustain's CFC, CASH

*Number in brackets denotes section number where the indicator is described in more detail

Source: Author

There was a strong focus on outcome indicators, which describe the immediate result of specific actions. Overall, there is some consistency in the indicators used between the NGOs, including industry/government action, reach and support which were used by all four of the NGOs. However, there were also differences which link to the type of tactics used by each of the NGOs, demonstrating

the relevance of different indicators for different tactics. These differences can also be linked to the primary focus of the advocacy itself; CASH was the only NGO to use dietary change (salt) and thus an impact indicator, likely due to the ease that this information is available compared to other impacts in PHN. In some cases, the indicators have been grouped as potentially two types of indicator, indicating that the context in which an indicator is used plays an important role in the level of change it measures. For instance, if the goal is to secure a policy then industry or government action is an impact (often found to be the case with Sustain's CFC activities, for instance), whereas if changes to diet are the goal (as in the case of CASH), then the presence of a policy is an indicator of progress.

6.3 Perspectives on success in interviews

The interviews provided valuable data for exploring what advocacy success looks like and how it can be measured, compared to the more practical insight gained from the NGO reports which only provided information on what specific indicators have been used by each.

The specific definitions of success offered by the interview participants took one of two forms. In some cases, the unit of measurement was the NGO and the activities that they carry out to achieve change, and in other cases the policy itself was defined as the success with an implicit link to advocacy influencing that change.

When success was defined by the quality of the advocacy and the fact (or presumed fact) that it contributed to policy change, the unit of success used was often the NGOs themselves, reflecting on the strategies and actions that they undertook. The following quotes provide examples of such an approach, in each case reflecting on the success of an NGO's activities as a whole.

[REDACTED]
[REDACTED]
[REDACTED] [A019 ex Government
Advisor]
[REDACTED]
[REDACTED]
[REDACTED] [A07 NGO]

Media]

[A09 Academic]

168

[REDACTED]
[REDACTED]
[REDACTED] [A02 NGO]
[REDACTED] [A013 NGO]

It was also suggested that the political climate or context may dictate the types of role that an NGO plays at a given time, and thus what the specific goals and in turn measures of success are. This links back to some of the findings presented in Chapter 4 around the conditions which influence advocacy.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A015 Ex government advisor]

Finally, the need for milestone indicators which represent some activities or change as part of the process was also recognised across the interviews as a useful way of tracking progress of advocacy, within the context of achieving the longer-term goals. Such milestone indicators form the basis of the measuring seen in the NGO reports. When assessing the success of an NGO, it was evident that this is done using a range of indicators, rather than just one.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A020 Academic]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A013 NGO]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A011 NGO]

As with the NGO reports, a number of specific indicators for measuring PHN advocacy were identified from the interview data. Many of these were the same or similar to those identified in the NGO reports, including government and industry action, media coverage and support. Overall, there was less focus on the process and outcome indicators in the context of measuring advocacy compared to the NGO reports. In addition, there was a greater range of indicators described which serve to measure progress towards government or industry action, such as industry engagement, government leadership and investment, which were not picked up on in the NGO reports.

Table 6-2: Indicators identified in the interviews

Type	Category*	Description
Impact	Health outcome (6.4)	Indication that health has improved in the population of interest, for instance reduced BP, heart disease or obesity
Impact	Behaviour change (6.4)	Changes to the way people shop or prepare food. May also include changes to diet
Impact	Government policy or action (6.5)	Examples of government action or commitment in line with specific policy e.g. introducing a new policy on labelling
Progress	Industry commitment and action (6.5)	Examples of industry acting or commitment in line with specific policy e.g. reducing salt content or committing to traffic light labelling
Progress	Government leadership (6.5)	A government official or department takes the lead on a policy discussion and/or the process towards a policy, for instance facilitating expert meetings or funding policy research
Progress	Change in rhetoric/norm	Shift in the norm or general rhetoric on a specific policy issues or the policy type
Progress/outcome	Message adoption (6.6)	NGO messaging adopted by others and included in reports/strategies
Progress/outcome	Industry support and engagement (6.5)	Examples of industry supporting the cause, willing to engage in discussions with the NGOs, collaborate in a meaningful way
Progress	Investment (6.5)	Examples of other actors investing in the topic, for instance in funding research or campaigns
Outcome	Media coverage (6.7)	Any description of media coverage achieved by an NGO, for instance reach, named examples, number of articles
Outcome	Awareness (6.6)	Awareness of an issue or campaign.
Outcome	Public support and mobilisation (6.8)	A specific type of supporter, this refers to descriptions of engaging the public, for instance the number of individuals who joined or took part in a campaign activity, wrote letters etc.

*Number in brackets denotes section number where the indicator is described in more detail

Source: author

The following sections report on some of the key indicators identified by combining and refining the indicators presented for each data source. In the following sections, more detailed findings in relation

to each of the types of indicators are presented, in each case drawing first on the relevant findings from NGO reports and then from the interviews.

6.4 Diet, health or behaviour change

This section describes impact measures, which in the context of this research include the diet, health or behaviour change which results from advocacy. Such indicators may include data which tracks improvements to population health or diets, as well as behaviour change in relation to food and/or purchase behaviour. There were limited examples provided in either data set, but the key ones reported on include salt intake and health change.

NGO reports

There were limited examples of such changes identified in the NGO reports, likely due to limited availability of such data. The one example that was identified was in the Annual Reports of CASH which included details of an FSA announcement that salt intake across the UK population had reduced to 8.6g per day as well as reporting on reduced deaths from heart disease and stroke (CASH Annual Report, 2008-09).

Interviews

The use of diet, health or behaviour change indicators of success builds on previous comments that advocacy success should be measured in relation to the NGOs goals. Although such indicators were considered ideal, the challenges associated with them were recognised and appear to outweigh the benefits.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] [A01 NGO]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] [A016 NGO]

6.5 Government or industry action

Actions or commitments by government and industry were one of the most frequently used measures in the NGO reports and interviews. These measures could be described as progress or impact, dependent on the type of action taken and the goals of the NGO. Government and industry actions are much easier to measure compared to the diet, health and behaviour change indicators described previously. Examples identified in the research include the introduction of new policies, commitment by retailers to a voluntary policy, and examples of reformulation of certain products or categories.

NGO reports

Examples of government action cited in the NGO reports include the introduction of a new policy such as front-of-pack labelling or a more general commitment to act in a certain area, as demonstrated in the extracts below. The first two focus on the introduction of two of the key policies focused on in Chapter 4, marketing and labelling, while the third refers to a specific component of marketing policy which was being advocated for (9pm watershed).

In summer 2013 the Food Standards Agency announced new front-of-pack traffic light labelling scheme, for which we have lobbied, with our members, for many years.

[Sustain Annual Report 2013-14]

On kids' food, successes include Ofcom proposing to restrict the advertising of unhealthy food during TV programmes that appeal to under 16-year-olds and also agreeing to use the FSA's nutrient profile model to determine which foods will be restricted.

[Which? Annual Report 2006-07]

February 2010 saw a big victory for our campaign when Culture Secretary, [name]⁶ announced there would be no product placement of foods high in fat, salt or sugar. The win is particularly significant as, for the first time, the Government has recognised that children need protecting from junk food advertising in all their viewing, not just during children's programming.

[Sustain Annual Report 2009-10]

Overall, most examples of government action provided throughout the NGO reports do not reflect on the degree of policy implementation, simply the presence of, or commitment to, a policy. However, examples of upheld complaints relating to adverts, as shown in the below quote, can also be considered a type of government action and reflect the way in which policy is implemented. Reflecting back on

⁶ MP name removed

section 5.6.3 in the previous chapter, this example also serves as an example of an NGO holding the government and industry accountable for their actions.

Children's Food Campaign 1, Honey Monster 0: our complaint about dodgy Honey Puffs marketing upheld by Advertising Standards Authority.

[Sustain Annual Report 2014-15]

Although the focus of reporting in the NGO reports was primarily on positive actions that had been taken in line with campaign calls, there were also examples of inaction being reflected on by the NGOs. For instance, Sustain's CFC reflected on a Bill they had been championing which did not progress, and there were also reflections on EU labelling debates and the industry lobbying which was undermining progress and some elements of the legislation, described in chapter 4. In both cases some of the positives which still came out from the discussions and advocacy were reported on, for instance in the EU legislation national schemes were eventually permitted, and the Bill being championed by Sustain's CFC helped to build a strong support base for their wide advocacy.

Although both bills ultimately failed, they have proved useful for recruiting supporters and promoting our arguments.

[Sustain Annual Report 2007-08]

Examples of industry actions identified from the reports primarily included new commitments made by the companies, for instance to introduce traffic light labelling, reduce salt content of their products or to reduce in store marketing. The examples varied in the degree of progress that they represented, in that some commitments related to an entire product range, while others to specific products. The focus on industry action was particularly prevalent in the CASH Annual Reports, though examples were found across the NGO reports. Three examples are provided in the extracts below. The first focuses on companies committing to use traffic light labelling on their products, the second refers to two specific actions by different companies in relation to specific policy areas, and the third relates to company commitment to a specific pledge as part of the PHRD.

Mars UK, Nestlé UK, PepsiCo UK, and Premier Foods announced that they would join all the major retailers – including Sainsbury's, Tesco, Asda, Morrisons, the Co-operative and Waitrose – in using the consistent label on their own-brand products.

[Sustain Annual Report 2013-14]

We started to see the fruits of our campaigning, with Kellogg's removing its health claims related to 'improved concentration' and 'healthy bones' from its cereal packets and launching a 'reduced sugar' Frosties cereal. Heinz is another company that took action this year by reducing the level of salt in its tinned soups.

[Which? Annual Report 2004-05]

Over 50 companies that have signed up to the salt reduction pledge within the Responsibility Deal so far have agreed to reduce salt in their foods by 15% over the next 2 years to meet the 2012 salt targets, which were negotiated by CASH and the Food Standards Agency with the food industry in 2008.

[CASH Annual Report 2010-11]

In the above examples, a direct link to the advocacy undertaken by the NGO is not evident, instead the change has been used as a proxy indicator for change with the link assumed based on the specific action aligned with the advocacy being done. However, there were a number of examples in the reports where the direct link between the commitment made and the advocacy was clearer. For instance, there were examples of product changes being made as a result of a name and shame survey carried out by CASH, as well as of adverts being withdrawn following a complaint by Sustain's CFC, as demonstrated in the extracts below.

Jamie Oliver has made an incredible reduction in his pasta sauce following our release. The salt content has come down from 5.3g to 0.9g per portion – over 80%!

[CASH Annual Report 2009-10]

In a big win for the Children's Food Campaign, on the eve of the case becoming public, Nestlé removed the offending Nesquik website and replaced it with a basic corporate page. The ASA's actual ruling (or rather lack of one) also provided us with more evidence of the ineffectiveness of the voluntary marketing code.

[Sustain Annual Report 2013-14]

Interviews

As with the NGO reports, government and industry action were a common measure of success described across the interviews, reflecting the goals of advocacy described in chapter 5.

[REDACTED]
[REDACTED] [A01 NGO]

In most cases the indicators relating to government focused on a specific policy change however there were also examples of shifts in government language and government leadership on an issue being used as measures of progress as well.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A02 NGO]

Another indicator related to government action was increased investment and funding in activities related to the issue being advocated on.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A029 NGO]

6.6 Campaign recognition

This section reflects on campaign recognition as an outcome or progress indicator of effectiveness and progress. Types of recognition reported on include recognition of the organisation's authority on an issue, recommendations included in a report, celebrity adopting campaign as their own, evidence of influencers using NGOs research data and the reaction of industry to the campaign.

NGO reports

Campaign recognition was cited throughout the NGO reports and is particularly relevant in the context of 'inside' or 'formal' advocacy which often relies on recognition of the NGOs credibility, as described

in previous findings chapters. Campaign recognition was demonstrated in a number of ways, including awards, invitations to present at events or to participate in committees or meetings.

As our profile has risen over the past few years, we have seen an increase in the number of media calls and enquiries we receive directly or via the website.

[CASH Annual Report 2004-2005]

Sustain's CFC's Junk Free Zones concept referenced in Public Health England (PHE) sugar reduction strategy.

[Sustain Annual Report 2014-15]

Contributing to the formal policy process and being granted access to various policy platforms were described throughout the NGO reports. Arguably, these are outcome indicators as the access reflects a degree of recognition of the NGO's expertise, unlike actions such as contributing to consultations which are processes. Access to policy platforms was a common feature of the UKHF reports, reflective of both the nature of the reporting style and organisation type (less campaign-orientated and more research). For instance, they reported that they 'Became an official DH third sector strategic partner' [UK Health Forum Annual Report 2008-2009] and that they had 'been playing a key role in developing and implementing the Healthy Weight: Healthy Lives strategy. [UKHF Annual Report 2009-10]

The way in which different actors perceive or react to a campaign is relevant here as well. Across the reports, there were a number of examples of government positively responding, or industry criticising a position. In one case, CASH reported on a reduction in backlash, with the implication of this being a campaign success whereby opponents were being defeated.

We have not seen much attempt at a 'backlash' from the salt industry over the past year, and there has been hardly any coverage of their comments and statements. We are also finding that the Food and Drink Federation does not attempt to challenge the findings of our research, and has reduced its comment on our releases to bland statements along the lines of the industry has done much to reduce salt and continues to do so .

[CASH Annual Report 2006-07]

Interviews

As with the NGO data, the interview data also suggested that awareness and campaign recognition is an important indicator of success. The first of the below quotes demonstrates the value placed on raising awareness by some campaigners, while the second links the importance of awareness to other factors which contribute to momentum on an issue.

[REDACTED]
[REDACTED] [A05 Campaigner]
[REDACTED]
[REDACTED] [A015 ex Government advisor]

Compared to the NGO reports, the examples of campaign recognition described in the interviews were different. There were a number of examples whereby the participants reflected on message recognition and adoption by different stakeholders. The following three quotes give different examples of this, the first two describe an example of an MP and a government official using data from a specific campaign to challenge the leading government, while the third describes an example of a celebrity working in parallel to NGOs on a specific topic in order to create change.

[REDACTED]
[REDACTED] [A01 NGO]
[REDACTED]
[REDACTED] [A014 Academic]
[REDACTED]
[REDACTED]
[REDACTED]
[A013 NGO]

Related to awareness and recognition is the reaction to a campaign, particularly by industry. This was discussed by several participants in the context of the industry reaction to a message or campaign serving as an indicator that they were on the right track and focusing on the right issues. This perspective is likely grounded in a view that public interest policies are required for public health gain, and that these policies often challenge corporate interest, market and power. The first of the below quotes reflects simply on food industry being ‘annoyed’ with a campaign, while the second draws on the experience of tobacco with respect to industry reaction and actions to certain policy suggestions. The final quote reflects on NGO activities resulting in industry conceding and thus taking the steps being advocated for.

[REDACTED]
[REDACTED] [A029 NGO]

⁷ name of MP removed

⁸ name of senior minister removed

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] [A020 Academic]

[REDACTED]

[REDACTED]

[REDACTED] [A013 NGO]

This links back to a point reflected on in the NGO reports about a reduction in backlash demonstrating campaign success, suggesting that campaigns may go through a cycle whereby there is initial backlash before conceding to the policies being discussed. It also builds on some of the findings related to agenda-setting and influencing decision-makers described in chapter 5, as well as some of the conditions described in chapter 4.

6.7 Media coverage and reach

This section relates to the use of media by NGOs, building on what was described in chapter 5, and the way in which media coverage can be used as an outcome measure. The key measures identified in this research include the range of newspapers containing coverage, the number of readers of those papers and a sustained level of media coverage on a given topic.

NGO reports

The role of media in advocacy has been a reoccurring theme throughout this research, and as such the focus on media coverage within NGO reports is to be expected. Media coverage was described in detail, particularly by CASH and Sustain's CFC, with examples of the breadth of media outlets reporting on an issue, as well as numbers of readers and estimated reach. CASH has a strong PR element to its campaign plan. The NGOs primarily reported on media coverage of their own reports and/or events, such as salt awareness week, rather than on the issues they were advocating on.

Our analysis received considerable media interest, including quotes and commentaries in the *Daily Mail*, *Guardian*, *Daily Telegraph* and *Observer* newspapers and inclusion in a discussion broadcast by the Radio 4 *You and Yours* programme.

[Sustain Annual Report 2010-11]

There was excellent coverage of SAD on 109 radio stations, 64 taking a studio interview with Professor Graham MacGregor (including Phoenix and IRN) and 45 played the audio feature. Total audience reach was over 8 million with total air coverage of over 8 hours. There were also 9 BBC radio station interviews, with a total audience reach of over 1,657,000.

[CASH Annual Report 2004-05]

In most case the media coverage was in itself considered a success, however there were also a number of examples of specific outcomes of the media including actions taken by companies and responses from Ministers.

[The] report of our survey, *Junk Food for Babies?*, is available, and was requested by the Department of Health for the attention of the relevant minister. As a result of our campaign, the baby food manufacturer Cow & Gate withdrew the baby biscuits containing the trans fats from the market.

[Sustain Annual Report 2009-10]

The letter received media coverage and led to a personal response from both the minister and his special adviser.

[Sustain Annual Report 2010-11]

Media coverage was not the only form of reach identified in the reports, which was also described in terms of the number of people that may have seen a campaign message through other means such as from a campaign leaflet, by downloading a report, or attending an event.

The report has been enormously successful, with 18,000 copies downloaded and over 3,500 parents joining the campaign and contributing their own stories and opinions on the problems caused by aggressive marketing tactics; 10,000 copies of tips to help parents beat the tricks have been distributed.

[Which? Annual Report 2005-06]

Many supporting organisations included the campaign leaflets in their members' mailings and 50,000 were distributed.

[Sustain Annual Report 2003-04]

Feedback from users has been fantastic, with downloads reaching over 10,000.

[CASH Annual Report 2014-15]

Reach was identified as a particularly important measure for specific campaigns, such as CASH's annual Salt Awareness Week. SAW has its own comprehensive evaluation based on the activities and engagement with various stakeholders. The evaluation was primarily about process and measured quantitatively. It included the number of people who attended the parliamentary reception, the reach and value of media coverage, the number of resources that were distributed, the number of supporting events that took place and the number of formal NGO and corporate supporters that there were for the week (e.g. Consensus Action on Salt & Health, 2013).

Interviews

Media coverage was also identified in the interviews as a key measure of success, primarily in the context of getting coverage for campaign goals. As shown in the quote below, repeat media coverage is also an important measure of success, and links to points made in this chapter about the role of sustained campaigning (6.3.7).

[REDACTED]
[REDACTED]
[REDACTED]. [A02 NGO]

However, while media was commonly seen as an important part of advocacy this was not a view held by all participants, some of whom raised concern about the usefulness of the indicator and the insight it provides. This links back to the earlier point around goals and units of measurement.

[REDACTED]
[REDACTED] [A019 ex Government advisor]
[REDACTED]
[REDACTED] [A011 NGO]

Finally, reach was also raised in the interviews, but was done so in a slightly dismissive way, suggesting that the weakness of such indicators is recognised, and it is often used due to there being nothing better, rather than because it is thought to demonstrate something.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] [A026 NGO]

6.8 Supporters, collaboration and public mobilisation

This section reflects on supporters and collaborations as examples of effective advocacy, building on the description of networks, coalitions and public engagement in chapter 4 and 5. Getting new supporters may be an example of a process indicators in the context of establishing groundwork for a campaign, or they may be an outcome or progress indicators in the context of more people becoming aware of a campaign or issue and becoming involved. One example of progress in this context would be when a previous opponent becomes supportive. Examples of measures include specifics such as the number of new supporters, as well as more descriptive examples of specific influencers who came on board or spoke out in support.

NGO reports

Support for the NGO and calls to action has been described in previous chapters as an important attribute for building momentum on an issue. The number of new supporters of a campaign is an example of an outcome indicator, while working with supporters is a process. The types of support reported on in the NGO reports was wide ranging, from an MP supporting a call, to members of the public engaging with the campaign, new organisations joining up or food companies committing to support. The types of supporters most commonly reported on differed between the NGOs. Sustain's CFC for instance focused on alliances with other NGOs, while CASH focused on celebrity supporters and industry support. In most cases the support was in the context of shared objectives, aligned messaging or verbal support, rather than more formal or financial support.

We began the year with support from some 140 national organisations, 248 cross party MPs and 8,000 individuals, and ended it with more than 160 national bodies, 284 MPs and over 11,000 individuals, and all these numbers continue to rise.

[Sustain Annual Report 2005-06]

Tony Blair supported our call in a speech in Nottingham in July 2006, promising to act if the voluntary system does not work.

[Which? Annual Report 2005-06]

Somerfield has been publicly active in their support for CASH. Their shoppers have recently been informed of their new salt reduction policy.

[CASH Annual Report 2003-04]

The Committee also supported the UKHF recommendation that the traffic light front of pack nutritional labelling system should be supported by a Government awareness campaign.

[UK Health Forum Impact Report 2014-15]

As a direct result of our Salt Awareness days, held at the House of Commons, several MPs, [name]⁹, have pledged their support of our campaigns.

[CASH Annual Report 2003-04]

Public mobilisation is a specific form of support, referring to members of the public getting actively involved with a campaign. This could be described as either a process or outcome indicator, on the basis that engaging the public is part of the advocacy process, but also the fact that getting large number of people to engage is an outcome of other profile-raising activities of the organisation. Examples of public mobilisation included, for instance, the number of individuals sending a template letter or supporting a call to action. Public mobilisation and related factors featured particularly highly in the Which? Annual Reports, in line with their role as a consumer organisation, as well as the reports of Sustain's CFC and, in the context of Salt Awareness Week, CASH.

The Kids' Food Campaign mobilised people to take action by, for example, emailing their MP to support a Private Member's Bill proposing restrictions to the promotion of unhealthy foods to children. Hundreds of consumers took advantage of this opportunity to make their views heard. We have also distributed thousands of campaign packs and bags so that people can take action themselves.

[Which? Annual Report 2007-08]

As a result, over one thousand of our campaign supporters sent responses to the Government consultation, and a range of influential organisations including the Church of England, British Medical Association, National Union of Teachers and ISBA, the trade body representing British advertisers, spoke out publicly against product placement.

[Sustain Annual Report 2008-09]

Alliances and the process of working together is an important part of advocacy, as described in this and previous chapters. This section refers specifically to collaborative actions, for instance whereby a group of NGOs has come together to take a specific action.

⁹ MP names removed

CASH has been developing mutually beneficial alliances with other UK health charities.

[CASH Annual Report 2011-12]

Helped to prepare the position and garner support from third sector organisations on ensuring product placement for alcohol and high fat, salt, sugar foods were not allowed. The Government supported the position.

[UKHF Annual Report 2009-10]

Continuing to build a powerful non-governmental organisations (NGO)/professional public health nutrition lobby to challenge the health damaging sectors of the processed food industry.

[UKHF Annual Report 2009-10]

Interviews

Although the interviews highlighted a number of issues relating to public mobilisation (see chapter 5), there was less focus on public mobilisation and collaborations in the context of measuring advocacy success. However, there were some examples of NGOs reflecting on the benefit of collaboration, as shown in the quote below.

[Redacted quote]
[Redacted quote]
[Redacted quote] [A07 NGO]

6.9 Sustained action over time

This final section drawing on specific indicators reflects on sustained action over time and the need for continued advocacy by NGOs. This in itself is an example of process indicator, however, the nature of sustained action will likely increase the chance that an organisation starts to see progress and impact.

NGO reports

As described in previous chapters, advocacy is about more than just a single action, rather it is a series of different actions working both in parallel and over time. The annual reports represented a series of repeat actions taken over a period, with many similarities between the reports for the same NGO seen year on year as the NGOs maintained their activities and advocacy. Sustain's CFC, Which? and CASH all recognised this in their annual reports, reflecting on the fact that campaigning takes place over a long period of time, building momentum over time to keep the issue in the public eye.

Kept the issue in the public eye – not only in the UK but internationally – through countless appearance on TV and radio, in newspapers and magazines, and at a variety of public events and conferences.

[Sustain Annual Report 2005-06]

Our persistent campaigning against misleading health claims resulted in an EU list of approved claims and better food labelling.

[Which? Annual Report 2011-12]

Some issues require sustained research and campaigning over a number of years before we achieve success. Traffic-light nutrition labelling is one of them. After nine years of campaigning we secured major victories this year, with all the major food retailers and a number of leading manufacturers finally getting on board.

[Which? Annual Report 2012-13]

Thankfully, after years of discussion, a huge advance in public health was announced in October 2012, with the news that the DH plan to do just that, enabling shoppers to identify how much salt and other nutrients is in their food.

[CASH Annual Report 2013-14]

Linked to this is the concept of momentum, which can build over time as recognition, supporters, reach and political and company action increases.

Testament to the project officer's effectiveness that some initiatives had gained enough momentum to continue – albeit at a slower pace – throughout the year.

[Sustain Annual Report 2002-03]

6.10 Challenges of measuring

Several challenges relating to measuring advocacy were identified in the literature review in chapter 2. Similar challenges emerged from this research, particularly around attribution and the time delay in achieving campaign goals. In this section the NGO and interview data has been presented together, and some of the issues highlighted have overlaps with the conditions described in Chapter 4.

One challenge relates to attribution and the wider factors that contribute to policy change. This links to some of the considerations presented in chapter 4 around conditions and context.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] [A03 NGO]

[REDACTED]

[REDACTED]

[REDACTED] [A04 NGO]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] [A026 NGO]

Another challenge relates to changes that do not have a clear metric which would allow for measuring. For instance, the below quote suggests that nuanced language shifts can be a measure of success or progress, but questions how you can measure that.

[REDACTED]

[REDACTED]

[A09 Academic]

Similarly, issues around semi-wins and unexpected wins were identified. The below quotes highlight this point in the context of a policy issue which under consideration but not implemented, and a question of whether or not this represents success.

[REDACTED]

[REDACTED] [A026 NGO]

Another challenge faced by NGOs which emerged from the data relates to the use of milestone indicators described throughout this chapter. It is important to recognise the limitations of such indicators for measuring true progress, and often many of the milestones and activities are in place and yet change still does not happen. On the one hand, this reinforces the value of milestone indicators which help to measure the success of a campaign in isolation of wider conditions, however on the other this highlights the weakness of such indicators and reiterates the value of the impact and longer-term indicators.

[REDACTED]
 [REDACTED]
 [REDACTED]
 [REDACTED]
 [REDACTED] [A013: NGO]

Finally, a number of other challenges exist for NGOs when it comes to measuring their advocacy, not least the lack of available data, time delays for seeing progress and impact and a lack of resources to invest in evaluation.

[REDACTED]
 [REDACTED]
 [REDACTED] [A014 Academic]
 [REDACTED]
 [REDACTED]
 [REDACTED] [A029 NGO]

These challenges echo those described in Chapter 2 and will represent important considerations for the development of a proposed monitoring framework for PHN advocacy, which we will explore in the following chapter.

6.11 Chapter summary

This chapter has presented a range of different measures of advocacy success. In some cases, these are based on the way in which organisations currently report on their advocacy and in others it draws on the way in which advocacy is described by various actors. The key measures/ indicators that were identified through the research determined the structure of this chapter and include:

- Health, behaviour or diet change
- Government action and policy implementation
- Industry action and commitment
- Campaign recognition
- Media coverage and reach
- Supporters, collaboration and public mobilisation
- Sustained action over time

A number of specific indicators were identified in this research. A key issue that emerged from this data relates to the value and feasibility of using different types of indicators. As part of the analysis, indicators were grouped according to whether they measure process, outcome, progress or impact.

Outcome indicators were found to be easy to measure and, importantly, relatively easy to attribute to a specific NGO or action. It was clear that outcome measures, and to some extent progress measures, were used the most often in NGO reports. The challenge however is that NGO advocacy tends to be based on long-term goals, often around policy change or health impacts. The interview participants placed a much greater emphasis on the need for evaluations to be done in the context of these longer-term goals, essentially measuring NGOs impact against what they set out to achieve. There was, however, also recognition across the interviews that milestone (outcome) indicators are useful, particularly due to challenges relating to time lag and attribution of advocacy to these longer-term goals, both of which were highlighted in the literature review in Chapter 2.

The type of measure used also links to the two key perspectives on the unit of success which were identified in the interviews. The first focuses on the goal or policy itself as the unit of success, with an underlying appreciation that advocacy would have contributed to the policy and thus to the success. The second focused on the advocacy itself, primarily in terms of a specific NGO and the types of activities they have undertaken to contribute to a policy change or other success. Although not uniquely, the former lends itself to goal-orientated (impact) measures, while the latter to milestone (outcome) measures.

One issue that emerged from the data relates to intangible measures, for instance examples of change or progress which do not have any metrics, or which were unexpected or unintended consequences of an action. Examples of this identified from the data include when a Bill ultimately failed but the process of championing it built a strong support base, and when nuances in language shift over time. Applying a specific metric in this case, in the way you could for something like media reach, is not possible and yet it is an interesting sign of progress in itself. In these cases, a more descriptive analysis of progress is required, and that this may be complementary to other more tangible measures.

These findings have highlighted that a challenge for NGOs and anyone wanting to measure advocacy can be the need to balance what is feasible and realistic to measure with what measures demonstrate meaningful impact. Furthermore, this tension suggests that it will likely be valuable to use a wide range of indicators of different natures that can act in parallel and over time to build a picture of advocacy success. In this instance, it can be argued that measuring the totality of advocacy, either on a specific issue or by an NGO can provide the most comprehensive analysis of impact, while balancing some of the concerns with which type of measures to use. In addition, when using milestone indicators, it may be valuable to be able to reflect on where in the process the activity lies and how the achievement documented has changed the landscape or advocacy trajectory. These issues are picked up in more detail in Chapter 7.

The findings presented in this chapter have helped to answer research question 3, that is identifying a number of different indicators that can be used by NGOs, each with different purposes and values. This adds to the literature presented in Chapter 2 by exploring some of the issues related to measuring which are particularly pertinent to PHN advocacy. The tension that emerged in the interviews between goal and milestone orientated measuring is particularly interesting in the context of existing frameworks which typically focus on either planning elements or outcome elements and is an issue we consider in the following chapter in the context of developing a monitoring framework for PHN advocacy.

These issues are discussed in more detail in the following chapter which presents the overall findings of this research.

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7 Discussion

7.1 Introduction

In the preceding three chapters (chapters 4-6) the findings for each of the three research questions underpinning this research have been presented, focusing on the conditions, tactics and measures relevant to PHN advocacy. Preliminary thoughts on each were offered at the end of each chapter. This chapter brings together these findings within the context of the main aim of this research which was to investigate the role of NGO advocacy in public health nutrition, considerations for ascertaining effectiveness, and how to measure advocacy, with the broad goal of exploring and informing the development of a monitoring framework for advocacy. This chapter discusses these results in relation to the literature review in Chapter 2.

A range of different roles of advocacy were described in the literature, as well as a number of different models for assessing advocacy impact and effectiveness. The existing literature highlighted the complexity of advocacy and some of the challenges this brings for measuring advocacy, not least because a linear and predictable model of change is rarely possible. Following an initial reflection of the findings (7.2), this discussion chapter is broken into three sections (7.3-7.5) reflecting the main ideas that have emerged from the findings and how these build on the existing literature. Within each of these the discussion focuses on the implications of the findings for our understanding of the role of advocacy, what is effective and how it can be measured. Through these sections, a number of conceptual models are presented to help depict the key findings that have emerged and the implications this has for how we think about advocacy, its role and its effectiveness. These models require further testing but represent a starting point for improving our academic and theoretical understanding of the role of advocacy in public health nutrition and the connections between tactics, measures and conditions. Following this, the discussion shifts its focus to the more practical considerations for advocacy that emerge from the research, in line with one of the key motivations of this research which was apply an academic lens to real world problems faced by NGOs in public health nutrition. The chapter ends with a proposed monitoring framework for NGOs which can be used to inform advocacy monitoring and evaluation by NGOs and in turn help strengthen the role of NGO advocacy in supporting change (section 7.6).

7.2 Overview of research findings

The findings of this research have provided insight into the types, roles and considerations for PHN advocacy, a relatively under researched area. In many ways the research findings resonate with existing knowledge on advocacy, particularly in relation to the complexities and types of advocacy that exist. The findings have important implications for the way we think about advocacy, as well as how we measure and monitor advocacy. These include highlighting the importance of understanding the

conditions under which advocacy operates when evaluating the role and effectiveness of advocacy, as well as recognising the breadth of tactics which make up advocacy and the different combinations of these tactics that will likely be appropriate during different periods of times and for different groups. The following paragraphs summarise the key findings related to each research question and underpin the overall discussion presented in this chapter.

Research Question 1 asked '*What conditions support or hinder advocacy in public health nutrition?*'. The findings relating to this research question were presented in Chapter 4, drawing on interviews and the document analysis of three policy examples. The chapter presents the different conditions relevant to PHN advocacy which were identified from the data. Political conditions were identified as being particularly important for enabling changes. This was most starkly seen in the context of the political party in power and the influence this has on policy priorities. In addition, a number of commercial and social conditions were identified as relevant, both independently of political conditions and as a mechanism to influence the political conditions. For instance, a supportive commercial sector or company (commercial condition), as well as a supportive public (social condition), were identified as important for policy progression as shown in the case of FOPNL (see 4.3) while an unsupportive commercial sector may block or slow down policy progression or reduce the quality of the policy from a public health perspective, as indicated in the marketing policy discussions. Similarly, the presence or development of strong evidence was an important condition identified in the research as a means to justify and progress a policy where there was political will. This was seen across all three of the policies that were reviewed in chapter 4, with the FSA requiring an evidence review as the first step once an issue had been highlighted, though evidence itself is unlikely to create the initial will.

In most cases, the conditions identified were not fixed, meaning they fluctuate over time and thus impact on advocacy in different ways at different times. This is particularly notable for the political conditions, especially those linked to the government in power and political support for PHN policy issues. In some cases, the same conditions were identified as being relevant across all three of the policy issues looked at, while other conditions were identified as issue specific. Overall, the key conditions identified which impacted on all three of the policy issues include the 1997 election and establishment of a left-wing government, as well as the establishment of the FSA in 1999 which became an instrumental department in the development of PHN policy in England. In the case of the salt reduction policy, there was also the specific rejection of the salt target in the 1990's which created a need for targeted advocacy to overturn this decision, while in the case of marketing and labelling policies opportunities arose from the Communications Act (2002) and EU Consumer Information Regulations respectively, providing a specific framework for the policies to be discussed and developed. It is evident

from this research that these wider conditions were a particularly important driver of change which advocacy organisations were able to use in their advocacy strategies.

Research Question 2 asked '*What advocacy tactics are adopted by NGOs working in public health nutrition?*', the findings of which are presented in Chapter 5. Drawing on the interviews and NGO annual reports, a range of PHN advocacy tactics are highlighted in Chapter 5, revealing the breadth of tactics, both within and between NGOs working in PHN. The range of tactics highlights that advocacy is not a single activity, instead highlighting advocacy as a strategy involving a range of actions and considerations. It was evident from the research that there are a lot of similarities in the way that individual NGOs work, but also some key differences in the main approaches that different NGOs take. For instance, the findings demonstrated that UKHF focused much more on the evidence base and providing internal government support, while Sustain's CFC and CASH for instance placed a greater emphasis on media campaigns and watchdog activities to expose industry practices and progress (or lack of) made. It was also evident that different tactics have different values and purposes. A key conclusion that can be drawn from the data in relation to RQ2 is that a range of different tactics will likely be required in advocacy, and that these are used in different ways, by different NGOs and for different purposes. This range of advocacy can be seen both within individual NGOs who undertake a number of different activities, as well as collectively on a given issue with different NGOs undertaking complementary actions. The notion of a range of advocacies is picked up in more detail in section 7.3 as a key finding of this research.

Research Question 3 asked '*How can the effectiveness of public health nutrition advocacy be measured?*'. The advocacy measures identified from this research are presented in Chapter 6, drawing on the NGO documents and semi-structured interviews. The analysis of the findings revealed the broad spectrum of measures which can and are used to measure PHN advocacy, ranging from those which measure outputs and direct outcomes of specific actions, through to those that measure progress and impact, in line with existing research. The research revealed a tension between the value placed on those measures which are practical and directly attributable to a specific action, and those which are less directly attributable to an advocacy action but better represent impact and change. Overall, it was found that much of the reporting undertaken by the NGOs themselves focused on short-term output and outcome indicators, such as the activities undertaken, media coverage, reach and membership numbers. However, the NGOs appeared to be externally judged based on their progress and achievements made towards their longer-term goals, with less value given to reach and similar metrics. The analysis of the interviews highlighted issues around the tangibility of measures, with many of the general signs of progress such as shifts in narrative being very hard to judge in a concrete way in relation to advocacy compared to output measures such as reach that are easier to quantify. Population health

and diet changes were highlighted in the research as the ultimate goal of advocacy, however there was little of evidence of this being measured, or even measurable, in the context of NGO advocacy. One exception to this was in the context of salt reduction, where population salt intake, which is relatively easy data to collect for a representative population sample, has been collected allowing the tracking of population salt intake in parallel to tracking of the salt content of food, although the direct link to the advocacy is unclear. Overall, the findings demonstrate that there are many challenges for measuring advocacy, and that the most appropriate indicators will vary depending on the specific tactic and goal. A key finding of this research is that a range of measures are necessary in order to capture the best possible picture of advocacy effectiveness, from tracking immediate output and outcomes through to longer-term impact such as policy and population health change. These issues are picked up in sections 7.5 and 7.6.

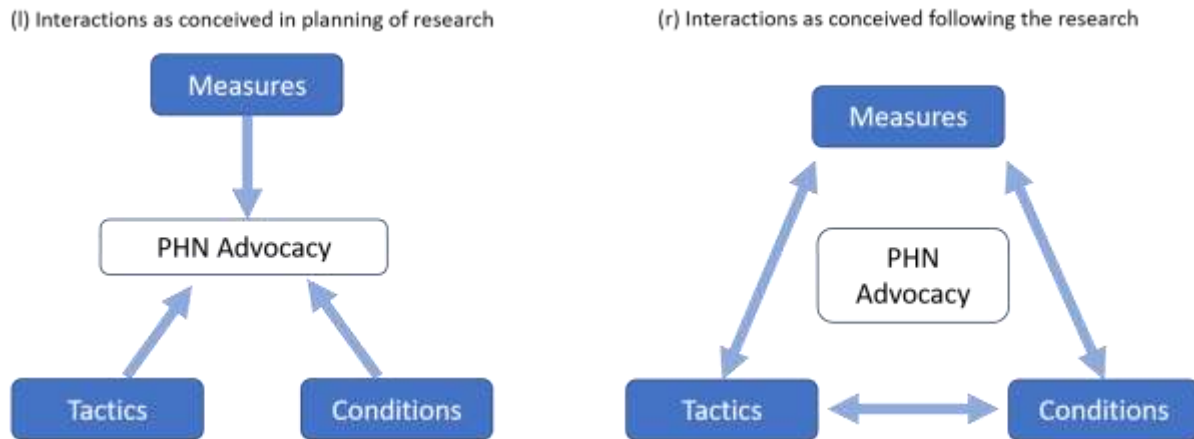
A key overall finding of this research, and one which underpins much of this chapter, is the interaction between advocacy and the conditions, and the impact this has on the way that advocacy is measured. During the planning of this research the key components of this research, that is the measures, tactics and conditions related to advocacy, were identified as three important but independent considerations for exploring advocacy effectiveness. However, this research has demonstrated that these three components are in fact all inter-connected and cannot be meaningfully explored independently of each other. This point is iterated by the overlapping and reoccurring nature of some of the themes presented in chapters 4-6. It is therefore necessary to explore and understand how these three components connect and interact with each other in order to broaden our understanding of advocacy and identify key considerations for effective advocacy and how it is measured.

In particular, the research has demonstrated that the tactics used and the conditions that need to be overcome are not mutually exclusive considerations, and the conditions will likely inform the most appropriate tactics. Further, we can conclude that there is 'no one size fits all' way of measuring advocacy, and the appropriate measures will be based on both the tactics and the context within which they are undertaken. With this in mind, effective advocacy can be considered to be less about a specific tactic or collection of tactics that are undertaken, rather it is about the totality of what is done, either by one NGO or collectively, and the appropriateness of those tactics at a given time under different conditions, whether it be to navigate the conditions, react to them or to shape them.

This shift in perspective and understanding of advocacy is depicted in Figure 7.1 with the left side (I) representing the interactions as initially conceived at the start of this research, where conditions, measures and tactics are all independent considerations when exploring PHN advocacy, while the right

side(r) represents the interactions as identified from the research, highlighting that each consideration not only influences advocacy, but interacts and informs the others.

Figure 7-1: Connecting measures, tactics, conditions and advocacy



Source: author

This shift in understanding is subtle but hugely important for the findings of this research, and for understanding the different considerations for advocacy. It provides an important lens through which we can explore and better understand advocacy, its effectiveness and how it can be measured. Building on these findings, the rest of this chapter presents three main considerations relating to the effectiveness of advocacy which the author has identified as having emerged from this research. Firstly, it is proposed that rather than thinking about one advocacy, it is more appropriate to recognise that there is a range of advocacies which come together in different ways in different contexts and at different times (Section 7.3). Secondly, it is suggested that advocacy interacts with the external conditions and it is these conditions and interactions which dictate the most appropriate advocacy approach and the likelihood of success at a particular point in time and in a particular context (Section 7.4). Thirdly, with the previous point in mind, it is proposed that measuring advocacy should be done in the context of the desired goal of a particular advocacy activity to ensure that measures are selected appropriately according to the specific goal or desired outcome (Section 7.5). These three considerations in turn inform the practical considerations of this research which are presented in 7.6, including a proposed monitoring and evaluation framework for advocacy.

7.3 A range of advocacies

A wide range of advocacy tactics were identified in this research and presented in chapter 5. These were presented around four main themes - issue profile (5.3), networks (5.4), influencing decision-makers (5.6) and public engagement (5.5). These themes closely align with the key areas identified in the literature, but with some differences to reflect the data of this research. For instance, public engagement came across from the data as a key a theme so was included as its own section, while the media and research were grouped together under the broader theme of raising the profile of an issue (agenda-setting).

It was clear from the research that there are a number of overlaps in the types of activities undertaken by NGOs, as well as some important differences. These differences primarily relate to the extent to which the NGOs act in a public domain, through campaigns and the use of media, or work more behind the scenes focused on evidence generation and research projects, often with government departments.

The main focus of this section is the variable nature of advocacy and the idea that there are a range of advocacies which are required to achieve change, a key finding of this research and contribution to the understanding of the role and effectiveness of advocacy in public health nutrition.

A number of relevant elements of advocacy were identified from the existing literature and have been identified as particularly relevant to the findings of this research, and which are used to discuss the findings throughout this section. These include:

- That advocacy is flexible and evolving by nature (e.g. Fagen, 2009, McGuire, 20015)
- There are different types and forms of advocacy, taking place inside and outside of the system, (e.g. Mahoney, 2008, Delmouth and Tallberg, 2017) and taking place collectively and in collaboration with others, as well as by individual entities (e.g. Mahoney, 2008, Keck and Sikkink, 1999)
- Public engagement, and the difference between advocacy which is 'top down' versus 'bottom up' are important considerations and in turn influence the type of advocacy that is undertaken (e.g. Panda, 2007)

7.3.1 Advocacy vs. advocacies

This research started from an interest in exploring the role and measures of NGO advocacy, based on the assumption that simple classifications of advocacy, what it is and what it sets out to achieve, could be made in order to inform a set of definitive measures. Such a position builds on the perspective that advocacy is a linear and predictable series of steps and stages. The existing literature on advocacy is mixed on this issue, with some researchers describing advocacy as a sequential process which goes

through predictable stages of information gathering, strategy development and action (Christoffel, 2000), and others reflecting that advocacy needs to be tailored, flexible and has multiple moving parts (Blanchard et al 2013, McGuire, 2005, Mahoney, 2008, Fagen et al, 2009). A report on advocacy written for the Californian Endowment Agency by Raynor et al (2009), highlighted adaptability as a key requirement of advocacy organizations, alongside leadership.

The findings presented throughout this thesis suggest that NGO advocacy should be seen as an evolving process and that advocacy is not fixed, linear or predictable, in part due to the wider conditions which advocacy interacts with (See section 7.4 for more discussion on this). Importantly, the research findings have demonstrated that there is no 'one size fits all' in advocacy, echoing some of the existing literature in this area (e.g. Coates and David, 2002) and challenging the assumption made at the start of this research that generalisations about 'one advocacy' would be possible. The research findings have shown that in reality advocacy is a range of different things in different contexts, at different times and to different people, something which is both a strength and a complexity of advocacy (Section 5.2).

When exploring the general function of advocacy, many similarities were identified between the NGOs explored in this research, with all undertaking activities which seek to progress public health nutrition policy for the public good and challenge or raise awareness about commercial behaviour which undermines the public health goals (section 5.2). However, the way in which each of the four NGOs went about achieving this and the specific perspective and expertise each brought differed, something which has been previously recognised by Christoffel (2000). As an example, Which? is a consumer organisation and thus positions itself around the protection of consumers and has a higher level of engagement with consumers as part of their advocacy compared to the other NGOs looked at in this research. This was highlighted as a particularly important component of NGO advocacy (Section 5.5) and is picked up further in section 7.4. To take another example, the UKHF positions itself more in the medical field, and the types of advocacy undertaken are much more focused on research and evidence generation, another important component of advocacy highlighted in this research (section 5.3). At the same time, both organisations also undertake many of the same types of advocacy activities, particularly when it comes to efforts to influence government (section 5.6), build networks (section 5.4) and influence the agenda (section 5.3).

An important contribution of this research, therefore, is the breadth of advocacy tactics that have been identified and the complementary nature of these tactics. This demonstrates that there is no one 'right' advocacy which can be defined by a specific tactic or set of tactics, rather, advocacy is about having a set of appropriate and complementary activities. That is to say there is no one size fits all and a variety of different tactics or set of tactics are appropriate in different contexts, at different times, by different

NGOs. The idea of there being a range of advocacy has previously been described by Onyx and colleagues (2000) who focused on the range of activities from those which are more radical, to those which are more institutional. With this in mind, it is proposed here that when exploring NGO advocacy, it is important to consider, not one advocacy, but a range of 'advocacies' and how different actions, actors and conditions fit together to support and stimulate change, as well as how different NGOs may adopt different tactics according to their goals. This builds on section 2.3 which made the distinction between strategy and specific tactics and suggests that each NGO will have a different range of tactics (albeit overlapping) integrated within their strategy, developed for their specific needs and goals. These findings highlight the importance of considering how combining tactics creates an advocacy strategy, which is appropriate in a specific context, at a certain time and for a particular NGO. This notion of a range of advocacies also has implications for how we can measure advocacy, a consideration we return to in sections 7.5 and 7.6.

7.3.2 Inside vs. outside advocacy

Much of the existing research on advocacy has focused on specific tactics that can be utilised and the role that each of these play in change, for instance the specific use of media in advocacy (e.g. Chapman, 2004). Such research provides valuable insight to what one can hope to achieve from a specific action, however as discussed this research has highlighted the importance of exploring the totality of an advocacy strategy and the way in which different actions complement each other at different times for achieving change.

A number of models exist to try and capture these different advocacy actions, for instance by describing inside and outside or formal and informal advocacy (e.g. Mahoney, 2008, Dellmuth and Tallberg, 2017, Brinsden and Lang, 2015). Similar classifications and descriptions have also been used to describe different NGOs, for instance Devlin-Foltz's (2010) analysis of advocacy types focuses on the expert knowledge and advisory capacity of those NGOs working in the system. Meanwhile, NGOs working outside of the system play a different role and may take on the role of 'salespeople' and focus on communication, storytelling and narratives dissemination as their primary mechanism of influence (Gladwell, 2000, Shanahan et al, 2011, Stone, 2012).

The categorisation of advocacy as being inside or outside is particularly relevant to the findings of this research and was specifically highlighted by some of the interview participants. This suggests that those working in public health nutrition recognise the existence of different groups of actors or actions. However, while the findings of this research do not suggest that the simple inside/outside division is inaccurate per se, the research does challenge the implicit notion that there is a clear distinction between the two different approaches and that a choice must be made as to which approach is

followed. The reality presented in this research is that different NGOs undertake different combinations of actions, and that NGOs vary the tactics and approaches that they use according to the target audience and the specific outcome they are after (See section 5.2). CASH has been cited as the primary NGO which helped to secure the progress seen in salt, undertaking a full range of advocacies which helped them achieve success, including research, media and PR activities, public campaigns, government and industry engagement, representing a mix of both inside and outside activities. (Section 4.6.3). Interestingly, no such breadth by a single organisation was identified on the other policy issues, instead more organisations were found to engage on the issue. UKHF on the other hand, while also undertaking a range of activities was found to be much more focused on research and government engagement (inside), while Sustain's CFC more focused on media use and campaigning (outside). With this in mind, we can see that while some distinctions in the specific actions identified in this research do exist, the fact that NGOs can undertake a number of actions indicates that it may be more useful to reflect on advocacy as a range rather than a simple either/or categorisation as depicted in Chapter 2, Table 2.1. This is key for understanding the overall effort of public health nutrition NGOs, as well as for understanding the role that a specific NGO does or could play.

Much of the advocacy described in this research would be classified as outside advocacy due to the emphasis on those tactics which relate to raising the profile of an issue or agenda-setting (e.g. Kollman, 1998), such as the use of media (5.3) and public awareness campaigns and generating public support (5.5). To an extent, inside activities become more relevant once an issue gains traction and there are opportunities to discuss them through official government routes, such as on committees, prior to formal consultation mechanisms to fine tune the policy (see section 5.6). We can therefore hypothesise that over time the overall advocacy on an issue may shift towards being more inside than outside, even if outside activities continue to be important and not all advocacy takes place through inside processes. We can again see the value of considering the advocacy as a range of advocacies, which NGOs may move between at different times and in reaction to the wider conditions and opportunities that arise as part of their overall strategy. Looking at advocacy as being one or the other fails to capture these dynamics, as well as the complementary or 'two-pronged' approach that an NGO may undertake. CASH again is a good example of this, demonstrated through their strong PR and media campaigns, regular surveys on salt, coupled with direct engagement with the food industry and government in order to stimulate change, and their ability to move between these approaches on an ongoing basis.

7.3.3 Collective advocacy

Another important consideration that has emerged from this research is the distinction between collective and individual NGO advocacy and how this fits with the idea of there being a range of advocacies. Coalitions and collective action between NGOs have been described in the literature as a

key component of advocacy (Daube, 2013). Keck and Sikkink's (1999) typology of tactics identifies a range of actions NGOs may utilise as part of a collective advocacy strategy, from sharing information (information politics), to storytelling and communication (symbolic politics), accessing to powerful actors (leverage politics) and holding actors to account (accountability politics). From the political sciences, Sabatier's Advocacy Coalition Framework (ACF) explores the coalitions that exist between actors and the way this influences the policy process. Sabatier (1988) suggests that coalitions form around shared values, with a dominant coalition which works to maintain the status quo, and at least one other coalition seeking to change the status quo. The coalitions described in ACF are made up of range of actors including, amongst others, NGOs, government, media, researchers and industry, who share a particular set of beliefs about the world and work together through collective action and evidence sharing to achieve their shared goals, whether that be to maintain or disrupt the status quo. A number of benefits of working together have been identified in the literature, including message alignment, visibility, power and the pooling of resources. The idea of cohesion has been highlighted by both Kingdon (1984) and Sabatier (1988) as an important feature of interest groups, whereby groups use the alignment of their message to try and persuade decision-makers on a given issue. Resource Mobilisation Theory reflects the reality that NGOs are often resource-poor and thus benefit from working together and coordinating activities through collective action to help gain power (Olson, 2008, McCarthy and Zald, 1977).

This research has demonstrated many parallels with the existing research, with networks and coalitions emerging from the findings as a key consideration and component of PHN advocacy, both in terms of being used by NGOs as part of advocacy (section 5.4), a measure upon which to judge NGO advocacy (Section 6.8) and as a condition which NGOs can help shape as part of advocacy (section 4.6.3). All four NGOs presented in Chapter 5 were found to have of some kind of formalised membership (section 5.4). Sustain's Children's Food Campaign for instance has a working group, Which? has public members, UKHF has professional and academic members, while CASH has scientific members and supporters. In each of these cases, the very nature of each organisation has been set up on the basis of collective action, even if the collectiveness is about information and expertise rather than sharing the load of the advocacy per se. However, more importantly in the context of this research, the findings also demonstrate that all four NGOs undertake unofficial coordination with other NGOs, for instance through joint projects (e.g. Which and Sustain's CFC), or by supporting a lead NGO on a given issue (e.g. CASH). The findings suggest that much of the value of this coordination comes from 'pulling resources' as described in Resource Mobilisation Theory allowing organisations to share the load (Olson, 2008), as well as from the sense of power that a collective voice provides, iterating and reinforcing each other's messaging. This suggests that advocacy forms on the basis of functionality, which differs from the

notion of coalitions presented by Sabatier (1988) and others, which focuses on the shared beliefs and values that bring actors from a range of sectors together to maintain or challenge the status quo. We return to this in section 7.4.

7.3.4 Public engagement

Related to the idea of collective advocacy between NGOs is the degree of public engagement undertaken by the NGOs. The role of the public and public engagement in advocacy emerged as an important theme from the interviews, particularly in the context of effective advocacy (section 6.8). However, the interview participants also reflected that this was not undertaken in a meaningful way by NGOs working in PHN in England, a finding backed up by the analysis of NGOs (Sections 4.6.1, 5.5, 6.8). Instead, pockets of public engagement were identified, for instance Which? and Sustain's CFC both engaged with parents on the issue of marketing, and CASH engaged with health care professionals and teachers on the issue of salt. In addition, consumers are inherently important to the mandate of Which? as a consumer protection agency. Overall, however there did not overall appear to be meaningful public engagement as part of the advocacy based on the findings of this research. Social Movement Theory was described in chapter 2 as the groundswell of support for a particular policy action which often occurs at a community level, on a specific topic and/or in response to a particular grievance (Benford and Snow, 2000). Social Movements are typically less formal than NGO advocacy, and focuses more on ad-hoc collective action in the community (Tarrow, 2001, Tilly and Wood. 2009) rather than planned campaigning on a range of activities. Further to there being little evidence of public engagement by the NGOs, there was also little evidence from this research of there being a 'social movement' in public health nutrition (Benford and Snow, 2002, Tarrow, 2012), that is no evidence of any significant collective citizen action which the NGOs either engineered or supported

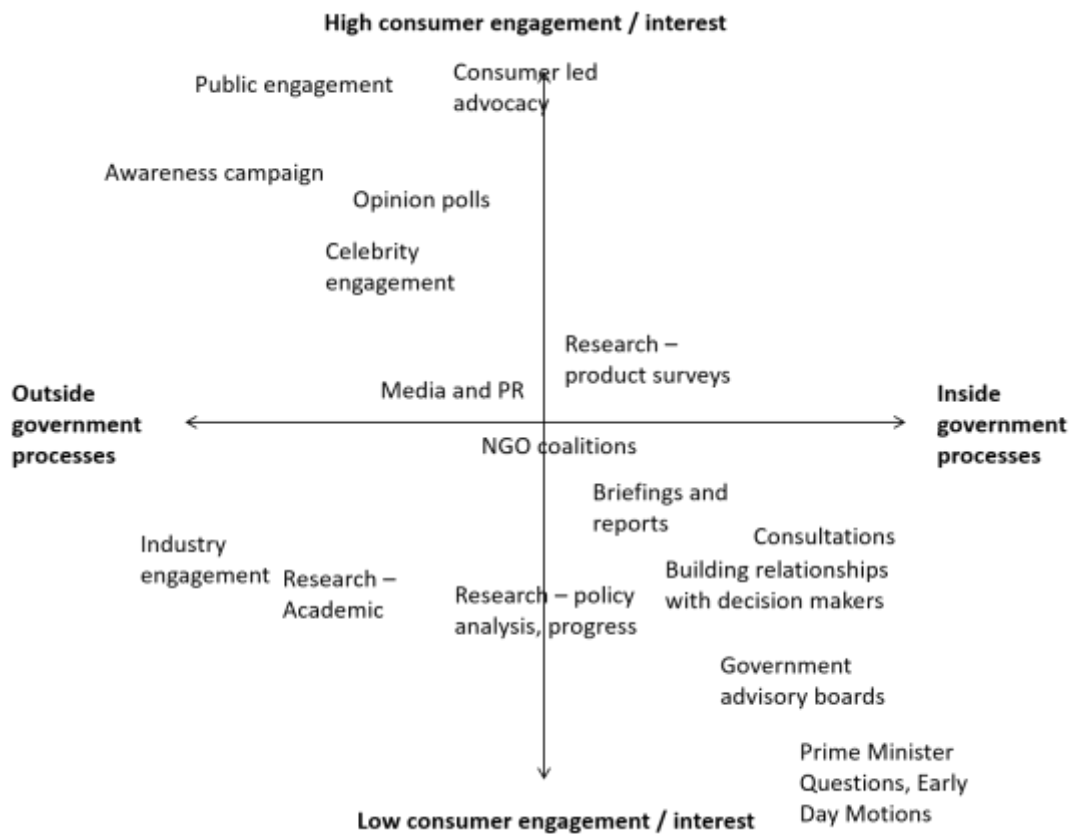
While addressing the degree of public engagement undertaken by NGOs as part of PHN advocacy would not create a social movement per se, it does suggest there is a potential need and desire to see more bottom up advocacy and stronger public engagement. This idea is picked up in more detail in section 7.4 in the context of NGO credibility and legitimacy.

7.3.5 Mapping the range of advocacies

Building on this we can return to the idea of there being a range of advocacies, that is a range of different ways that an NGO can utilise different tactics as part of their overall strategy. One way of visualising the range of advocacies identified is to consider where an activity occurs in relation to public engagement (high or low) and formal government processes (inside or outside). The distinction between public engagement and government engagement activities are two underlying principles which have underpinned previous divisions of advocacy described in the literature (Kollman, 1998, Mahoney, 2008). This thinking is presented in Figure 7.2 as a conceptual model, drawing on the main

tactics identified in this research (section 5.2, chapter 5). While this model requires further testing in different scenarios and using different case studies, it brings to light some of the dynamics and ranges of advocacy identified from this research, and shifts the conception of advocacy beyond a simple inside/outside distinction such as that proposed in Figure 2.1, chapter 2. Activities which have a direct interest to the public involve or a high engagement with the public, and which involve a low level of direct government engagement have been plotted in the top left, while those which have little or no direct public involvement or engagement, but high government engagement are plotted in the bottom right. The actions have been plotted based on the author's judgement of the approximate degree to which an activity is of interest to the public or engages government. Having two axis, one reflecting government processes and one reflecting public engagement, is a particular strength of this model as it allows us to move beyond the idea that an activity is either public or government focused, recognising that some activities may have value for both audiences, even if to different degrees. For instance, a public awareness campaign in itself has little direct relevance for government, but a public opinion survey or direct engagement of the public in advocacy (which may result from the awareness campaign) does have relevance to government and may help to create political will. Similarly, government consultations may have slightly more interest for the public compared to an expert committee, but both are of relatively low direct importance to the public. A briefing aimed at government may however be of interest to a member of the public. Similarly, research relating to a product survey or similar will likely be of more interest to the public than more technical research which explores policy efficacy. As described, building networks and coalitions have been identified as an important part of advocacy, and have been placed at the centre to reflect that this can support a wide range of different components of NGO advocacy and are relevant to all interested parties. Importantly, the tactics plotted are specific to this research and in some cases (e.g. PMQs) highlight actions specific to the England/UK political context. The specific advocacy tactics included in Figure 7.2 draw on Table 5.1 and the findings presented in Chapter 5, covering some of the key types of advocacy that were identified from the findings.

Figure 7-2: Conceptual map of advocacies



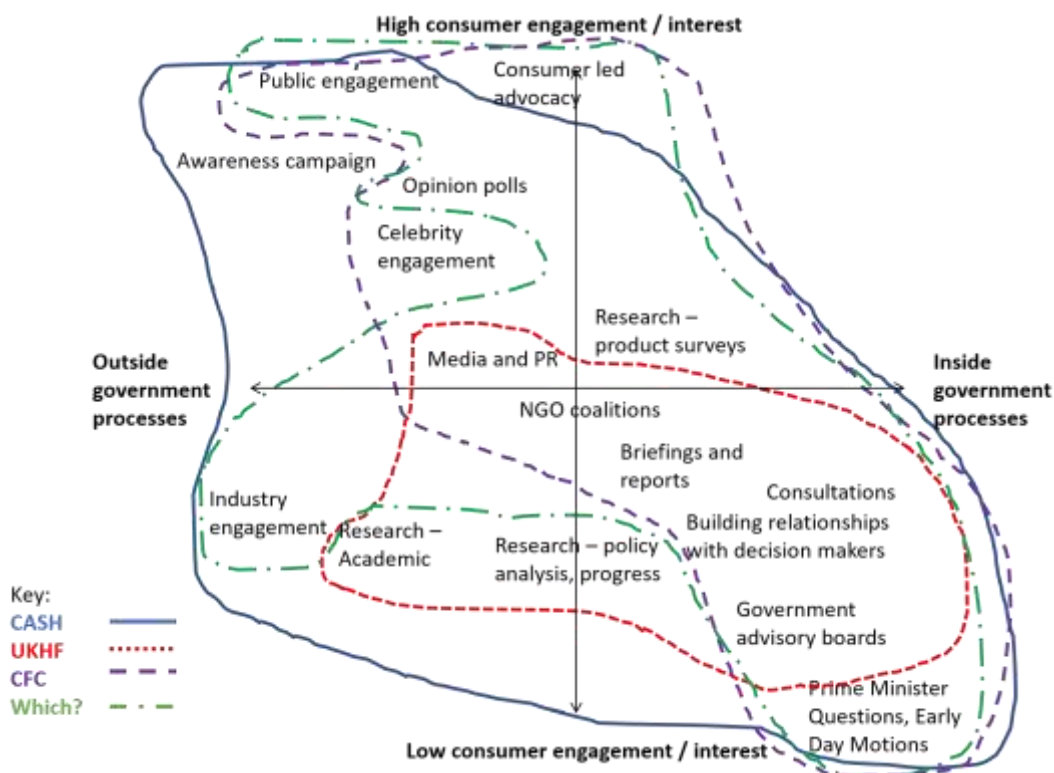
Source: author

Using the findings (chapter 5, table 5.1) it is also possible to begin to plot the strategy of each of each the NGO's explored in this research onto this conceptual map, drawing on the tactics identified as being used by each, as shown in Figure 7.3. As with Figure 7.2, Figure 7.3 has been developed based on author judgement and as such requires further testing. However, it represents a way to visualise some of the findings of this research and a potential way to map different strategies and types of advocacy organisations. In this case the NGOs themselves have been plotted based on the broad PHN advocacy actions they carry out, however it would also be possible to map total actions carried out in a specific policy area in order to compare advocacy between issues rather than NGOs. Figure 7.3 provides a visualisation of the overlap between the overall strategy adopted by each of the NGOs looked at in this research, but also highlights some differences in the types of activities and the breadth of actions they undertake. For instance, UKHF was identified as undertaking the narrowest range of actions within their strategy, focused primarily on research and direct government engagement. CASH on the other hand was found to undertake the broadest range of actions, undertaking the majority of actions identified in this research. Which? and Sustain's CFC, were also found to undertake a wide range of actions. This

brings us back to the notion of an advocacy strategy being built on a range of advocacies which will differ between NGOs, as well as in time and place.

Figures 7.2 and 7.3 highlight the wide of advocacy tactics that can fit under the umbrella of advocacy. The research findings show that, while NGOs tend to lend themselves to a specific type of advocacy activities, the reality is that the actions used are done so on a more mix and match basis, reinforcing the idea that there are advocacies rather than a singular advocacy. While Figure 7.3 shows the range of advocacies, it is important to note that it does not make a distinction between the degree to which the different activities are prioritised by each organisation. This warrants further research as better understanding the extent that the activities are carried out would add an interesting dimension to the figure and would allow for a more in-depth understanding of the similarities and differences between each of the NGOs. It can be hypothesised that more attention to the weighting of the different tactics undertaken by the NGOs would likely highlight a greater distinction between the NGOs. In addition, further testing using different NGOs, policy areas and political contexts would be valuable.

Figure 7-3 Conceptual map of advocacies, with NGOs plotted



Source: author

To summarise, therefore, this research has shown that there are a range of different tactics which can be utilised in PHN advocacy as part of NGO strategies. The fact that these complement each other, and that a broad range of tactics can be undertaken on a given topic either by one NGO or between a coalition of NGOs, should be recognised by NGOs and others when assessing the effectiveness of advocacy. The notion of ‘advocacies’ is important here, and emphasises the idea that advocacy is not one thing which can be easily defined, rather advocacy is built on a strategy which can take different forms, at different times, by different NGOs. Key to this is the idea that a range of advocacies exist, recognising that each advocacy tactic or strategy has a different purpose at different times. These findings build on the notion that advocacy can be classified as being either ‘inside’ or ‘outside’ (Mahoney, 2008, Buse et al, 2012) and aligns with other literature which suggests that a key part of successful advocacy is an approach which flexible, adaptive and reactive (Blanchard, Shilton and Bull, 2013, McGuire, 2005).

7.4 Advocacy interactions with external conditions

Another important finding of this research is the importance of the wider conditions when exploring and understanding the role and effectiveness of advocacy, in particular the way in which advocacy and the wider conditions interact. In this section we draw on the findings presented in chapter 4 and discuss the contextual nature of advocacy and the important role that conditions play in determining advocacy success. The findings of this research support and build on the notion that effective advocacy is likely to be advocacy which responds and reacts to the external conditions as appropriate, and that the conditions are therefore an important consideration when exploring the effectiveness of advocacy. The reciprocal nature of advocacy and the wider conditions, and the overall importance of the conditions in the advocacy described in this thesis, was a key driver of the shift in understanding of the way conditions, tactics and measures interact as described in section 7.2 and Figure 7.1.

The literature review in chapter 2 presented a range of theories related to advocacy and policy change, and it was noted at the end of chapter 2 that the conditions were a common theme which bridged many of these theories as something which advocacy needs to respond to. In this context we again return to the idea that flexibility and adaptability are important considerations for advocacy, with advocacy tactics needing to be “adjusted on a continual basis in light of rapidly changing conditions, reactions from actors and feedback” Pelletier et al (2013), and that advocacy often has to be quick paced and reactive (Fagen et al, 2009).

A number of key themes from across the existing literature on advocacy and policy change have been identified as resonating with the findings of this research in the context of conditions and which form the basis of this section of the discussion. These include:

- A range of competing interests, forces and perspectives work to maintain or shift the status quo, and thus policy (e.g. Lewin, 1951, Sabatier, 1988, Mahoney, 2008)
- Getting issues on the agenda and to have buy-in from necessary parties is important for change (e.g. Sabatier, 1988, Dearing and Rogers, 1996)
- Over time, a series of opportunities can arise which support (or hinder) change (e.g. Kingdon, 1984). Such opportunities can create both abrupt and incremental changes (e.g. Baumgartner and Jones, 1993, Lindbolm, 1959)
- In order for NGOs to be effective, they need to be seen by other actors to be legitimate and credible which in turn creates trust and supports working together. Evidence is a key factor contributing to the perception of legitimacy and credibility (e.g. Smith, 2013, Berry, 2000).

7.4.1 Different types of conditions

To understand the different role and impact of conditions on advocacy, we can first explore the different types of conditions identified from this research. As previously described, the term conditions has been used to describe the external and changeable factors which can support or hinder advocacy progress, directly and indirectly. In Chapter 4 a number of conditions identified from this research were described and categorised according to whether they were political, commercial or societal conditions. This categorisation was used based on its value for understanding the different dimensions and types of conditions and actors which may influence an advocacy pathway towards success. As described by others, conditions can have a range of different types and degrees of influence on advocacy and opportunities for change, from abrupt events as described as part of Punctuated Equilibrium Theory (Baumgartner and Jones, 1993) through to more subtle changes that evolve over time and shape views and perspectives which is more characteristic of the change process described in Sabatier's (1988) Advocacy Coalition Framework. Kingdon's (1984) Multiple Streams theory highlights a number of primarily political conditions which, when aligned, can support change such as political will and the presence of policy solutions.

Returning to the aims of this research, that is to explore the role and effectiveness of advocacy, it is necessary to reflect on the conditions identified specifically in the context of advocacy and the implications of the different conditions on advocacy. The range of conditions identified in this research and the role they played in the policy spotlights suggest that different conditions have varying implications on advocacy and the types of actions or approach that may be required to achieve change. Drawing on the findings, it is suggested that the advocacy approach taken to respond to conditions can vary according to whether or not a condition can be shaped by an NGO, whether an NGO needs to react

to a condition, or whether a condition is unlikely to be influenced by advocacy and thus needs to be navigated by NGOs. In this sense, conditions can be described as a set of variables which can both influence and be influenced by advocacy.

The different ways in which NGOs can interact with the range of conditions are summarised in Table 7.1, drawing on the findings presented in chapter 4. Firstly, NGOs can help to drive change by shaping conditions to be more supportive of change. Some examples of conditions which an NGO can help shape and directly create as part of advocacy include public engagement and issue visibility (section 4.6.1, 5.5), NGO leadership and coordination (section 4.6.3, 5.4) and available evidence on an issue (section 4.7.1, 5.3). In addition, it was found that NGO advocacy can be important for reacting to a condition which reflects an opportunity for an NGO to help achieve change. This research highlighted a number of such conditions, including a crisis or event (section 4.6.4), supportive food companies of government officials (section 4.5.1, 4.4.4), elections (section 4.4.1) and legal frameworks such as the EU labelling regulations (section 4.4.3). In each of these cases, the condition itself is independent of the NGO but the way in which an NGO uses the condition to achieve its goals is an important consideration. Finally, some conditions were identified as being less flexible or in conflict with an NGO's objectives. In these cases, we find that NGOs will need to navigate such conditions by finding alternative approaches or working around the conditions as part of their advocacy. The findings of this research highlighted a number of such conditions, including industry power or lobbying against a policy (section 4.5.1, 4.5.3), a government with opposing perspectives (section 4.4.3), lack of NGO funding (4.6.5) or, in some cases, a crisis or event (section 4.6.4). These conditions reflect the landscape in which NGOs are working and which must be considered when planning advocacy strategies.

Table 7-1: Types of interactions between NGOs and conditions

Type of interaction	Features	Examples from the research
Shaped by NGOs	Can be created by NGOs as part of their efforts to drive change through proactive advocacy.	<ul style="list-style-type: none"> Public demand (4.6.1), government supporters (4.4.4) and champions (4.6.2) Issue visibility (4.6.1) Evidence (4.7.1) NGO leadership and coordination (4.6.3)
Reacted to by NGOs	Often reflect an opportunity which NGOs can respond to and take advantage of as part of their advocacy; however, these conditions may also require 'defensive' advocacy.	<ul style="list-style-type: none"> Crisis or event (4.6.4) Supportive food company (4.5.1) or government (4.4.4) Elections (4.4.1) Regulatory frameworks (4.4.3)
Navigated by NGOs	Rarely flexible and/or offer little opportunity for advocacy to influence them. Often, but not always, these conditions are in conflict with an NGO's objectives and as such require NGOs to work around them and consider alternative advocacy approaches in spite of these conditions.	<ul style="list-style-type: none"> Industry power (4.5.1, 4.5.3) Government with opposing perspectives (4.4.3) Crisis or event (4.6.4) Lack of funding for NGOs (4.6.5)

Source: author

As described by Gill and Freedman (2014) there is a need to 'recognize that a variety of approaches can work, and they should let circumstances – not prior beliefs – dictate' the approach taken. With this in mind, we can see that advocacy is something which influences the external conditions to achieve change, as well as a condition which in itself can support change. Recognising these different types of conditions, and the different role of advocacy in each is therefore an important consideration for advocacy and in turn an important consideration for ascertaining the most appropriate advocacy tactics and audiences. We can see synergies between the findings of the present research and some of the key themes which are described in the political literature. For instance, links between the idea of NGOs shaping specific conditions and agenda-setting and framing, between NGOs navigating conditions and the competing interests and perspectives that prevail and, finally, between reactive advocacy and opportunism and incrementalism. These are discussed later in this section.

7.4.2 Conditions as forces which support and hinder change

Before moving on to the links between the research findings and the political literature on conditions, we can reflect on the conditions described in chapter 4 as a set of forces which support or inhibit change towards a new status quo. The status quo in the context of this research and public health nutrition is one focused on individual responsibility and government deregulation, rather than the presence of a

strong set of policies which promote and support public health nutrition. This was demonstrated through the various government reports presented during the period of 2000-2015, and the emphasis on multisector and voluntary, self-regulated actions during this time. The 'nanny state' metaphor is commonly seen in British media and is used to challenge public health interventions by suggesting government intervention is in fact interference in public life (Carter et al, 2015, Magnussen, 2015).

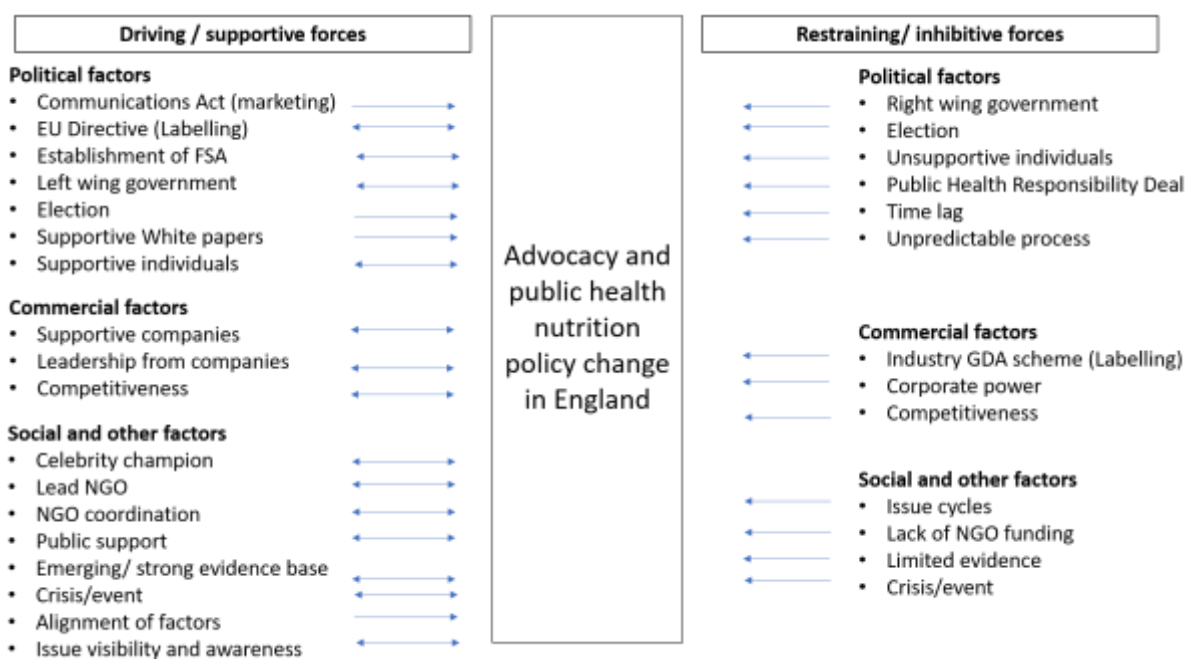
Lewin's (1951) forcefield model was developed to help present the way in which competing interests and forces can influence outcomes. Lewin's model describes the factors that influence a specific problem, the way that a problem influences various factors, and the interdependencies that exist between the two. The basic premise of the forcefield analysis is that some forces exist which support the status quo and resist change, while others are more favourable to a shift in the status quo and thus can initiate change. Typically, an equilibrium is maintained through a balance of the forces however a destabilisation of these forces can result in change. Success is more likely when seeking to maintain the status quo (Mahoney, 2008). In some of Lewin's work the model has been extended to include the allocation of scores to different forces to better understand what factors play a key role in maintaining the status quo.

Lewin's forcefield model was identified as a useful framework for visualising the conditions identified in this research and the way in which the different conditions act for and against public health advocacy and policy change, as well as for understanding the opportunities for advocacy activities to interact with these external conditions. Figure 7.4, below, is inspired by Lewin's work and applies a number of the different types of conditions identified in this research to a forcefield style model. Reflecting the context of this research, the central pillar is PHN advocacy and policy change in England, and the forces included represent the key conditions identified in this research and described throughout Chapter 4.

Both the supportive and inhibitive conditions used in Figure 7.4 vary from specific political conditions and frameworks, through to the different actors that were identified in this research as being in support of or against the issues explored in this research. It should be noted that these forces are unlikely to be equal, however the weight of the different conditions described in Chapter 4 were not explored in the research so cannot be captured in the present figure. The figure focuses on the range of political, societal and commercial conditions identified in Chapter 4 which are continually evolving and influencing public health advocacy on a particular issue, with the inhibitive forces working to maintain the status quo and the supportive forces working to shift the status quo and change the dominant paradigm in favour of public interests and in line with the NGO advocacy positioning explored in this research. The inhibitive factors will also have implications for the measuring of advocacy and the extent to which change is possible and/or likely.

An important addition to Figure 7.4 compared to the original Forcefield model is the bi-directional relationship between advocacy and some of the supportive forces that were identified in this research. This reflects the notion that advocacy plays a role in shaping, navigating and reacting to conditions in order to help NGOs achieve the desired change. Bi-directional arrows have been added to Figure 7.4 to reflect that advocates can help to shape the outcomes of specific opportunities (such as the Communications Act (2002) and EU regulations) and also create supportive forces by building public or political support for a particular cause.

Figure 7-4: Forces identified as supporting and hindering public health advocacy



Source: author, adapted from Lewin (1951)

This model helps to depict some of the complexity of advocacy, and importantly the complexity of understanding the success and effectiveness of advocacy. It draws attention to the fact that advocacy does not function in isolation of other factors and serves to highlight the integral nature of the conditions when exploring advocacy, capturing the research findings relevant for RQ1 – *What conditions support or hinder advocacy in public health nutrition?*. While the model has been developed based on a specific period of time, an assumption has been made that similar conditions would be relevant during other periods of time and that other specific conditions akin to, for instance, the EU Directive on labelling or Communications Act would likely emerge. This model is helpful for situating advocacy as part of the wider conditions and for reflecting on some of the considerations for assessing advocacy effectiveness.

7.4.3 Navigating conditions, interests and perspectives

A number of the conditions identified in this research offer little opportunity for an NGO to directly influence them, rather they are relatively fixed and something which NGOs must navigate as part of their advocacy. Often, but not always, these conditions are in conflict with an NGO's objectives and as such require NGOs to find ways to advocate in spite of these conditions. Such conditions can be wide ranging, and include the power and influence of the commercial sector (4.5.1, 4.5.3), opposing perspectives of the government in power (4.4.3), a crisis or event such as an election (4.6.4) and lack of funding of available for NGO advocacy (4.6.5). In each of these cases, a pronounced impact on the NGO and their success can be seen, but the ability to reshape the conditions is minimal.

In the context of advocacy, the competing interests that prevail are a particularly interesting consideration and have been cited in the literature as an important underlying concept relating to advocacy. Advocacy has been described as a tug of war between those wanting to maintain the status quo, and those wishing to shift the status quo (Lewin, 1951, Mahoney, 2008, Sabatier, 1988). Typically, business interests are more likely to support the status quo, while public health groups are more likely to push for change (Mahoney, 2008). By nature, competing interests and different perspectives on the world, priorities and policies, thus represent a condition commonly faced by NGOs in advocacy (e.g. Dorfman et al, 2005, Stuckler and Nestle, 2012, Brownell, 2010). A number of the political theories described in Chapter 2, including Baumgartner and Jones' (1993) Punctuated Equilibrium Theory and Sabatier's (1988) Advocacy Coalition Framework, recognise the strength of forces or actors working to maintain the status quo at any given time. They argue that, most of the time, this results in incremental changes to policy unless a significant event occurs (Baumgartner and Jones, 1993) or the dominant beliefs held by a coalition of actors shifts and thus disrupts the status quo and paves the way for a change (Sabatier, 1988). Kingdon (1984) also specifically describes business interests as a factor which typically oppose and resist change and thus work as a strong force which helps to maintain a status quo. As reflected previously in the context of forces, the 'nanny state' framing of government interventions is common in the British media and reflects a condition which needs to be navigated by public health NGOs (Magnussen, 2015, Carter et al, 2015).

As described in Chapter 1, a number of concerns relating to private interests in public health nutrition have been raised in terms of the impact that this has on the policy discourse (Gortmaker, 2011, Swinburn, 2008). The often-negative impact of health policies on company profits and mandate has been identified as an important driver of this divide (Labonte, 2001, Stanley and Daube, 2009). In this sense, the competing interests or perspectives on the world and/or policy issue reflect a condition which advocacy NGOs need to navigate in order to try and initiate change in spite of these competing interests. While this research did not specifically explore the competing and often conflicting interests

of food industry, the research findings did highlight the relative power of the commercial sector and their own advocacy and the view that the food industry is often seen as having more power than NGOs and thus able to influence policy more effectively (section 4.5.1). An example of this power was evident in the early phases of the development of salt policy during the 1990's where lobbying is now widely acknowledged as the reason why salt was excluded from government nutrition guidance despite there being strong evidence to have a target for salt intake (Section 4.3.3, 4.5.3). Tensions between interests were also highlighted in the context of marketing where a direct conflict between restrictions on marketing and the right to advertise in a competitive environment exists (section 4.5.3). In this context, NGOs have to find ways of influencing by navigating these challenges and working out how to either influence the interests or influence in spite of the competing interests. This links to agenda-setting and framing which are addressed in the following section.

This research also highlighted government interests and perspectives on the world as a crucial condition which influences change and the success of advocacy (section 4.4). The findings highlighted a pattern of policy linked to the positions held by the government. From a public health perspective this is particularly problematic when industry lobbying and positioning against public health aligns with the perspectives of the party in power. This alignment between industry and government positioning was more notable in the context of the right-wing Conservative government who were in power up until 1997 and again from 2010 (section 4.4.1). This point is not made to downplay the extensiveness of corporate interests influence on public health nutrition policy, rather it is made to reflect that NGOs also need to find ways to navigate different government perspectives in order to achieve their goals.

The best example of government perspectives influencing advocacy approaches in the present research relates to different forms of leadership taken by the different governments in power during the period explored in this research, and the extent to which industry was engaged and given a seat both in terms of designing the policy and implementing the policy. In particular, we can reflect on the contrast between the FSA model under the left-wing government 2000-2010 and the PHRD model under the right-wing government 2010-2015, and the way different actors were engaged in each and the extent of leadership taken by the respective governments (section 4.2, 4.4). This research has reiterated previous research which highlights the importance of government leadership and the presence of sanctions when implementing voluntary schemes (Bryden et al, 2013), as well as analyses of the PHRD which have criticised the model due to the emphasis on company driven commitments, the absence of independent monitoring and enforcement, and the lack of government leadership (Knai et al, 2018, Durand et al 2015, Laverty et al, 2019, Panjwani and Caraher, 2014). This was supported by both the interviews and policy spotlights included in this research. However, the overall analysis of policies presented in chapter 4 also suggests that the role and risks of engagement with industry in policy is not

always as clear cut as simply suggesting industry cannot be involved at all. For instance, we can see from this research that both the salt and labelling policies explored in chapter 4 are widely considered successful policy examples, and yet both were reliant on industry engagement during the policy development process (section 4.3.2, 4.3.3). In the case of salt, food industry actors were engaged to help set the salt targets which helped achieve buy in, while in the case of labelling some retailers were actively engaged in promoting the use of traffic light labels. Importantly, the research findings align with previous research that highlights the importance of government leadership under the FSA in leading the process, including the setting of specific targets upon which the industry could be held to account for their actions (e.g. Mwatsama, 2016, He et al, 2014). This contrasts to the PHRD model where government leadership was weak, sanctions for non-compliance was absent, and where industry were a key driver of the specific commitments made (Durand et al, 2015). This suggests that there is a need to carefully navigate different interests and government approaches to policy, and to understand the nuanced variations in the different approaches that can be taken as part of NGO advocacy in order to support effectiveness.

To summarise, the findings from this research suggest that competing interests and perspectives on the world are a significant condition which NGOs face, and which need to be navigated as part of advocacy. These perspectives are often reflected in the context of corporate interests but are also iterated and endorsed through government perspectives and approaches to policy and intervention. It is clear that there is a lot of variability in the different interests, who holds them, and the extent of alignment with the perspectives and interests of PHN NGOs. NGOs will need to monitor these interests in order to effectively navigate them or take advantage of new or continued support. Opposing views and perspectives represent an important condition which may stall advocacy success. To understand advocacy success in this context, there is a need to look at how advocacy has either worked despite the opposition or has influenced the opposition in some way.

7.4.4 Agenda-setting, framing and creating favourable conditions

A number of the conditions identified in this research are, at least in part, shaped and created by the NGOs themselves. This is particularly the case for those conditions which are favourable for change, such as public demand (4.6.1), supporters and champions (4.6.2, 4.4.4), issue visibility (4.6.1), evidence (4.7.1) and NGO leadership and coordination (4.6.3). In each of these examples we can see that NGOs can play a role in shaping these conditions and ensuring that they are present as part of efforts to help make progress towards goals. This directly links to a number of the tactics identified in chapter 5 as important components of NGO advocacy in PHN, such as establishing messages (5.3), the use of the media to shape agendas (5.3), building networks and coalitions (5.4) and engaging the public (5.5).

The idea that NGOs can create and drive favourable conditions or forces is linked to the notion of agenda-setting and framing. Agenda-setting is an important theme that cuts across the existing policy literature and was also evident in the findings of this research, directly and indirectly. Agenda-setting relates to the prioritisation of a particular issue and the level of attention received, which importantly does not always correlate to the relative importance of an issue (Dearing and Rogers, 1996). Agenda-setting reflects a process with cumulative impact of messaging and activities, as well as a competitive process due to the limits to the number of issues that can be prioritised at any one time. (Dearing and Rogers, 1996). Dearing and Rogers (1996) describe three main levels of agenda – the media, the public and policy – all of which were shown in this research as important targets and considerations in the advocacy explored whether it be through public awareness campaigns, the use of the media to build public support or research and direct government engagement to build political will (see section 5.4). As described throughout chapters 4-6, the media was found to be a particularly important tool used by the NGOs explored in this research (albeit in different ways) as part of agenda-setting in order to raise awareness of issues, maintain the public profile of those issues, and in turn influence MPs and other decision-makers.

A related consideration is one of framing and the way in which messages and policy ideas are presented and perceived by different actors who are directly and indirectly engaged with policy (Snow, 1992). Framing is important in the context of agenda-setting as it reflects the fact that there are multiple truths and interpretations of the same issue, thus reiterating the ‘tug of war’ nature of policymaking and advocacy described in the previous section. In addition to the broad framing of an issue are considerations of frame alignment between coalitions or as part of Social Movements. Snow and Benford (1992) pay particular attention to the importance of aligned framing as a way in which actors come together as part of a Movement and the impact this has on message strength and potential traction. Meanwhile, the Advocacy Coalition Framework describes in detail the way in which coalitions form on different policy issues based on shared perceptions and beliefs about a problem and solution, and thus the way in which a policy is framed (Sabatier, 1988). Message consistency was highlighted in this research as an important consideration for effective advocacy, as described in section 5.3.

An important role of public health framing in nutrition is around shifting the primary frame from a focus on personal responsibility and behaviour change, to a focus on the need for government intervention and the need for upstream policies (Hogwood, 1987). In this context the importance of message clarity in order to get the resonance needed to gain traction on a particular issue was described in section 5.3. One such example of framing and the way it helped changed policy was in the content of front-of-pack labelling (Section 4.3.2). The development of FOPNL policy involved various debates relating to which type of label should be used. The eventual framing that resulted in the standardised scheme that was

introduced was not one of health, rather the practical need for consistency between products and brands. This is particularly interesting in the context of this research as it highlights the need for NGOs to consider the framing which will most likely get the desired outcome, rather than the framing which most aligns with their own motivations. It is likely many of the issues and topics highlighted in this thesis would win on importance but may not get the attention and buy-in needed from the public or decision-makers. This also links to the previous points on competing interests and the need for NGOs to consider what other views and perspectives there are in order to address them in their own framing. Understanding the views and frames of others in this case can be seen to form part of the policy-orientated learning described in ACF (Sabatier, 1988).

As a final consideration in the context of shaping conditions to support change we can return to the way in which NGOs work together and coordinate activities and messages to help achieve their goals (4.6.3, 5.4). This helps to create alternative sources of power and in turn strengthen NGO advocacy positions. This research has identified a number of examples NGOs working together as part of coalitions or networks (4.6.3, 5.4), echoing existing research which has highlighted building coalitions and sharing knowledge and expertise as important for advocacy (Daube, 2013). In addition, NGO leadership was identified as an important condition relevant to research (4.6.3), most notably in the context of CASH who undertake a full range of tactics on a specific issue and are recognised as the advocacy leaders on the topic of salt. This is a good example of the presence of a lead NGO being a key condition which helped with much of the advocacy and progress seen on a specific issue, and which is driven by the NGO.

Returning to the focus of this section, that is the interactions between advocacy NGOs and the surrounding conditions, we can reflect that agenda-setting and framing of issues are important considerations for creating and shaping supportive conditions and forces for change. This research has shown the importance of the media as part of NGO advocacy, which can be a valuable tactic and tool for setting new agendas and galvanising public support for an issue, as well as for shifting the mindset of government (section 5.3, 5.5). Furthermore, alternative framing and agenda-setting actions more directly aimed at policymakers and decision-makers were also found to be undertaken by NGOs to shape conditions in a favourable way, for instance to shape the narrative and outcomes of a particular policy review or political opportunity that may arise. Here, the condition itself is not shaped by the NGO in the same way that, for instance, public opinion and demand can be, however it reflects an opportunity for an NGO to shape decisions and outcomes in a favourable way which in turn supports the NGOs goal. This enforces much what has been written about the Advocacy Coalition Framework, however the findings of the present research do not necessarily suggest that framing is solely about the advocacy groups beliefs themselves, rather that there is an element of understanding the landscape

and perceptions of the opposition in order to apply their policy solutions, to the opposing mindset. This is most likely to be relevant in the context of navigating opportunities and taking advantage of them for change, the focus of the following section.

7.4.5 Opportunism and incremental change

The final type of condition we reflect on based on the research findings are those which NGOs can react and respond to. Often, these conditions represent opportunities for the NGO and can be taken advantage of in order to further advocacy goals. However the condition that emerges may also be detrimental to an NGOs goal and thus requires defensive advocacy in response. Examples of this type of advocacy identified in this research include a crisis or event such as an election (4.6.1, 4.6.4), a supportive food company (4.5.1) or government official (4.4.4) or a new regulatory or legal framework under negotiation (4.4.3). In each of these cases we can see that an opportunity arises for an NGO to undertake strategic and targeted advocacy in relation to the condition, in order to help achieve goals. In this case, we can pose that advocacy success relates to how well an NGO is able to use or respond to a particular condition in order to progress its goals or defend a particular position.

Opportunism is a reoccurring theme across the existing policy literature, as well as in this research (4.7.2). Kingdon (1984) for instance described the emergence of a window of opportunity for policy change as the result of a number of 'streams' – problems, politics and policies aligning. Kingdon's theory suggests that change occurs when a policy idea is raised up the agenda and gains increased attention at the same time that solutions are available and there is political will to act. In addition, the quick-paced nature of advocacy in response to changes in opportunities has been recognised (Fagen et al, 2009). From this research we can see that NGOs can react to the opening of such a window of opportunity, but may also play a role in getting issues up the agenda to help create an the alignment of streams and opening of an opportunity, linked to the previous section and notion of NGOs creating or shaping conditions favourable to change. Reflecting on the policy issues explored in this research, we can see that there were a number of common opportunities which arose, including the 1997 general election and the establishment of the FSA in 1999 following the BSE crisis in 1996. These in turn created abrupt changes to the balance of forces and status quo (section 4.2, 4.3) and created opportunities for NGOs to not only advocate on the different policies, but to advocate in a more targeted way.

In addition to political opportunities a number of commercial opportunities were also highlighted in this research. Notwithstanding the tensions with commercial interests described previously, this research has also highlighted examples where food companies can be important for triggering change. Rather than being homogenous, food companies and their positioning on policy can in some cases be varied, most evident in the case of FOPNL. While much of the debate was triggered by the presence of

a primarily industry led GDA campaign and a primarily public health group leading the traffic light campaign, a number of food companies, particularly retailers, were supportive of traffic lights (section 4.3.3). Furthermore, this research has highlighted a number of examples where the decisions and actions by companies were pivotal in driving change and the eventual policy. For instance, the decision by Tesco to commit to traffic light labelling in 2012 despite being a key driver of the GDA campaign paved the way for traffic light labelling to become the standard option recommended by the government, and for other companies to follow suit. Similarly, in the mid 1990's, it was The Co-operative that showed leadership on nutrition labelling by introducing front of pack information. This highlights the need for NGOs to be aware of the varied positioning of different actors and acting on opportunities for support, particularly from unexpected allies.

An important debate in the political literature relates to whether change results suddenly amid periods of stability as the result of a single opportunity, or whether change occurs incrementally. Punctuated Equilibrium Theory for instance describes long periods of stability which are followed by dramatic shifts and radical changes, akin to an opportunity (Baumgartner and Jones, 1993). Incrementalism on the other hand describes change as resulting from a series of less radical steps which slowly shift the policy discussions away from the status quo (Lindbolm, 1979). Incremental shifts may be small steps, or they may be larger steps, but which are not very radical and as such are often more common as they are perceived as lower risk by policymakers and allow for changes and reversal as required (Lindbolm, 1959). In the context of this research we can see a number of parallels with the abrupt changes described in the Punctuated Equilibrium as being necessary for change. A number of key opportunities were identified in this research, including a left-wing government coming into power, and the establishment of the FSA which refocused and reframed attention on food in Britain in a much more public health orientated way (section 4.4, 4.6.4). This in turn created opportunities for advocacy NGOs to use a range of the tactics outlined in Chapter 5, including engaging directly with the FSA to advocate for the inclusion of nutrition, and for specific policies such as FOPNL and salt reduction and engage with the policy process through formal consultations and evidence reviews relevant to each of the policies (5.6). In this case the political framework that emerged from a newly supportive government was a favourable condition that NGOs were able to react and respond to as part of their advocacy.

We can see from the policies looked at in this research that there was an element of both abrupt change and incremental change which provided a range of opportunities for NGOs to react to and shape the conditions favourable to public health. This suggests that policy change and progress can occur as the result of an incremental and negotiated process which also benefits from key events that disrupt the status quo (Baumgartner and Jones, 1993, Howlett et al, 2009). The idea of policy change ultimately emerging from a series of opportunities that occur at different stages of the policy process, that is

agenda-setting, decision making and implementation, has been described in the literature (e.g. Howlett et al, 2009). However, the findings of this research suggest that the conditions that help generate momentum for a specific policy, and which NGOs can react to, often emerges not from one major event or dramatic shift, but from a series of cumulative major and minor opportunities. These major and minor windows of opportunities cascade from the initial opportunity or event and indirectly support a specific policy change by creating a favourable policy landscape. In this case, a major opportunity could be a sudden change in a political framework or the result of a crisis that is not directly related to the policy issue itself such as the elections or the BSE crisis identified in this research (4.4.1, 4.6.4). As a result of these, a series of less major opportunities can arise which in turn benefit a specific policy. For instance, the establishment of the FSA and the support of the CMO were secondary opportunities to get the specific policy issues on the agenda, even though the establishment of the FSA and support of the CMO was not directly related to the PHN policies described in this research (4.3, 4.4). Similarly, minor windows or secondary opportunities may also arise in the context of the policy itself and thus help build momentum on a specific issue. The introduction of the Communications Act (2002) and EU Regulation discussions are two such examples, where frameworks emerged as an opportunity to discuss related PHN policies but the processes themselves were not about PHN (section 4.3, 4.4).

From this research we can see that a range of conditions emerged which have the effect of both sudden change as well as incremental change. This research has therefore highlighted the complementary and interconnected nature of those theories which suggest abrupt changes result in policy change such as PET, and those which suggest change often results from incremental change (Lindbolm 1959, 1979). A window of opportunity will likely open following a major opportunity such as an initial event or crisis as described in PET (Baumgartner and Jones, 1993), but the presence of additional minor opportunities and the alignment of problem, politics and policies (Kingdon, 1984) can help to translate that opportunity into a specific indirectly related policy change.

To return to the specific focus of this research and section we can reflect on some implications for the role and effectiveness of advocacy. The presence of both major and minor opportunities suggests an element of momentum is important, with NGOs needing to ensure that initial and subsequent opportunities are taken advantage of to achieve change. Further, we can see that different advocacy is likely needed over time depending on the specific opportunity that arises. More general advocacy around public health nutrition would likely have been needed in the early stages, while specific policy ideas and formal engagement likely needed later on. Similarly, tactics such as holding actors to account (section 5.6) are likely to be more relevant following the introduction of a policy as tools to support accountability and ensure implementation. We can also reflect that the implementation of all three policies was the result of a combination of advocacy during the time period looked at, as well as

previous advocacy efforts reacting to earlier opportunities and in turn helped to build momentum and understanding of the issue across a range of domains. A key learning here in the context of the role and effectiveness of advocacy is that NGOs will need to equip themselves in order to be able react to and respond to opportunities as they arise, including a range of minor and major opportunities which can be direct or indirectly related to the policy issue in question.

7.4.6 Legitimacy, credibility, evidence and trust

An additional consideration identified from the findings as relevant in the context of conditions and external influences of advocacy success is the way in which advocacy and advocates themselves are perceived and how this impacts the relationships with other actors. In this context legitimacy, credibility, the use of evidence and trust are interconnected considerations relevant to the relationships between actors which is in turn a condition which may support or hinder success.

Credibility was commonly described in the interviews in relation to the use of evidence-based messaging, a key element of NGO credibility (Berry, 2000). Evidence was shown in this research as having a range of different purposes depending on who you speak to and the way it is used (See section 5.6). In particular, evidence was highlighted across all three of the findings chapter as a condition supporting change (or hindering if it is absent), as an advocacy tactic and as a measure by which to judge an NGO (section 4.7.1, 5.3). As described in Chapter 2, Smith (2013) presented a number of different models of evidence in policy, including knowledge, problem solving, political, tactical, two-community, interactive and enlightenment models. Greenhalgh and Russell (2009) highlighted the socio-political factors that can influence policy alongside more traditional evidence, recognising the number of factors that come into play which may not link to evidence. Of particular relevance to the research findings was the interactive model which reflects that evidence was just one factor which led to the policies seen, and the political model which reflects the fact that evidence reviews were sought by Government and the FSA to justify action on each of the three issues (section 4.3). Furthermore, this is also relevant to the findings of this research in the context of the wide range of conditions that exist, and the idea of multiple and changeable 'advocacies'.

As described, evidence is important for supporting the change process itself, as well as in establishing an NGO's credibility (Berry, 2000). This highlights that evidence is an important consideration, even if it will not itself be what determines change. In this sense, evidence can be described as having both a direct and indirect role as part of advocacy. The direct role reflects the fact that evidence may help to support policy prioritisation and development, and indirectly because it helps to build NGO credibility and thus increase the opportunities for them to engage and influence policy development. Recognising

the role of evidence is important for positioning advocacy and policy as part of this broader context, rather than as part of a linear process.

Similar to credibility, legitimacy was also highlighted in the findings in the context of the way that NGOs are perceived. Legitimacy and representation feature a lot in the development NGO literature, particularly around the degree to which NGOs from the global north have legitimacy to act in the global south. Because this research focused on advocacy in England by national NGOs, this part of the literature on advocacy was excluded from the earlier literature review as it was presumed irrelevant at the time of planning given the focus of the research. However, the findings suggest that it is in fact relevant, albeit in a slightly different context. In the context of development NGOs, Attack (1999) describes four criteria of legitimacy, including *who* the NGO represents (representativeness), *how* they empower those they represent (empowerment), *what* the NGO represents or values (distinctive values) and finally *how effective* they are (effectiveness). Interestingly for this research, the effectiveness of the NGO is just one component of legitimacy in this case.

A key element of legitimacy relevant to this research relates to public participation, both in terms of advocacy legitimacy and the legitimacy of the policy process itself (Gen and Wright, 2013). Legitimacy in this research was primarily discussed in the context of engagement and representation of the public, particularly the most vulnerable communities. As discussed previously in section 7.3, while the NGOs in this research were found to use awareness campaigns and public opinion surveys as part of their advocacy, they were criticised in some of the interviews for tokenistic engagement with the public, focusing too much on bringing the public with them rather than acting on their concerns (section 5.5, 6.8). This has been described as a top down versus bottom up approach to advocacy and policy making (Panda, 2007). In a series of interviews carried out by Onyx and colleagues (2000), campaign focused advocacy which achieves public visibility was considered more successful than lobbying and other institutional forms of advocacy. Bottom up advocacy driven by citizens was the starting point of Gen and Wright's (2013) definition of the key components of advocacy.

This issue of legitimacy and representation is particularly important in the context of public interest NGOs, as the rationale for their involvement in policy comes from the notion that they represent the public. Smyth (2013) suggests that legitimacy relates not only to the engagement with those they represent but about co-creating solutions based on the insight gained from engagement. In this regard, advocacy groups may be seen as more legitimate if they can show that they are reflecting the concerns experienced by communities and individuals, in conjunction with data driven campaigns.

The findings of this research suggest that the NGOs studied (see chapter 5) position themselves as working on behalf of the general population in order to protect their health, however they

demonstrated different levels of public engagement (section 5.5). With the exception of Which? who use their public members to prioritise their activities, there were few examples of the other NGOs actively engaging the public they represent in priority setting, instead focusing any public engagement around the public as ‘message deliverers’. For instance, CASH has an annual awareness raising campaign to educate people about the risks of a high salt diet. Instead, these NGOs primarily seek legitimacy from their use of evidence and benchmarking, rather than from the direct engagement with the public. This is particularly relevant in the case of UKHF who were identified as having the least engagement with the public, the most use of evidence and research and who had the greatest access to government processes.

At present, much of the advocacy (or indeed advocacies) described in this thesis is underpinned by empirical evidence, whether it be population health data (e.g. on obesity or BP rates), product data (e.g. salt or sugar content) or exposure data (e.g. advertisements seen by children) (section 5.3). This brings a degree of credibility to the NGOs and their advocacy. However, the use of empirical data as the sole driver of campaign priorities may not provide an NGO with legitimacy as empirical data alone fails to capture the experiences and priorities of the communities and individuals that the NGOs claim to represent. This is most relevant for NGOs such as Sustain’s CFC and Which? which position themselves as more public facing than, for instance, UKHF which positions itself as more of an academic NGO. In this case, UKHF will likely get much of their credibility and legitimacy from the numerical data they produce, while Which? and Sustain’s CFC, will likely need a combination of empirical and community-driven evidence to ensure they are both credible and legitimate. Thus, legitimacy in the context of this research and the use of evidence is more about the way in which an organisation is able to demonstrate that it represents its core constituency, while credibility is more about the quality of the data used.

The findings also highlighted that the NGOs using more formal mechanisms, such as evidence and close government engagement, were generally perceived as being more credible by the interview participants, particularly government and industry representatives, compared to those acting more informally and outside the system. It is not clear from the findings which came first, though it can be speculated that the *perceived* legitimacy and credibility of an NGO may inform the types of relationships an NGO has, their degree of access to decision-makers and the likelihood of their messages being picked up by others. This demonstrates that legitimacy and credibility are a relevant consideration in the context of external conditions.

A final consideration which is relevant here relates to trust between actors which, as described, can at least partially result from the perception of credibility and legitimacy of an actor. The research findings

suggest that government and industry often lack trust in NGOs and their advocacy approaches, and were often less inclined to engage with certain NGOs than others based on the perceived credibility of the NGO and the extent to which the NGO was viewed as helpful or not (5.6). This is an issue which requires further exploration and analysis in order to better understand whether or not there is a time and place for multi-stakeholder engagement, and how NGOs can maximise the potential of engaging with other sectors as part of advocacy, and the impact this may have on effectiveness.

To concluded, therefore, legitimacy, credibility and trust can be seen as intertwined phenomena which warrant consideration when building the overall strategy for an NGO. Further, they represent a condition which can impact on the extent and ways in which NGOs may be able shape, navigate and react to these, and the specific opportunities that may arise for each. While recognising that a range of tactics may be adopted by an NGO, ensuring that they are seen as both legitimate and credible amongst those they seek to influence is, based on the findings presented in this thesis, likely to be an important consideration for ensuring effectiveness. It is evident from this research that the relationships and interactions between the different groups of actors are complicated. While the relationship between NGOs was generally identified as strong through joint work and coalitions the food industry and government representatives that were interviewed often presented scepticism about working with some NGOs, citing a lack of trust, honesty, helpfulness and credibility. Understanding what external actors value in an NGO and, where possible and appropriate, ensuring that NGOs fulfil these criteria may be an important consideration.

7.4.7 Advocacy success is not definitive

A final consideration is how the end point of advocacy, an important consideration in the context of measuring both specific advocacy tactics, is influenced by the way in which advocacy and external conditions interact. Across the research findings it has been shown that advocacy organisations ultimately seek to achieve a policy change and that the introduction of that policy is considered a success, for instance the introduction of a voluntary salt policy by the FSA (CASH) or the food marketing restrictions by Ofcom (Sustain's CFC) (section 6.2, 6.3). The fact this can be considered a success cannot in itself be criticised, however it is evident from this research that the introduction of a policy does not necessarily mean that an end point has been achieved. In fact, this research has shown that advocacy success is rarely definitive, in part due to the conditions and the unpredictable nature of policy and advocacy described in this thesis, and by others such as Coates and David (2011). As demonstrated in the policy examples explored in this research, even once a policy has been introduced, the external conditions and forces continue to play a role in how the policies are implemented and the political framework in which this happens. In turn this can result in a change in policy direction or policy weakening compared to what was originally intended. An example of this was shown with the voluntary

salt reformulation policy where the initial momentum and political leadership that was seen under the FSA was lost following the 2010 election, and the progress seen in salt reformulation has subsequently stalled in recent years (Laverty et al, 2019). This risk is likely to be particularly high in the context of voluntary agreements unless very stringent measures are in place to ensure compliance (Bryden et al, 2013). Other factors can contribute to policy weakening such as changes to the landscape and context of the policy itself. For example, in the case of the UK's food marketing restrictions, the policy and policy mechanisms have not in themselves changed, however since the introduction of the policy a number of new means of advertising such as digital marketing which were not included in the original policy have become particularly pervasive. The advertising industry, particularly in the context of food and beverage, have been described as "purposefully exploiting the special relationship that youth have with new media" in order to exploit policy loopholes and advertise products to children using new forms of media and advertising (Mongomery et al, 2012). As well as highlighting the fact that advocacy is rarely definitive, this point also strengthens the argument that conditions and competing interests play a role in a number of different ways, and that there is no one causal factor of success or failure, or why change does or does not happen.

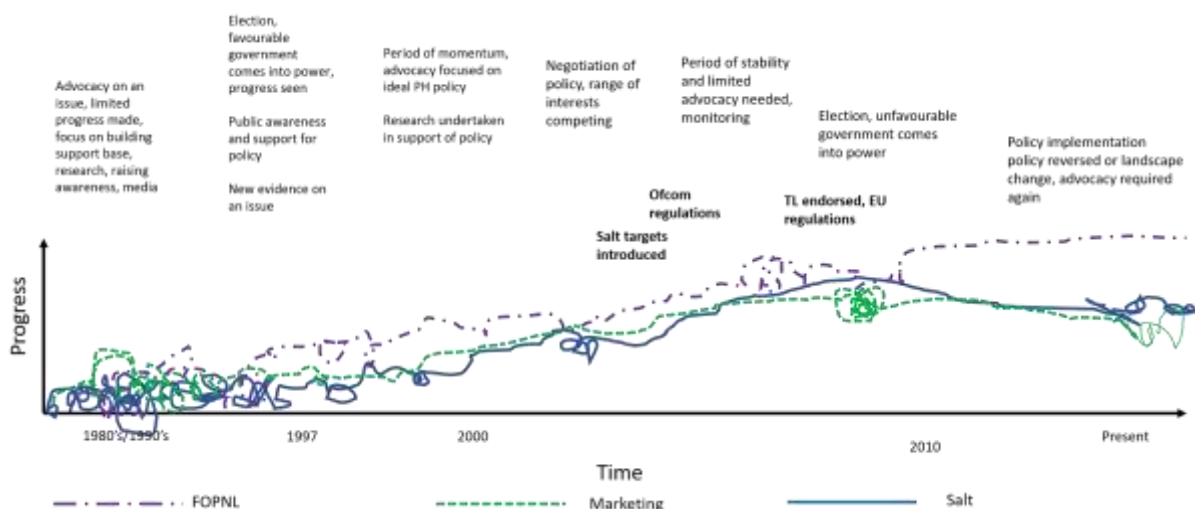
Importantly, this research also suggests that progress and change is not always linear and one-directional. As described previously in this section, not all opportunities are equal and some opportunities that arise in the broader context of policy change are not favourable for NGO advocacy and instead require NGOs to focus on defending positions rather than advocating for change. An example identified from this research relates to the 2010 election whereby a right-wing government came into power and some of the policy and leadership that had previously supported change were retracted in favour of an alternative approach which was less aligned with the NGOs perspective (section 4.2, 4.3, 4.4). In a similar vein we can also reflect on the example of the marketing policy. The marketing landscape has shifted in recent years towards more digital media (Kelly et al, 2015, WHO Regional Office for Europe, 2019) something which is not covered by the Ofcom regulations and thus means that digital media is able to advertise HFSS foods. This demonstrates that while the regulations may have been successful in reducing exposure initially, the regulations have a number of gaps which have allowed companies to use alternative ways to promote their products (WHO Regional Office for Europe, 2019) and thus the overall impact of the policy in reducing exposure is lower. This does not mean to say that advocacy was not effective in the first instance but raises a question about what should be measured and whether or not advocacy success is ever sustained.

These findings have important implications on how advocacy is measured and for the development of a monitoring framework for advocacy which we explore later in this chapter (See section 7.6). In addition, it has implications for the planning and progress of advocacy, suggesting that advocacy rarely

reaches an end point as there will likely be a need for some continuation, even just monitoring of the policy implementation and wider conditions, even after a policy win has been achieved.

Figure 7.5 presents a conceptual chart of the policy process, building on a classic logic model for policy development, to include a reflection on some of the messiness involved with the advocacy process. Progress is depicted based on the perceived momentum gained towards achieving each of the three policies analysed in this research, with the messiness representing periods of stalled progress due to various external conditions identified in this research. Signs of progress drawn from the findings of this research include support from government, for instance, through to inclusion of policies in white papers, as well as consultations on the policies, the presence of advisory boards to discuss the issues and evidence of policy development taking place, amongst others. Periods of stalled or no action reflect periods of no or diminished government support, changed leadership, elections, prolonged consultation periods and lobbying from other actor, all of which slow progress. Diminished progress relates to a reduction in the quality of policy design and implementation (e.g. the weakening of salt policy as part of the PHRD) or the reduction in policy relevance and appropriateness (e.g. the changed food marketing landscape), often as a result of the factors conditions which have resulted in periods of stalled or no action. The chart reflects the fact that there are regularly times of limited progress which are followed by periods of stability and progress. These periods may be the result of changing external factors but may also result directly and indirectly from advocacy itself. The figure also reflects that, even when progress has stalled or is seemingly weakened (as in the case of the salt policy for instance), some progress has still been made overall compared to the starting point, something to reflect on in the context of advocacy evaluation.

Figure 7-5: Policy progress over time: a conceptual chart



Source: author

An important finding of this research, therefore, is that policy momentum will likely build over time, in part as a direct result of cumulative advocacy actions, but also (and perhaps more importantly) as a result of the way in which advocacy interacts with the wider conditions, helping to shift conditions to become more favourable from a public health perspective. A standard logic model recognises that change and progress builds over time but fails to consider the wider conditions and drivers change. The value of Figure 7.5 therefore comes from the fact that it builds on a standard logic model and enhances it by reflecting on the importance of looking at change and progress in the context of the wider conditions and depicting some of the messiness that results from the wider conditions. Importantly, figure 7.5 also reflects that policy change is not always definitive, either for political reasons or a change in landscape, which is important in the context of measuring advocacy, and for capturing the full dynamics and context of politics and advocacy.

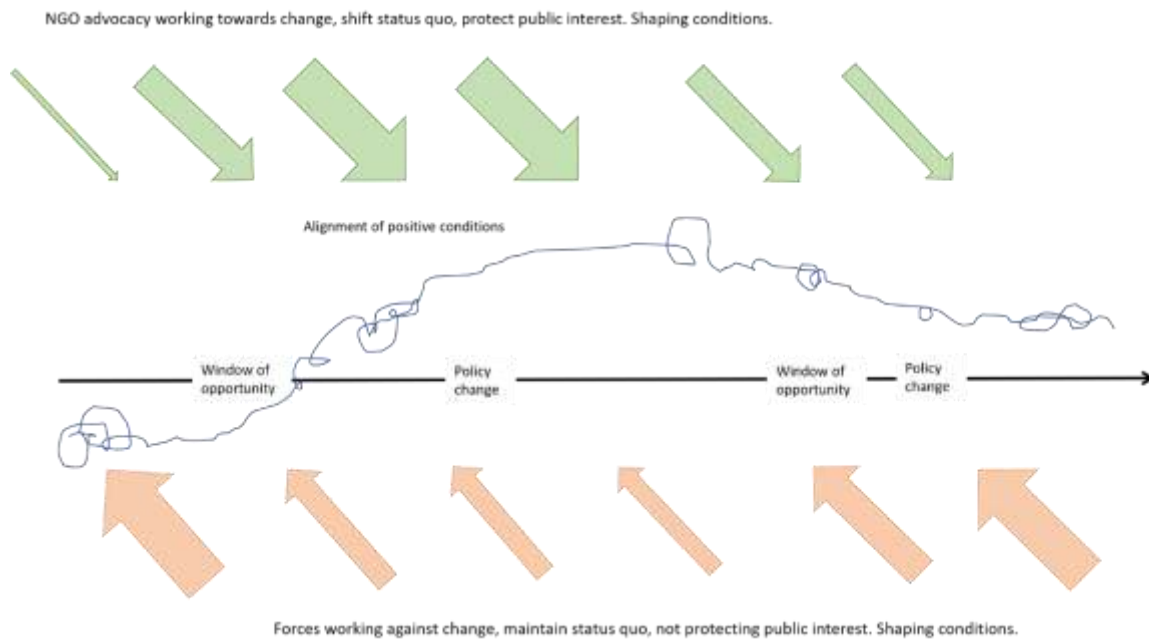
7.4.8 Model of advocacy progress amidst a range of conditions

The interactions between advocacy and the conditions has been a key focus of this section, particularly the way in which certain conditions may act as forces which support and hinder change. The model of forces presented in Figure 7.4 was designed to provide a visualisation of the different types of conditions identified in this research as forces which support or inhibit advocacy progress. In addition, the conceptual chart in Figure 7.5 highlighted the process towards change which has been identified as mostly progressive, but also messy as different conditions influence or stall progress.

Taking the key points from each of these, we can suggest that the progress is influenced by the balance of forces acting for and against change. Specifically, that shifts in the balance of supportive forces or conditions can help progress, while shifts which inhibit change stall progress. Furthermore, we can suggest that windows of opportunity can open and help create policy change, but that the strength of supporting and inhibitive forces will likely be what dictates the type of change that results. These ideas are reflected in Figure 7.6, where the author has tried to depict the idea that the strength of forces evolves over time and that the nature of a policy change resulting from a particular window of opportunity will be dependent on which forces are strongest at a given time. This reiterates the notion that advocacy does not have a definitive end point, rather the balance of forces continues to evolve and new windows of opportunities arise over time. We therefore suggest that continued advocacy will likely be important to help mitigate the risk of policy weakening and to try and block future shifts which are detrimental to the public interest and public health gains achieved. In Figure 7.6, the strength of forces against change and favourable for change is depicted by the size of the arrows, with bigger

arrows indicating strong forces, and smaller arrows indicating weaker forces. Advocacy will likely play a role, but not the only role, in the way these forces shift over time.

Figure-7-6: Model of advocacy progress made in policy



Source: Author

Figure 7.6 depicts, in general terms, a model of the progress made by advocacy and the way in which a shifting balance of forces is likely to influence some of the policy progress and success described in this thesis. However, it is clear from the findings that change is quite complex and that there are a variety of different conditions which can contribute to success and which can play a role in shaping the balance of forces over time. Reflecting back on previous sections, we come back to the idea of there being a range of conditions which need to be influenced and shaped as part of advocacy. These were broadly described in Chapter 4 as being political, commercial or social, but more specifically covered a range of factors such as evidence (social), public support (social), political leadership (political) and a favourable government (political). In the case of marketing and labelling, the Communications Act (2002) and EU Consumer Regulations served as a regulatory framework (political) which supported advocacy progress, and in labelling and salt reduction buy in and leadership from commercial entities was found to be important (section 4.3). A weakening in both salt policy and marketing policy was also identified, resulting from reduced government leadership and a changing marketing landscape respectively.

An important reflection is the fact that the progress made in shaping or creating conditions or forces which are favourable to PHN advocacy are likely to happen at different times, and it is the combination that results in any change that is seen. For instance, public support on issues such as marketing was evident prior to there being much progress with political will. In the case of evidence, some evidence on issues like salt and marketing was available prior to political interest, and then further evidence was collated following the political interest but before commitment to a particular course of action. Thus, we can suggest that the progress seen, and the balance of different forces will differ between conditions and will influence the overall balance of forces we can see.

A number of similar models have been presented previously, including by Kingdon (1984), and Lewis (2016). However, a key distinguishing feature of the model presented in Figure 7.6 is the link between the progress made and the wider forces which support or hinder change, reflecting that the balance of forces swings over time which can stall or even reverse progress. An important distinction between this model and others is that it takes policy and advocacy in a wider context, not just within the specific cycle of negotiations required for an individual policy. This is an important feature in the context of change resulting from a series of major and opportunities which are often indirectly related to the policy issues themselves. By capturing these dynamics, we reinforce the major finding of this research which has been presented throughout this section which is that advocacy and the wider conditions are intertwined phenomena and that advocacy plays a role in creating, shaping and navigating these conditions.

Returning to the overall aim of this research, to explore the role and effectiveness of advocacy, we can therefore suggest that effective advocacy is likely to be advocacy which is able to successfully navigate and take advantage of opportunities and shape the conditions in order to shift the balance of forces and stimulate change. NGO advocates are likely to find themselves on the back foot, but there are opportunities that they can harness, and in this sense advocacy helps to enable change when opportunities arise. Advocacy will likely need shape, navigate and create a range of conditions, and success in different areas will likely occur at different rates and to different degrees. Exploring how NGOs react and respond to the conditions is therefore an important determinant of effectiveness, and one which is considered later in this chapter in the context of building a monitoring framework for advocacy.

7.5 Contextualising the measures of advocacy

An important part of this research was the question about how to measure advocacy and what is effective. In this section we reflect on the findings presented in chapter 6 in order to identify appropriate measures of advocacy in the context of PHN advocacy. The findings of this research

highlight a range of indicators for measuring advocacy, and importantly the different types that exist and the need to consider the appropriateness of the measures. This is particularly relevant in the context of the previous discussion on the links between advocacy and the wider conditions. This section reflects on some of these considerations and proposes a new approach to measuring advocacy based on the findings presented throughout this thesis.

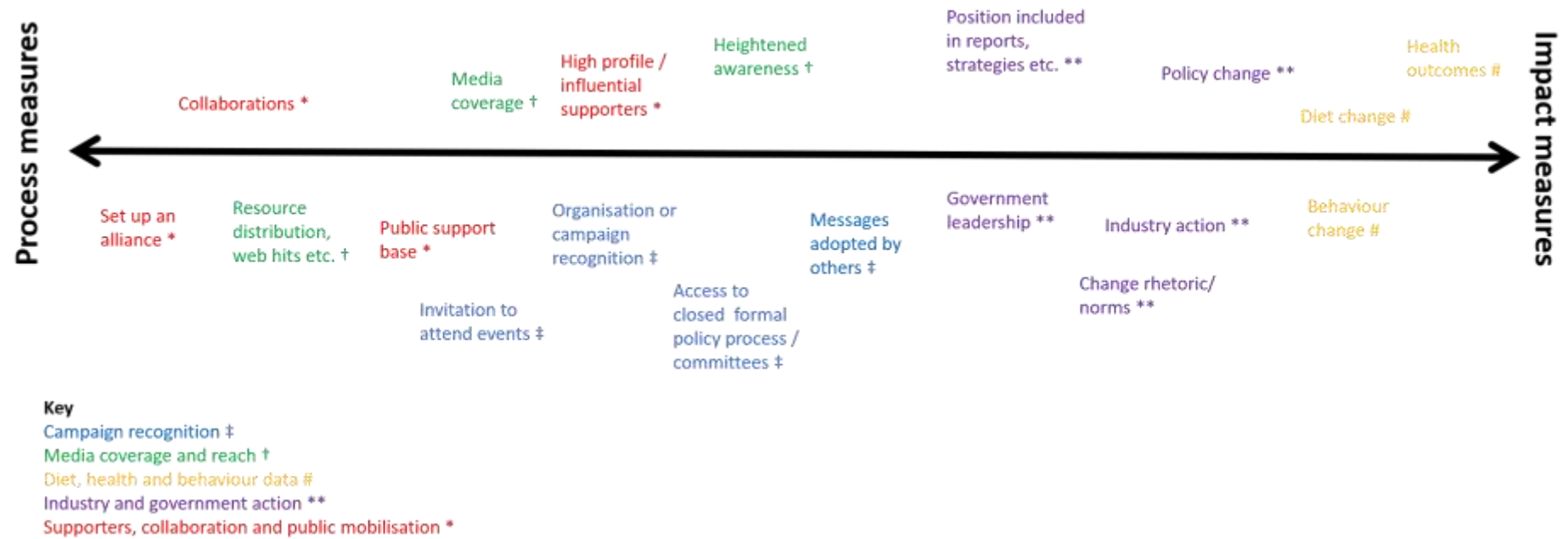
Overall, the existing literature on measuring advocacy described in section 2.4 was found to be piecemeal with no standardised ways of measuring, or even evaluating advocacy. This gap is widely recognised (Coates and David, 2002, Gill and Freedman, 2014, Reismann, 2007). Existing approaches include those which evaluate change based on a pre-defined list of characteristics of advocacy (e.g. Laraia et al, 2003, Coates and David, 2002), provide an overall evaluation of a specific NGO or campaign (e.g. Webster et al, 2014, Moore et al, 2019, Oxfam, 2014) and those which aim to quantify the volume of advocacy (e.g. Donaldson and Shields, 2009). A key commonality between the frameworks was the emphasis on policy change in each.

A number of ways that advocacy can and should be measured were identified from the findings of this research and presented in Chapter 6. Just as a wide range of advocacies have been identified in this research, a wide range of indicators have been identified as well. The specific indicators identified and presented in Chapter 6 were grouped according to whether they represent measures of process, outcome, progress or impact, drawing on Table 2.2 in Chapter 2, and clustered around key themes which were used to present findings in the previous chapter (see Tables 6.1 and 6.2). However, the research findings have highlighted that different types of advocacy tactics may require different measures at different points in time, in part due to campaign progression, and in part related to the conditions under which they are advocating. Furthermore, the research highlighted that different degrees of attribution are associated with each of the different indicators, and that those actions which are easier to attribute are often less informative in terms of ascertaining progress towards goals.

To reflect both of these considerations the indicators identified in Chapter 6 have been applied to a spectrum (Figure 7.7), in order to capture some of this variability and progression that influences indicator appropriateness. The indicators have been coloured according to the themes identified in this research (chapter 6) and then positioned by the author in approximate relation to the degree to which they are process or impact based. Figure 7.7 does a number of things. Firstly, it builds on a simple list of indicators and presents it visually as a spectrum which aids understanding about where different indicators lie according to process or impact. Secondly, it can be used to infer a time dimension whereby indicators evolve as momentum builds towards the longer-term goal. Finally, the colour-coding helps illuminate how the different types of indicators identified in this research fit together, and shows how

indicators such as media, reach and supporters are typically more process orientated, whereas indicators such as government support or action, and health outcomes demonstrate a higher level of impact. These points are picked up in more detail in section 7.5.2. Visualising indicators in such a way is helpful for conceptualising how advocacy can be measured, and can in turn inform processes for measuring and evaluating advocacy (7.5.3) and a practical framework for planning and monitoring advocacy (7.6). These ideas are picked up in the proceeding sections.

Figure 7-7: Spectrum of indicators identified in this research



Source: Author

7.5.1 Short versus long-term measures of advocacy

One consideration relevant to the measures of advocacy is the extent to which outcomes are measured in the short-or long-term. This was highlighted strongly in some of the interviews in the context of proxy indicators compared to milestone indicators. Despite a wide range of measures being identified in this research, it was evident that the NGOs tended to use outcome indicators (section 6.2, 6.3), such as the number of supporters (section 6.8) and media reach (section 6.7). As described in Chapter 6, outcome indicators have the benefit of being more easily and directly attributable to an NGO compared to longer-term indicators which measure progress and impact. However, longer-term indicators of change such as action by government or industry (6.5) or campaign recognition (6.6) were highlighted in this research as being more important for ascertaining progress towards a goal. For instance, if we take the example of a briefing paper or report. This might be measured based on dissemination metrics such as the number of people who have read it (6.7). This is useful to know as it helps build a picture of reach, however achieving a wide reach is in itself unlikely to have been the reason for doing the briefing. Instead, the briefing will likely have been developed to influence the views of a particular actor and thus the briefing impact can also be measured based on evidence that the messaging from the briefing has been picked up by the target group (6.6, 6.5). Such an indicator is less directly attributable to the NGO but is more telling of the success.

The risk of focusing only on the outcome and directly attributable indicators risks undue focus on certain actions and outcomes to the extent that they become the advocacy goal, and the long-term vision and reason for advocating becomes lost. This may constrain advocacy and result in it being less likely that advocacy is adapted according to the conditions which it seeks to influence. In Chapter 1 some of the critiques of the explosion of auditing and measuring were identified, including the fact that the processes and measures often detract from the real goals (Power, 1996, 1997). This is relevant to the findings of this research, in that an emphasis on dissemination and other direct metrics of advocacy may distract from the bigger picture of what needs to be achieved. In turn, this may mean a tactic which is known to achieve widespread dissemination becomes prioritised and repeated based on those short-term indicators, rather than any success towards longer-term goals. Both types of measure are valid and thus we should focus on, not which indicator, but when and how each is used, ensuring that a longer-term perspective is retained. Shorter term measures can be valuable because of the ease of attribution, particularly when looked at in the context of ultimate goals and the conditions at the time.

7.5.2 Linking measures and conditions

An important theme throughout this discussion has been the connections between the three research areas. Coates and David (2002) describe a number of considerations for measuring advocacy, including the need to select appropriate measures and to look at the whole of advocacy undertaken by an NGO.

Similarly, Keck and Sikkink (1999) reflect that different outcomes of advocacy will be relevant at different stages of the political cycle, recognising that there is no one standardised metric for change. A general reflection on the different models and attempts to measure and evaluate advocacy described in section 2.4 is that many of the existing models are static and do not reflect the wider conditions, something which has been identified in this research as important for advocacy. Building on the previous discussion we can suggest that advocacy outcomes will vary according to the conditions that advocates face and that a static approach to measuring advocacy fails to capture the full dynamics and risks losing some of the variability that comes from the links between advocacy and the conditions.

To expand on this, we can build on section 7.4 to reflect on the different types of advocacy required under different conditions. For instance, advocacy seeking to *shape* the conditions is most likely to involve advocacy to shift public opinion, build the support base and generally raise awareness about the cause (section 7.4). The results from this research suggest that the most appropriate measures for these tactics are likely to be those that track support and awareness (section 6.8), but also track the impact that this has in terms of, for instance, increasing political will and interest on the issue (section 6.5). Advocacy which *navigates* certain conditions will likely need to focus on presenting an alternative perspective and building evidence that challenges alternative perspectives on a particular issue (section 7.4). Here the measures could be a change in positioning by industry and/or evidence of a policy progressing regardless of commercial positions (section 6.5). Advocacy which *reacts* to a particular process or event is likely to be high-level, and involve consultations, decision-maker engagement and publication of briefings (section 7.4). In this case, measures could be shifts in the narrative and language used in proposals or the final policy in line with those that have been advocated on, or evidence that has been taken and used by key decision-makers (section 6.6). In addition, the phase of a campaign may also dictate the best measures, with a campaign or issue area in its early phases likely to be measured by using indicators around momentum, such as support and reach (6.7 and 6.8) while older campaigns or issues which have traction should be measured according to policy implementation and the impact of those policies (section 6.5, 6.4).

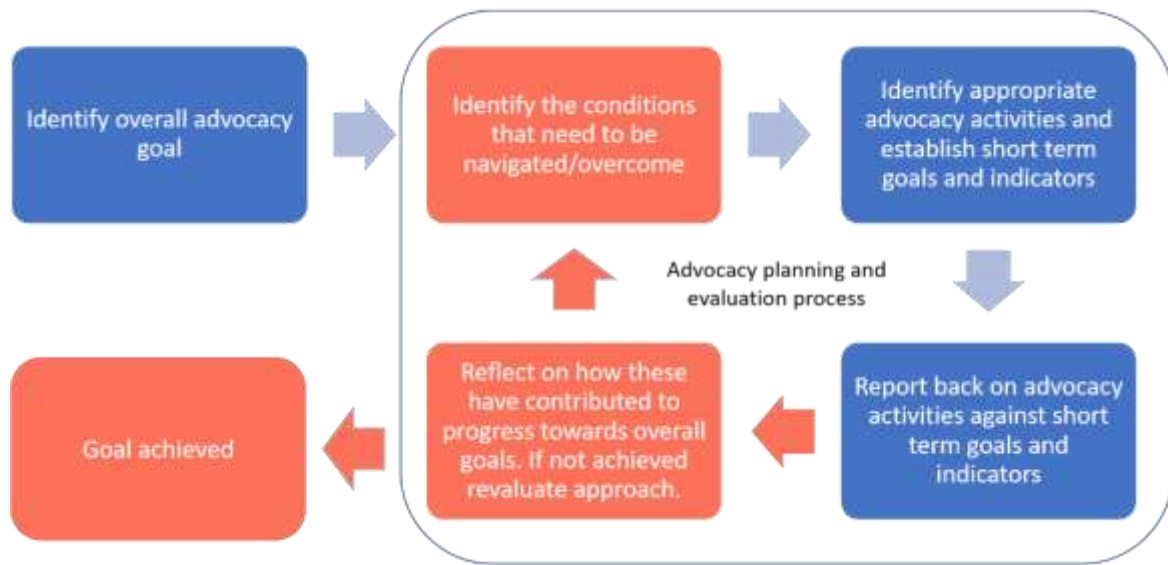
At different points in a campaign's progression, and depending on a number of wider conditions, the appropriateness of certain indicators will vary. It is likely that for a new campaign and/or where progress is limited, the process and output indicators depicted towards the left of Figure 7.7 will be more appropriate, however as momentum builds and as time progress the progress and impact indicators towards the right of Figure 7.7 will be more necessary. Further, when looking at progress and impact measures, any process and output indicators used earlier on in a campaign may be useful as proxies to support a degree of attribution. That is not to say that time is the only determinant of what indicators should be used, nor that certain indicators become redundant as time progresses. Instead, we suggest

that potential indicators are cumulative over time and NGOs should be ambitiously looking to use a greater range of indicators as time progresses. This also highlights the variability in how an NGO can and should be measured, and building on the previous section, leads us to conclude that the conditions need to underpin the way in which advocacy is measured, and what success can be expected from an NGO at a given time.

7.5.3 Alternative approach to measuring advocacy

Reflecting on these points, Figure 7.8 presents a framework that captures the need to consider both short- and long-term indicators, and to constantly reflect on where progress has been made, what is needed, and what needs to be done. It has been designed in such a way that it tries to move our thinking away from typical linear models, instead highlighting the importance of assessing short-term goals within the context of longer-term goals, reflecting the conditions and thus advocacy that is needed and reevaluating the tactics and approaches based these considerations. Unlike a theory of change, this figure highlights the iterative nature of advocacy and the need to develop indicators and tactics in relation to the conditions. It draws on the findings of chapter 4 which highlighted the need to consider the wider conditions when exploring advocacy, and on chapter 6 which highlighted some of the tensions between measuring ultimate and short-term goals. The figure highlights the importance of achieving ultimate goals but recognises the fact that much of the advocacy that is conducted is going to be about shorter-term goals and navigating different conditions. It has been designed to reflect that advocacy should be regularly evaluated in terms of what has been achieved, but also to ensure the approach taken still reflects the conditions experienced at a given time and considers new opportunities that may have arisen. Figure 7.7 can be helpful here for visualising what types of indicators may be appropriate for the advocacy undertaken and planned, and also to aid understanding of where specific indicators sit in terms of their degree of process or impact. The blue squares represent those considerations identified in this research as typically undertaken in advocacy planning. The red squares represent additional considerations for advocacy evaluation, building on the findings and discussions of this thesis. The first of these is to drive thought about the conditions that need to be overcome as the starting point for identifying appropriate actions, rather than just identifying potential actions. The second is a reflective process about what progress has been made towards the goal and addressing the conditions has been achieved, and what changes might be needed. The final is an honest reflection on whether or not the action has resulted in the goal being achieved, in conjunction with some of the more short-term indicators you might expect directly from the actions undertaken.

Figure 7-8: Continuous monitoring and planning framework for advocacy



Source: Author

Recognising the variability of advocacy or advocacies is vital for ensuring that measures are valuable and reflective of what has been done, and what needs to be achieved. This model builds on basic evaluation models and has the added value of integrating conditions as a core part of the evaluation process. By grounding the framework in the overall goal, but allowing scope to reflect on specific conditions and how they may be addressed and in turn how specific actions might be evaluated as part of a process towards these goals, Figure 7.8 brings together a number of the themes highlighted as relevant considerations when considering the effectiveness of advocacy in this thesis. This model underpins some of the thinking for a more comprehensive framework for advocacy which is presented in the following section.

7.6 Practical considerations for a monitoring framework for PHN advocacies

Building on the previous sections we now shift the focus to some of the more practical implications of the research findings and consider the implications for the development of a monitoring framework and similar practical tools for NGOs. Indeed, the motivations behind this research were not only to better understand the academic and theoretical considerations for advocacy in policy change, but to identify some practical considerations that may help NGOs to improve their advocacy and influence potential in the real world. Drawing on these practical motivations, a number of tables (Table 7.2-7.4) are presented throughout the remainder of this chapter which build on the theoretical findings and conceptual models that have been presented, finishing with a proposed framework for the monitoring and evaluation of NGO advocacy which can be used by NGOs to support their advocacy (Table 7.5). In turn, this may help strengthen NGO advocacy and the ability for NGOs to address some of the key public health nutrition issues outlined in chapter 1 such as insufficient government action and weak policies.

Kraak and colleagues (2014) developed a broad conceptual framework for monitoring and accountability which focuses on the process of taking, sharing, holding and responding to account, which underpins the Food-Epi (Swinburn et al, 2013b) and BIA-Obesity (Sacks et al, 2019) frameworks developed by INFORMAS to measure the degree of action by government and industry to improve different dimensions of the food environment (Swinburn et al, 2013a). The research presented in this thesis was designed based on an assumption that accountability is not only a relevant consideration for advocacy in the context of an advocates role in holding other actors to account, but also that advocacy itself could be measured, and that establishing links between advocacy and policy change to ascertain effectiveness would be possible. The absence of a monitoring framework for advocacy organisations to complement those included in INFORMAS for other actors was of particular interest, given the general lack of existing frameworks for monitoring and evaluating NGO advocacy. This research also built on the authors own critique of existing frameworks for measuring and evaluating advocacy (see chapter 2) which are one-dimensional, failing to capture the tactics, measures and conditions which can influence advocacy. In the context of this thesis and the research findings, such a framework for advocacy should be focused on shared learning and optimising advocacy actions and strategy, rather than as an advocacy tool to challenge the actions of NGOs, which the Food-Epi and BIA-obesity frameworks of INFORMAS seek to achieve.

Before going further, it is important to reflect on the appropriateness of such a framework for advocacy in the context of the findings. One of the assumptions during the planning stages of this research was the notion that advocacy could be generalised, and thus a standardised framework could be developed based on actions and expected outcomes. However, as previously described in this chapter, this is actually very challenging given the dynamic nature of advocacy. This presents a tension between the

overall research aim of this research and the findings. In some ways, an accountability or monitoring advocacy framework is contradictory to the findings of this research due to the risk of it becoming too static and unable to capture the dynamics and conditions sufficiently, ending up with the same pitfalls as some of the existing models described in Chapter 2.

However, the very fact that advocacy is so dynamic means a framework could in fact be a valuable and important tool for shaping the way in which advocacy is conceptualised, and thus informing the monitoring and evaluation of advocacy in different contexts and at different times. Here we can reflect back on the important role of the conditions described previously, and the need to consider a wide range of these in the planning, delivery and reporting of advocacy. With this in mind, a framework which is focused around the conditions may be a helpful resource for cutting through some of the complexities of advocacy. Such a framework could help support NGOs or others in ensuring that actions are planned and measured with the broader context in mind, rather than being driven by a generic checklist of short-term actions.

A number of existing models for monitoring advocacy were presented in chapter 2. Overall, the findings of this research reinforce the authors' suggestion in chapter 2 that they are too simplistic, failing to capture some of the important interconnections and complexities of advocacy which this thesis has presented. For instance, Moore and colleagues (2013) planning framework and Chapman's (2004) primer for public health both list some key considerations for advocacy which align with the findings presented, but do not reflect on the wider conditions to inform the specific advocacy priorities or provide any indication of the metrics that could be used to measure advocacy. As described in Chapter 2, Donaldson and Shields (2009) take an empirical approach to measuring advocacy which offers some concrete advocacy measures but also fails to acknowledge the wider dynamics of advocacy, instead based on the assumption that more activities mean an increased likelihood of success. While this may be the case in certain circumstances, it does not reflect the range of actions that are likely needed at different times and under different conditions. Keck and Sikkink (1999) developed a framework which explores advocacy over time, reflecting that advocacy has different roles and evolves as policy progresses. This is a useful perspective, aligning with the notion that conditions are important and that there are a range of advocacies. However, the model itself does not capture the messiness of advocacy, instead suggesting there are clear phases of advocacy which one would work through. This model could be improved by anchoring it in conditions rather than logical steps, something which will be picked up later in this section.

Reflecting on some of the key elements of the different frameworks which resonate most with the findings presented in this thesis and discussed in this chapter, we can identify some important characteristics of advocacy and considerations for measuring it:

- Advocacy has different roles at different times and evolves over time as policy progresses (Keck and Sikkink, 1999, Gill and Freedman, 2014)
- Making measuring a key value of the organisation can help with ongoing monitoring (Coates and David, 2002)
- Linking capacity, performance and achievement is valuable for contextualising advocacy and its effectiveness (Laraia et al, 2003)
- Reflecting on broader social change which has resulted from advocacy, rather than on outcomes of specific actions (Pelletier et al, 2013)
- Agenda-setting, building relationships, seizing opportunities and communication as key elements of advocacy (Moore et al, 2013)

A key consideration which underpins the development of the framework is the idea that effective advocacy is advocacy which effectively navigates and addresses conditions at a given time, rather than simply undertaking a specific set of activities towards goal, and that measures need to reflect performance as well as impact.

Identifying the conditions

With the research findings in mind, the appropriate starting point for developing a framework for monitoring and evaluating advocacy is to identify some of the key conditions highlighted in this research and reframe each as a question that a researcher or advocacy organisation could ask to aid their understanding of the specific conditions at play when seeking to plan or assess a particular activity or organisation (see table 7.2). This recognises that advocacy is evolving, and different actions will be needed at different times (Keck and Sikkink, 1999, Gill and Freedman, 2014). The first column in Table 7.2 highlights the conditions which emerged from the findings of this research as important in PHN advocacy and policy, organised according to whether they are social, commercial or political (drawing on Tables 4.1, 4.2, 4.3 in chapter 4). Reframing the conditions as questions helps to provoke thought as to whether or not a condition is present and can help to build a picture of all the relevant conditions at a given time.

This question-orientated approach builds on the work of others, such as Pelletier et al (2013) and Gill and Freedman (2014) whose frameworks were presented in chapter 2 and were based on a series of questions around change. Pelletier (2013) for instance, building on indicators developed by the

Consortium for Communication of Social Change, identified a number of factors which can support social change in the context of undernutrition and reframed these as questions one can ask to establish whether things are lined up in a way that is likely to support change. The framework developed by Gill and Freedman (2014) on the other hand asks a series of questions which are relevant to the organisations capacity and preparedness to address a particular issue. In both of these there is an element of reflection on the conditions, however they don't position the conditions as the primary determinant of which tactics should be used under different conditions, and the fact that advocacy can play a role in shaping and navigating these conditions, a key added value of Table 7.2.

It is proposed here that the final column of table 7.2, that is a series of questions about the conditions which are present, serves as the anchor for monitoring and evaluating advocacy, reflecting on one of the key findings of this research that advocacy should be conducted with the conditions in mind (section 7.4). It builds on the notion of there being a range of forces for and against advocacy and public health goals and is designed to help NGOs identify what these forces are and thus what forces need to be utilised or overcome.

Table 7-2: Identifying conditions: A proposal for advocacy planning and monitoring

Examples of conditions identified in research		Questions to ask during the advocacy planning and monitoring process
Political	Issue prioritisation	Is the issue a government priority?
	The leadership of the FSA	Is there a government department or institution that could take leadership on the policy issue?
	Policy development and implementation	Is there an existing policy? Is the existing policy fit for purpose? Is the existing policy implemented?
	Individuals in government	Are there any individuals within government that are or could be supportive?
	Elections	Is there an election soon? Is the party in power likely to change?
	Ideology of government (left wing favourable, right wing unfavourable)	Is the ideology of the government favourable for public health nutrition policies?
	The presence of a regulatory framework	Is there a regulatory framework or other opportunity for change?
Commercial	Industry opposition	Is there opposition to the policy?
	Company action and commitments	Have companies committed to act?
	Industry supporters	Are there any industry supporters of the policy?
	Policy challenge to market interests	Does the policy challenge the market interest?
Societal/other	Evidence base and research on the issue	Is there adequate research on the need for and effectiveness of the policy?
	Issue awareness	Is there general awareness about the problem and/or solution?
	Public support	Is there public support for the policy?
	Public engagement	Have the public been engaged on these issues in order to help shape priorities?
	Champions	Are there any influential public figures that could champion the issue?
	Lead NGO	Is there a lead NGO on the issue, or NGO which could take the lead?
	Existing networks and coalitions	Are there some key NGO or other allies already advocating on the issue
	Available funding for NGOs	Is there adequate funding and resources for the NGOs?

Source: Author

The rationale for different tactics

The second consideration for a practical framework for advocacy is the purpose or value of the tactics identified throughout this thesis in order to begin making the connections between the tactics and the conditions (Table 7.3). This table draws on the findings presented throughout Chapter 5 and Table 5.1. This does not create an exhaustive list of actions, but begins to draw out the ‘why’ consideration for advocacy and support the identification of the type of approaches and tactics that could be prioritised in different contexts and for different purposes. The rationale of the activities draws on the findings of this research, as well as Moore et al (2013) guiding framework for advocacy. By building our understanding of the role that different activities play we can start to build a picture of appropriateness of advocacy tactics and strategies within the wider context of the conditions that need addressing. Table 7.3 is important as it draws on the notion of there being a range of advocacies (see section 7.3) which may be adopted under different circumstances, and by different NGOs. For instance, if an

absence of public engagement was identified as a missing component of the policy discourse than this may become a priority for action, whereas if an election and chance of government change was on the horizon this may become a priority. Similarly, if an issue already has a high profile then priorities may be shifted or expanded to include other activities.

Table 7-3: Making connections between actions and goals: The rationale for different activities

Activity type	Activities	Rationale
Raising the profile of an issue (5.3)	<ul style="list-style-type: none"> Developing clear, consistent and evidence-based messages Use of media, events, workshops Awareness raising activities and campaigns Dissemination of reports, research and other evidence 	<ul style="list-style-type: none"> Helps build awareness and momentum on issue Helps change narrative Shapes decision-maker positions Establish a sense of urgency Generating short-term wins Strengthen evidence base Puts pressure on ministers and industry Strengthen NGO credibility
Representing and engaging the public (5.5)	<ul style="list-style-type: none"> Public opinion surveys Awareness raising campaign which is ongoing or annual Policy focused campaign with a specific policy goal Engaging the public to understand concerns 	<ul style="list-style-type: none"> Empowering public action and building awareness Demonstrating public support and/or concern Representing different perspectives Raising profile of issue Getting support and engaging other, including from influential spokespeople
Networks and coalitions (5.4)	<ul style="list-style-type: none"> Working together on lobbying and other contributions to policy process Building broad alliances and membership Identify spokespeople / champions 	<ul style="list-style-type: none"> Creating a strong coalition Develop and maintain influential relationships Consistent and shared messaging Power and credibility from numbers Bring together a range of complementary perspectives and approaches
Influencing industry (5.6)	<ul style="list-style-type: none"> Meetings and dialogues Surveys and monitoring of progress/actions Collaboration with supportive companies 	<ul style="list-style-type: none"> Develop and maintain influential relationships Incorporate changes into corporate culture Understand other perspectives on policy issues Get support for policy action
Influencing government (5.6)	<ul style="list-style-type: none"> Consultations and engagement with existing policy frameworks/regulations Advisory committees and multi-stakeholder platforms Supporting or leading on Bills, PMQs and EDMs Working with/targeting specific MPs and decision-makers Surveys or progress/actions Election campaigning Building support in opposition party 	<ul style="list-style-type: none"> Develop and maintain influential relationships Contributing to policy decisions and development through formal channels such as committees Support or present counterarguments Secure support within government, help make the issue a government priority Shift or build on government ideology

Source: author

Evaluating change in the context of conditions

Having identified some of the conditions and the rationale for some of the tactics used by NGOs we can start to bring these elements together in the context of monitoring and evaluating advocacy. Table 7.4 brings together the conditions and potential ways to evaluate an NGO under the different conditions through a series of questions that one may ask to judge and NGOs advocacy, or the overall advocacy on a given issue, drawing on the findings presented across the three findings chapters. This builds on Figure 7.8 which suggests a reflective approach to advocacy is needed, as well as the findings presented in Chapter 6. The questions seek to build a broad picture of what an NGO is doing, particularly in the context of the conditions, recognising some of the challenges of measuring advocacy such as that many changes are intangible and hard to attribute to one action or NGO. The evaluation questions draw on the activities and rationale presented in Table 7.3, as well as the indicators identified in Chapter 6, reflecting the need to include a range of indicators when measuring advocacy. In some cases, the details have been directly taken from the findings of this research while in others, the information is based on an interpretation of the findings from across the research, for instance the specific tactics which may be relevant under specific circumstances. This was necessary as some of the main conditions that were discussed, such as the ideologies of the government in power, did not explicitly come up in the context of tactics.

Using the conditions to drive the evaluation is an important added value of this table. Making the link between the evaluation questions and the conditions helps ensure that the evaluation of an NGO is appropriate for the specific context within which they are working, and for what they want to achieve. In the absence of any consideration of the conditions, there is a risk that evaluation becomes meaningless or provides an inaccurate representation of what an NGO is doing and doing well. For instance, an NGO could be evaluated based on their activities to raise awareness on an issue through media activities, but, if the specific need at the time is different, then the value of the media contribution is lower than when raising the profile of an issue is a priority. Similarly, an NGO may not be perceived to be making progress with government perceptions or actions on an issue, however, if at the time the government has other priorities or has an ideology which does not support the policy area in question, then the NGO may be right to have prioritised other activities with a longer-term goal in mind. This highlights some of the practical implications and considerations of the interactions between advocacy and external conditions described in section 7.4 and the various models of change presented, reiterating the importance of using the conditions to guide advocacy and the way that it is measured.

Table 7-4 Monitoring public health advocacy: considerations for evaluation

	Conditions	General evaluation question
Societal	Is there adequate research on the need for and effectiveness of the policy?	<ul style="list-style-type: none"> Does the NGO use and/or produce evidence relevant to the issue? Are there examples of the evidence being used by a decision-maker? Has the research or evidence shaped norms or practice? Is the NGO seen as a credible source?
	Is there general awareness about the problem and/or solution?	<ul style="list-style-type: none"> Does the NGO undertake awareness raising activities targeting the public? Is there evidence of public engagement and/or increased public awareness?
	Is there public support for the policy?	<ul style="list-style-type: none"> Does the NGO target action in order to galvanise support of the public? Is there evidence that public support is increasing?
	Have the public been engaged on these issues in order to help shape priorities?	<ul style="list-style-type: none"> Has the NGO used the public to help drive policy priorities? Are community views and challenges reflected in the organisations policy positions?
	Are there any influential public figures that could champion the issue?	<ul style="list-style-type: none"> Has the NGO engaged high-profile spokespeople to champion the issue?
	Is there a lead NGO on the issue, or NGO which could take the lead?	<ul style="list-style-type: none"> Is the NGO a leading authority on the issue and/or working in coalition with others? Is the NGO supporting the efforts of others? Is there a shared message that different groups are coming around?
	Are there some key NGO or other allies already advocating on the issue?	<ul style="list-style-type: none"> Is the NGO working with others to achieve goals? Has the NGO/coalition been recognised, or have messages been adopted?
	Is the issue a government priority?	<ul style="list-style-type: none"> Is the NGO actively engaging with government or government processes? Has the NGO been invited to join committees? Has the issue become a government priority?
Political	Is there a government body that could take leadership on the issue?	<ul style="list-style-type: none"> Is the NGO engaging with the right government body, and supporting them in policy development? Has the issue been taken on by the relevant department? Are they investing in policy development?
	Is there a policy in place already?	<ul style="list-style-type: none"> Is the NGO monitoring progress on the policy? Is the policy reflective of NGO positions? (is there evidence of policy impact?)
	Is the policy in place fit for purpose?	<ul style="list-style-type: none"> Is the NGO identifying and advocating around policy gaps? Has the policy been strengthened? (is there evidence of policy impact?)
	Are there any individuals within government that are or could be supportive?	<ul style="list-style-type: none"> Is the NGO engaging with specific government officials either who are already engaged or could be engaged? Is there evidence of that official speaking positively on the issue, internally or externally?
	Is there an election soon – is this likely to change the government in power?	<ul style="list-style-type: none"> Is the NGO using the opportunity of an election to push forward messaging? Are any parties taking forward the NGOs messaging?
	Is the government ideology favourable to the type of policy being advocated on?	<ul style="list-style-type: none"> Is the NGO working with government and opposition, and key decision-makers? Have any policy commitments been made? Has the policy been developed and/or implemented? Is the NGO working with influential internal decision-makers?
	Is there a regulatory framework or other political opportunity in which the policy fits?	<ul style="list-style-type: none"> Is the NGO actively engaging the regulation development? Is the issue being taken forward as part of the regulation discussions??
	Is there industry opposition to the policy?	<ul style="list-style-type: none"> Is the NGO working to understand the business position and work out common ground? Is the NGO counteracting business opposition? Is there evidence of industry positions shifting favourably?
Commercial	Have companies committed to act?	<ul style="list-style-type: none"> Are the NGO monitoring industry commitments on a policy and/or any progress being made? Is there evidence of industry action?
	Are there any industry supporters of the policy?	<ul style="list-style-type: none"> Is the NGO engaging with supportive industry actors and utilising them for support? Is there any evidence of new industry supporters coming on board?

Source: Author

Bringing it all together – laying the groundwork for a monitoring framework for advocacy

Having adapted some of the key theoretical and conceptual findings of this research into practical considerations for NGOs, we can return to one of the goals of this research which was to explore opportunities for the development of a monitoring framework for NGO advocacy.

A proposal for a monitoring framework for advocacy is presented in Table 7.5, drawing on Tables 7.2-7.4, the theoretical discussions presented in this chapter, as well as the findings presented in chapters 4-6. Table 7.5 provides the groundwork for an advocacy monitoring framework, bringing together the conditions, tactics and evaluation questions presented previously, and also includes some specific measures/indicators identified from the research for the different activities. Like Table 7.4, Table 7.5 uses the conditions as the leading consideration from which the appropriate tactics, measures and evaluation can be identified. In addition, it also provides recommended actions and measures based on whether or not a condition is present, recognising that activities need to be adapted and reviewed based on the wider context but may remain appropriate.

The framework has a number of strengths and adds to our understanding of the role, effectiveness and measures of advocacy. The main strength of the framework as presented is that it is anchored in the evaluation of advocacy and identification of appropriate measures and tactics within the context of the conditions at a given time, thus addressing one of the gaps commonly seen in other frameworks. While static by nature of being a table, something which other models can be criticised for, the focus on the conditions provides some depth and a degree of nuance to the considerations needed and reflects the advocacy dynamics described previously, which would not be possible if the conditions element was removed.

Secondly, it highlights that the presence or absence of different conditions often requires slightly different advocacy approaches, although the suggested tactics are not entirely autonomous. For instance, in the absence of public awareness, the priority would be to increase awareness through various media and other publicity focused tactics, while in circumstances where public awareness is high, it may be more appropriate to use that awareness as part of messaging either instead of or as well as continued awareness raising activities. Similarly, when the government's ideologies are favourable to the cause, advocacy which focuses on increasing engagement and lobbying government is likely to be more effective than in the case of an unfavourable government. However, if there is an unfavourable government lobbying activities will still be important in conjunction with efforts to engage with a more favourable opposition part as part of longer-term goals.

Finally, the tables provides some suggested measures based on both the tactics and the conditions within which they are being done. In many cases, similar measures will be used regardless of the conditions, but in others the measures of progress will vary according to what is specifically hoped to be achieved. For instance, in the case of there being no existing public engagement, advocacy would benefit from focusing on increasing that engagement and being measured according increased engagement, however if public engagement is already strong then measures and activities would be

better focused on how that public engagement is progressing the discourse or helping towards the desired change. The focus around the conditions is again relevant here as it helps frame the measures in such a way that the wide range of measures described in chapter 6 and section 7.5 can be captured. This seeks to address the remarks made previously about the risk of the short-term indicator (such as distribution) becoming the goal at the expense of the broader goal. It is proposed here that contextualising actions helps ensure that the vision is maintained. For instance, without any context to why an action is being undertaken it is tempting to focus only on the immediate outcomes, such as distribution of a briefing. However, if an action has a specific goal, such as to shape the thinking of decision-makers, the measures should focus not only on the distribution but on any evidence of whether the action has shaped the thinking of the target audience.

Table 7.5 has the potential to help guide advocacy planning on what actions to prioritise and provokes thought about the prevailing conditions which may dictate the best actions to undertake. In addition, it suggests some specific and broad evaluation questions which can be used internally or externally to build a picture of advocacy and in turn make judgement on progress and success. The framework represents an early attempt to develop a monitoring framework for advocacy and serves to fill a gap in our understanding of advocacy, how it can be measured and provides a practical tool for NGOs and others to use when planning and evaluating advocacy. It should be viewed as the groundwork for a monitoring framework, from which future research could be undertaken or adaptations made to make it more useable and practical for use. For instance, testing the content in different scenarios, streamlining some of the content or converting it to an online tool which guides someone through the review process based on the answers given might be a valuable next step for this model.

It is important to acknowledge that the framework is not based on concrete measures, which is reflective of the fact that the advocacy itself is not likely to be clear cut and that the findings of this research suggest a more reflective, nuanced and adaptable approach to measuring advocacy is appropriate. Incidentally, the word 'measuring' itself which was used in the planning of this research is not entirely appropriate as it suggests quantitative analysis of what is done, when instead this research and the practical and theoretical frameworks throughout this thesis are based on more qualitative approaches judge not only what an NGO is doing, but how well an NGO is positioning its advocacy within the context of the conditions.

To summarise, the tables presented throughout this section, and particularly Table 7.5, provide a practical interpretation of the research findings, building on the conceptual models presented previously in the chapter. Each of the tables could in themselves be used by an NGO as part of their deliberations of strategy and approaches, while Table 7.5 provides a broader tool which could be used

throughout the planning, monitoring and evaluation process. The practical considerations that come out of this research are particularly important and relevant as advocacy itself and the challenges faced both in advocacy and the wider policy discourse and landscape are very real issues. By drawing connections between the theoretical and conceptual role of advocacy and the implications in the real world we have been able to further the understanding of advocacy and the role it plays in public health nutrition in England. In turn it is hoped that this can support NGOs and others in PHN advocacy.

Table 7-5 A proposed framework for advocacy monitoring and evaluation

Societal conditions			
Conditions		Suggested action areas	Suggested measures
Is there adequate research on the need for and effectiveness of the policy? (5.3)	Yes	Messaging, agenda-setting <ul style="list-style-type: none"> Produce evidence-based briefings to highlight issues to decision-makers (5.3) Use evidence-based messaging (5.3, 4.7, 6.7) 	<ul style="list-style-type: none"> Reach and distribution, media coverage (6.7) Message picked up by key decision-maker or include in key documents (6.6) Changed rhetoric/norms (6.6)
	No	Messaging <ul style="list-style-type: none"> Undertake research, commission research, work with academic partners, explore evidence from elsewhere (4.7, 5.3) 	<ul style="list-style-type: none"> Reach and distribution, media coverage (6.7) Message picked up by key decision-maker or include in key documents (6.5, 6.6) Changed rhetoric/norms (6.6)
Is there general awareness about the problem and/or solution? (4.6.)	Yes	Public engagement, agenda-setting <ul style="list-style-type: none"> Engage the public to demonstrate support (5.5) Use surveys to demonstrate support/opinion (4.6, 5.5) 	<ul style="list-style-type: none"> Active engagement of public in campaigns and advocacy (6.8)
	No	Public engagement, agenda-setting <ul style="list-style-type: none"> Use the media, events, workshops, reports, campaigns and other mechanisms on which to engage the public and raise profile of the issue (4.6, 5.3) 	<ul style="list-style-type: none"> Changed narrative (6.6) Increase support in public opinion surveys (6.8) Engagement of individuals in campaign (6.8)
Is there public support for the policy? (4.6, 6.8)	Yes	Public engagement <ul style="list-style-type: none"> Engage the supportive public with advocacy and encourage them to champion issues (5.3, 5.5) 	<ul style="list-style-type: none"> Public engaged with campaigns (6.8) Public opinion surveys showing increasing support (6.8) reach and distribution of campaign materials (6.7)
	No	Public engagement <ul style="list-style-type: none"> Work to raise awareness and identify priorities in order to demonstrate support. (4.6, 5.5) 	<ul style="list-style-type: none"> Changed rhetoric/norms (6.6) Public opinion surveys showing increasing support (6.8) reach and distribution of campaign materials (6.7)
Have the public been engaged on these issues in order to help shape priorities? (4.6, 5.5, 6.8)	Yes	Public engagement <ul style="list-style-type: none"> Engage communities as advocacy allies (4.6, 5.5) Ensure community perspectives are represented in policy positions (5.5) Target advocacy in constituencies of key MPs (4.6, 5.6) 	<ul style="list-style-type: none"> Local views effectively used to gain support from MP (6.8) Public engagement in campaigns such as use of template letters (6.8) Shifts in language to reflect public views (6.6)
	No	Public engagement <ul style="list-style-type: none"> Invest time in understanding the challenges and views of communities (5.5) Build support from the ground up (4.6, 5.5) 	<ul style="list-style-type: none"> Public engagement in advocacy (6.8) Positions reflecting public perspectives and priorities (6.6) Messaging reflecting benefits of proposed policies/solutions on these groups (6.6)
Are there any influential public figures that could champion the issue? (4.6, 5.4, 5.5, 6.8)	Yes	Build support base and networks <ul style="list-style-type: none"> Build relationship with them to get them as a spokesperson (4.6) 	<ul style="list-style-type: none"> Support from celebrity/influencer (6.8)
	No	Build support base and networks <ul style="list-style-type: none"> Monitor positioning of celebrities on the issue or related issue, engage those that demonstrate support (4.6) 	<ul style="list-style-type: none"> Support from celebrity/influencer (6.8)
Is there a lead NGO on the issue, or NGO which could take the lead? (4.6, 6.9)	Yes	Build support base and networks <ul style="list-style-type: none"> Lead NGO should undertake a breadth of actions. (4.6) Provide guidance on messaging and positioning to others (5.3) 	<ul style="list-style-type: none"> NGO recognition (6.6) coherent messaging and voice (6.8) NGO undertakes full range of actions (6.9)
	No	Build support base and networks <ul style="list-style-type: none"> Lead NGO should undertake a breadth of actions (4.6) Provide guidance on messaging and positioning to others (5.3) 	<ul style="list-style-type: none"> NGO recognition (6.6) coherent messaging and voice (6.8) NGO undertakes full range of actions (6.9)

Are there some key NGO or other allies already advocating on the issue (4.6, 5.2, 6.8)	Yes	Build support base and networks <ul style="list-style-type: none">Work with others, align message, distribute activities (4.6, 5.5)	<ul style="list-style-type: none">Number of members of coalition (6.8)recognition of coalition by others (6.6)coherent messaging and voice (6.8)	Is the NGO working with others to achieve goals?
	No	Build support base and networks <ul style="list-style-type: none">Establish if an NGO can take the lead, or if a formal coalition would be appropriate in order to take forward messages (4.6, 5.4)	<ul style="list-style-type: none">Lead NGO set up/appointed and/or coalition established (6.9)Development of consistent NGO views and messaging on issue (6.8)	Has the NGO/coalition been recognised, or have messages been adopted?
Political condtions				
Conditions		Suggested action areas	Suggested measures	Evaluation question
Is the issue a government priority? (4.4, 6.5)	Yes	Influencing government, agenda-setting <ul style="list-style-type: none">Work with government on the issue, respond to consultations and engage with key civil servants. Try and engage with key committees (5.8, 4.4)	<ul style="list-style-type: none">Invitation to join committees (6.6)consultation comments reflected in next phase (6.6)Contacted for input and/or advice (6.6)	Is the NGO actively engaging with government or government processes?
	No	Influencing government, agenda-setting <ul style="list-style-type: none">Focus on raising awareness of the issue, inside and outside of formal process, contribute to broader discussions, identify supporters within government, explore opportunities (4.6, 5.3, 5.6)	<ul style="list-style-type: none">Issue becomes government priority, incorporated into strategies (6.5)Government invests in the topic, for instance in research (6.5)	Has the NGO been invited to join committees? Has the issue become a government priority?
Is there a government body that could take leadership on the issue? (4.4)	Yes	Influencing government, agenda-setting <ul style="list-style-type: none">Work closely and engage with them to develop the policy where possible. Highlight how the issue fits their remit and helps to address their aims. (4.4, 5.6)	<ul style="list-style-type: none">issue taken on by government institution (6.5)research and funding given to issue (6.5)policy change as a result (6.5)	Is the NGO engaging with the right government body, and supporting them in policy development?
	No	Influencing government, agenda-setting <ul style="list-style-type: none">Maintain focus on Ministries and departments, framing messages around their priorities (5.3, 5.6)	<ul style="list-style-type: none">Issue taken on by a department (6.5)Investment in the issue (6.5)	Has the issue been taken on by the relevant department? Are they investing in policy development?
Is there a policy in place already? (4.4, 6.5)	Yes	Influencing government, hold to account <ul style="list-style-type: none">Monitor progress being made to implement the policy, either by government or industry, advocate for areas of weakness to be strengthened (5.6)	<ul style="list-style-type: none">Reactions to benchmarking (6.6, 6.5)media coverage (6.7)behaviour change (6.4)diet change (6.4)health change (6.4)	Is the NGO monitoring progress on the policy?
	No	Influencing government, hold to account <ul style="list-style-type: none">Advocate on the issue as per other lines, undertake research to highlight problem and issues of inaction, map what the policy should include and how it should be implemented (4.7, 5.3)	<ul style="list-style-type: none">Policy agreed, implementation framework in place (6.5)	Is the policy reflective of NGO positions? (is there evidence of policy impact?)
Is the policy in place fit for purpose? (4.4, 6.5)	Yes	Influencing government, hold to account <ul style="list-style-type: none">Focus efforts on monitoring implementation and engagement, and outcomes of the policy. track that still fit for purpose, and advocate on complementary policy on the basis that there is no one solution (5.6)	<ul style="list-style-type: none">Notable progress being made (6.4, 6.5, 6.6)	Is the NGO identifying and advocating around policy gaps?
	No	Influencing government, hold to account <ul style="list-style-type: none">Advocated for areas of weakness to be strengthened, use monitoring to highlight gaps, showcase best practice (5.6)	<ul style="list-style-type: none">Policy strengthened (6.5)Industry reaction to benchmarking and action accordingly (6.5)	Has the policy been strengthened? (is there evidence of policy impact?)
Are there any individuals within government that are or could be supportive? (4.4, 6.5, 6.8)	Yes	Building support base and networks <ul style="list-style-type: none">Build a relationship with them, share evidence and knowledge, encourage bills/EDMs/PMQs on the issue, engage them as spokesperson on the issue (4.4, 5.6)	<ul style="list-style-type: none">EDMs, Bills, PMQs on the issue/policy and relevant concerns and needs (6.5, 6.6)MP or other senior spokesperson talking to issue, internal advocacy, taking on NGO messaging (6.6, 6.8)Momentum on issue inside government (6.5, 6.6)	Is the NGO engaging with specific government officials either who are already engaged or could be engaged?
	No	Building support base and networks Identify potential supporters, monitor statements and positions on related issues, target local areas of MPs with authority to build support in constituency (4.4, 5.6)	<ul style="list-style-type: none">Supportive MP, influencer or other decision-maker (6.8)	Is there evidence of that official speaking positively on the issue, internally or externally?

Is there an election soon – is this likely to change the government in power? (4.4, 4.6)	Yes	Influence government, agenda-setting <ul style="list-style-type: none"> Work with opposition party to lay the groundwork for strong policies when they come into power (4.4, 5.6) 	<ul style="list-style-type: none"> Opposition support for policy (6.6) Commitment to that policy when in power (6.5) 	Is the NGO using the opportunity of an election to push forward messaging?
	No	Influence government, agenda-setting <ul style="list-style-type: none"> Continue focus on government in power, but build allies in opposition to support calls on policy (4.4, 5.6) 	<ul style="list-style-type: none"> Opposition support for policy (6.6, 6.8) 	Are any parties taking forward the NGOs messaging?
Is the government ideology favourable to the type of policy being advocated on? (4.4)	Yes	Influence government, agenda-setting <ul style="list-style-type: none"> Invest in lobbying government, seeking opportunities for policy to be considered, increase press on issue and the fact a solution is available (4.4, 5.6) 	<ul style="list-style-type: none"> Policy commitment made (6.5) Policy developed (6.5) Policy implemented (6.5) 	Is the NGO working with government and opposition, and key decision-makers?
	No	Influence government, agenda-setting <ul style="list-style-type: none"> Spread to efforts to include opposition party and members of Select Committees in order to create opportunities when timing is right. Highlight weaknesses of government approach and monitor concerns (4.4, 5.6) 	<ul style="list-style-type: none"> Support for policy in government or opposition (6.6, 6.8) Support for policy by select committees and other influential groups (6.6, 6.8) Reaction to research on gaps in government approach (6.6) 	Have any policy commitments been made? Has the policy been developed and/or implemented? Is the NGO working with influential internal decision-makers?
Is there a regulatory framework or other political opportunity in which the policy fits? (4.4)	Yes	Influence government, agenda-setting <ul style="list-style-type: none"> Focus on opportunities within that framework and advocate for changes needed (4.4, 5.6) 	<ul style="list-style-type: none"> Recommendations included in final policy (6.5, 6.6) Supportive MPs/member states of recommended policy (6.8) 	Is the NGO actively engaging the regulation development?
	No	Influence government, agenda-setting <ul style="list-style-type: none"> Maintain awareness of the issue, highlight opportunities for including the issue (4.4, 4.6, 5.3, 5.6) 	<ul style="list-style-type: none"> Policy-makers, government officials etc. open to exploring the issue and opportunities for policy. (6.5) Government supporters of policy (6.5) 	Is the issue being taken forward as part of the regulation discussions??
Commercial conditions				
Conditions		Suggested action areas	Suggested measures	Evaluation question
Is there industry opposition to the policy? (4.5)	Yes	Influence industry <ul style="list-style-type: none"> Explore the reasons for their position, address the concerns, present evidence that challenges that views (4.4, 5.6) 	<ul style="list-style-type: none"> Changed view of industry and/or announcement of support (6.5, 6.6) Government adoption of PH NGO view (6.5, 6.6) 	Is the NGO working to understand the business position and work out common ground?
	No	Influence industry <ul style="list-style-type: none"> Work with industry to ensure that they remain on board and have an open dialogue to ensure remain on same page Hold them to account for their action/inaction to ensure commitments are realised (4.5, 5.6) 	Continue progress and/or commitment demonstrated by those companies (6.5)	Is the NGO counteracting business opposition? Is there evidence of industry positions shifting favourably?
Have companies committed to act? (4.5, 5.6, 6.5)	Yes	Influence industry, hold to account <ul style="list-style-type: none"> Hold to account, work with them, engage government on issue with threat of regulation (4.5, 5.6) 	Continued progress and/or commitment demonstrated by those companies (6.5)	Are the NGO monitoring industry commitments on a policy and/or any progress being made?
	No	Influence industry, hold to account <ul style="list-style-type: none"> Work with industry to get them on board, hold to account for inaction (4.5, 5.6) 	Changed view of industry and/or announcement of support (6.8, 6.5)	Is there evidence of industry action?
Are there any industry supporters of the policy? (4.5, 6.5, 6.8)	Yes	Influence industry, build support base <ul style="list-style-type: none"> Engage them, work with them, use them as advocates and case studies that it works, build support for their approach and/or commitment (4.5, 5.6) 	Continued progress and/or commitment demonstrated by those companies (6.5)	Is the NGO engaging with supportive industry actors and utilising them for support?
	No	Influence industry, build support base <ul style="list-style-type: none"> Meet with industry, explore their perspectives, undertake benchmarking activities to name and shame organisations (4.5, 5.6) 	Changed view of industry and/or announcement of support (6.8, 6.5)	Is there any evidence of new industry supporters coming on board?

Source: author

7.7 Chapter Summary

This thesis has been about defining effective advocacy and informing the development of a monitoring framework for advocacy. In order to achieve this, the research has explored the different tactics and approaches that can be taken by NGOs, the different measures that can be used to assess it, and the broader conditions that influence advocacy. As presented, the discussion and findings chapters serve to answer both the research questions themselves as well as provide clarity in line with the overall goals and aims of this research.

The overarching finding of this research is that while measuring advocacy and ascertaining effectiveness is challenging, the effectiveness of advocacy is likely to be enhanced when an advocacy strategy is driven by the conditions, and when tactics are used to navigate, shape and react to different conditions as appropriate. Understanding advocacy is not about saying one tactic is right or wrong. Instead it is about being aware that a range of advocacies exist, ensuring the appropriateness of different tactics at different times, and ensuring that the indicators used to assess this reflect the action, the conditions and goals at a given time. Three main concepts have been presented throughout this chapter which address the research questions and feed into the practical implications of this research in the form of proposed monitoring and evaluation framework for advocacy presented in section 7.6.

The first of these key ideas is that advocacy means different things to different people at different times, and thus it is proposed that advocacy is better described as a range of 'advocacies' which change in time and place (7.3). These ideas provide an answer to RQ2 which asked what tactics are used by NGOs in public health nutrition. The conclusion we reach is that a range of tactics are currently utilised and are used at different times, by different organisations. This variability is a strength of advocacy.

Secondly, the importance and relevance of the conditions which prevail and the way in which advocacy should be planned and judged within this wider context has been explored, in particular highlighting that advocacy is a dynamic and evolving process which must contend with a number of forces which can support and hinder change (7.4). This helps to address RQ1, focused on the conditions that influence advocacy. Indeed, the findings suggest we should not only consider the conditions that support or hinder advocacy, but how NGOs can shape these conditions as part of advocacy.

Finally, it is suggested that advocacy should be measured with the wider conditions and long-term goals in mind, and that progress should be regularly reflected on, ensuring that the long-term goal is kept in mind to avoid the advocacy itself becoming the goal and thus not reactive to the conditions (7.5). In answer to RQ3, focused on the measures of advocacy, we can therefore conclude that a range of

indicators can be utilised to measure advocacy, but ultimately effectiveness itself needs to be considered in the context of the conditions at all times.

This research navigated many of the complexities and considerations required when exploring advocacy and its effectiveness, from the range of advocacy itself, the range of conditions which can influence and be influenced by advocacy, and the different functions of indicators depending on what the goal of advocacy. This chapter has presented a number of different but overlapping conceptual models which help broaden our understanding of advocacy, identify gaps and areas for improving and strengthening advocacy. Each of these models has an added value for enhancing our understanding of advocacy. For instance, the range of advocacies presented in Figure 7.3 and 7.4 highlights the range of actions which may be undertaken as part of advocacy and provides a model on which an organisation or coalition can map the actions that are being undertaken to identify gaps and strengths of a campaign. It may be useful for understanding how different NGOs fit together and how their actions complement each other. Figure 7.5 highlights the messy progress of advocacy in relation to policy change, and the changing nature of supportive and inhibitive forces which impacts on policy status and advocacy. These forces can prevent progress, support progress, or result in policy regression, hence the idea that advocacy success is not always definitive was posed. Finally, Figure 7.6 presents a conceptual model for the monitoring and evaluation of advocacy which enforces the idea that measuring advocacy needs to reflect both the short-term wins of actions while recognising the longer-term goals and progress made towards them.

This chapter ends with a shift from conceptual models and the theoretical understanding of advocacy provided in this thesis to a more practical application of the findings for NGOs to use in the planning and monitoring of their advocacy. This is an important output of this research which had academic and real-world motivations and wanted to help better position NGOs for addressing some of the challenges and slow progress seen in public health nutrition policy in England that were described in chapter 1, as well as support initiatives such as INFORMAS with improved understanding of the role of NGOs, alongside other actions in addressing food environments, NCDs and obesity.

The vital role of the conditions identified in this research highlights the need to contextualise any assessment of advocacy and thus utilise measures across a range of domains. The measuring challenge for advocacy remains, but the findings have the potential be used both practically to inform future public health nutrition advocacy planning, and as a basis for further research in this area.

The following chapter will draw on these findings, bringing together the main conclusions of this thesis, as well as reflecting on the research process itself and finally will present a series of recommendations for the key audiences of this research, namely NGOs, researchers and funders.

8 Conclusions, reflections and recommendations

This final chapter takes stock of what has been presented throughout this thesis, the main research findings and the implications of these findings for our understanding of the role of advocacy. This chapter also reflects on the doctoral research process overall, before making some recommendations for future research in this area.

8.1 Introduction

The research presented in this thesis came amid concerns about the state of public health nutrition in England and the lack of policy progress being made towards achieving healthier diets and a healthier population. The research is submitted in the midst of the Covid-19 pandemic which has brought many of the weaknesses of public health policy in England to the fore. Nutrition has featured in that in terms of ensuring vulnerable populations are being adequately fed and protected, concerns about the effect of lockdowns on diets, and the impact that diet-related NCDs, obesity and their risk factors have on the risk of COVID-19 complications. Such issues highlight the need for upstream interventions which can help secure population health and resilience, rather than individualistic actions.

Through the research presented in this thesis, the author has aimed to improve the academic and theoretical understanding of advocacy, particularly PHN advocacy, to help better understand the role it plays in policy change and what is effective. In turn, building on the theoretical insight, the research presents some practical implications of the findings which can be used by NGOs and others working in the field of public health to enhance their advocacy. This thesis presents an in-depth analysis of PHN advocacy in England and contributes to the existing policy and advocacy literature by exploring the tactics, measures and conditions which influence PHN advocacy and its effectiveness. It draws on findings from a mix of literature review, documentary analysis and semi-structured interviews. The findings are relevant to many, including advocacy organisations working in public health nutrition, academics looking to research this area, and funders and donors supporting this advocacy.

The previous chapter (Chapter 7) presented a discussion of the key findings of the research, exploring what was found and how the findings fit with existing research and understanding of advocacy. Throughout the discussion a number of key themes were presented, alongside a number of conceptual models to illuminate both our theoretical and practical understanding of PHN advocacy, its role, the measures, and the conditions faced. Firstly, the notion of there being a range of advocacies was presented, reflecting the fact that advocacy can mean different things at different times and to different people, and that advocacy is not one fixed tactic or strategy. Different NGOs can undertake different actions and adapt their approach according to their needs. Secondly, the interconnected nature of the conditions and advocacy, and what advocacy is appropriate at different times and in different contexts,

was also discussed in the chapter. The conditions were grouped in the research according to whether they were political, societal and commercial, and it was highlighted that the advocacy interactions with these conditions is variable according to whether NGO advocacy plays a role in shaping, reacting to or navigating the specific prevailing conditions in order to increase the likelihood for change. Finally, the importance of measuring advocacy within the context of the broader conditions was highlighted, suggesting that understanding *how* an advocacy activity contributes to the long-term goal is more important than understanding reach or similar short-term goals alone. Thus, advocacy should be measured regularly, identifying short-term goals within the context of longer-term goals and the prevailing conditions in order to ensure that the most appropriate tactics are used and to build the most accurate picture of success and progress. Building on the findings and conceptual models presented, a monitoring framework for NGOs is proposed which can help guide NGOs in their planning and prioritisation, and also support other bodies, such as funding organisations, in monitoring the activities and progress that has been made.

8.2 Implications of the research

The research presented in this thesis came out of concern about slow progress in public health nutrition policy and a question about the role and effectiveness of NGO advocacy in changing policy. It adds to our overall understanding of PHN advocacy and has implications for our current understanding of the policy and advocacy theory, for NGO employees who have an advocacy role, and for funders and donors of NGO advocacy. These implications are explored in turn through the following sections.

8.2.1 Contribution to the body of knowledge

As described in chapter 2, the existing literature on advocacy was found to be fragmented, with a huge array of specific research studies done in a range of areas, by a range of actors, in range of countries. Furthermore, research specifically on the topic of PHN advocacy, particularly in the context of the advocacy carried out by NGOs focused in England, was limited. This research has therefore been able to help fill this gap by providing new insight into this under-researched area and reflections for advocacy from the perspective of PHN advocacy in England.

The findings of this research show that PHN advocacy has many similarities with other areas of public health which have been researched, such as tobacco and alcohol. In particular this relates to some of the core considerations for effective advocacy, including agenda-setting, the use of evidence, coalitions, using the media and public engagement. Furthermore, this research also suggests that there are overlapping considerations for both PHN advocacy and development advocacy, particularly in relation to issues of credibility and legitimacy. This suggests that some of the underlying principles of advocacy are relevant for a range of different issues.

The political literature was drawn upon in chapter 2, reflecting that advocacy is often about policy change. The political theories explore how change happens, and present different views and perspectives on the major drivers of this. By taking advocacy rather than policy as the focal point, this research has been able to shed light on some of the key theoretical issues and relevant factors related to policy change from the perspective of advocacy. The findings, particularly those related to the conditions, have demonstrated that the different policy theories are not mutually exclusive from one another and that advocacy sits at the heart of many of them. Whether you take Sabatier's Advocacy Coalition Framework with an emphasis on coalitions and competing interests, Kingdon's Multiple Streams Theory which focuses on the alignment of particular conditions, Baumgartner and Jones' (1993) Punctuated Equilibrium Theory suggesting change occurs suddenly as the result of an event or crisis, evidence-based policies and the role of evidence in change, or Social Movement Theories which explore the role of public engagement in advocacy, there is a role for advocacy in creating the described change. When focusing on policy change through the lens of advocacy, no one theory comes through as particularly important, instead we can see that each of these key theories represents a consideration for advocacy which reflects the conditions which prevail and which therefore need to be navigated or shaped by NGO advocacy.

Research question 1 focused on exploring the conditions which support and hinder advocacy. The findings highlight that effective advocacy will need to reflect, react, change and shift according to what is happening and what is needed at any given time. Ensuring that resources are allocated in the best way and that actions are chosen appropriately will be vital for increasing the likelihood of success. In some cases, advocacy will be able to shape the conditions to be favourable to their goals, or take advantage of opportunities, while other times advocacy will need navigate conditions which are less favourable to change. Figure 7.4 presented a conceptual model depicting these conditions as forces which can either support the status quo or disrupt it. Thinking about the prevailing conditions in this way so as to enhance understanding of which tactics are most likely alter these conditions to disrupt the status quo in favour of the public good is a vital consideration that emerged from this research.

With this in mind, we can look to Research Question 2 which explored the tactics which are undertaken as part of advocacy. Chapter 5 highlighted the broad range of tactics undertaken by different NGOs at different times as part of their advocacy. The analysis of annual reports was useful for identifying the range of actions that NGOs reported to undertake, and the interviews presented a helpful juxtaposition to this by providing a little more insight into what is visible and how different actions are perceived. This thesis has proposed that, rather than there being one advocacy which is made up some key ideal tactics, there is in fact a range of advocacies that exist which can form an advocacy strategy. This reflects

the advocacy dynamics and that the requirements of advocacy will change over time, and under different conditions. This advances some of the advocacy frameworks described in Chapter 2 which describe inside and outside, or formal and informal advocacy and shows that an NGO may move between the two and take a 'mix and match' approach to their advocacy in order to respond to the needs at a given time. The conceptual map presented in Figure 7.2 and 7.3 move our thinking beyond a static view of advocacy as a series of set types, simplified as inside or outside advocacy, and instead reflect that a range of advocacies can, and are, carried out by NGOs as part of their advocacy.

Finally, we can turn to Research Question 3 which focused on the measures of advocacy. The literature review presented a number of different frameworks and attempts to measure advocacy which have come out of various different issues and disciplines. Figure 7.8 presented a continuous monitoring framework which can shape the way we think about measuring advocacy, moving from too much focus on the short-term, and instead reflecting how short-term activities can support efforts to long-term goals, and also how short-term goals may change according to the conditions. In Chapter 7 a practical framework which helps to capture this. The framework adds to our understanding of advocacy and how to measure it, emphasising the need to identify conditions, select appropriate tactics and measure those tactics in relation to the goals. Importantly, this framework was anchored in the conditions as the main determinant of what actions and evaluation is needed.

To summarise, this research looks at PHN advocacy which in turn builds our understanding of advocacy. It is clear that advocacy in public health nutrition is similar to advocacy in other areas, and it is possible to draw parallels. A key finding of this research is the importance of exploring the conditions in which advocacy takes place, along with advocacy's appropriateness and its effectiveness. The idea of there being a range of advocacies is particularly relevant, and challenges more black and white frameworks suggesting that advocacy is one thing rather than a dynamic collection of actions which respond to wider conditions. This research highlights the overlapping and connective nature between the policy theories which is particularly relevant when advocacy is taken as your framework for analysis. This highlights the importance of exploring the various dynamics specifically associated with advocacy when exploring policy change and why change occurs when it does, and in the way it does. Overall, this research has made a valuable contribution to our knowledge and understanding of how advocacy interacts with the wider conditions and how these conditions can not only inform the tactics that are used in advocacy, but how advocacy can and should be measured.

8.2.2 Considerations for NGO advocacy

An important beneficiary of this research are those working in NGOs and undertaking advocacy, and thus it is important to identify some of the key recommendations which came out of the findings presented in this thesis, building on the practical implications provided at the end of chapter 7.

It is clear that PHN advocacy and policy have many similarities to the advocacy and policy experienced in other issues. The use of the media, coalitions and public awareness were all evident in the literature review as key elements of advocacy on issues such as tobacco and nutrition (Chapman and Wakefield 2001, Moore et al, 2019), as well as in the findings of this research particularly in relation to tactics (Chapter 5) and measures (Chapter 6). The role of public health nutrition NGOs in representing the public in a terrain of competing interests was also not unique, and nor were the tensions that exist with commercial operators and other opponents. As highlighted in Chapter 1, the tactics of the food industry are very similar to that of the tobacco industry (Moodie, et al, 2013, Brownell and Warner, 2009) and thus some of the conditions faced by advocates in these two areas is similar.

We can also reflect specifically on PHN advocacy and some of the gaps that were highlighted in this research. The first of these relates to the legitimacy and justification for advocacy: Generally, advocacy NGOs use evidence and benchmarking to legitimise their presence, rather than use insight from the public to drive their work. This could be an area for improvement to strengthen legitimacy, particularly if done at a constituency level.

Related to this is the relative absence of PHN advocacy which draws on the views and experiences of the people most affected by food challenges (bottom up advocacy). The planning of this research excluded grassroots advocacy, but the inclusion of community perspectives in NGO advocacy does not have to mean the advocacy itself is grassroots. Engaging the public can help NGOs to prioritise the policy areas they work on, ensuring these align with the priorities and daily challenges faced by communities. As described in Chapter 5, this has a number of benefits for advocacy, particularly in the context of messaging and agenda-setting. Firstly, the engagement and representation of the public and those groups who the policy(s) seeks to benefit can help the NGO to gain legitimacy amongst decision-makers, and thus increase the likelihood that the NGO positions are valued and listened to. In addition, it can help ensure public support of the messages and advocacy, both with those who were engaged in the prioritisation process as well as with the wider public. This in turn can benefit the strength of the campaign and messaging. Linked to this is the idea of storytelling which can be used to enhance messaging and positions and influence how others understand the problems and solutions (Stone, 2012). By engaging those with lived experience of the issues at hand, one can give a face to the policy calls and thus make a stronger case for action. For instance, on an issue such as food pricing it may be

possible to engage people who struggle to afford nutritious food in order to identify the biggest challenges they face and to speak about their experiences. Similarly, as shown in the policies described in chapter 4, it is possible to engage people's experiences of labelling and marketing in order to help support action.

Another important finding of this research relates to the idea of there being a range of advocacies, and the range of activities or approaches that NGOs can undertake. With this in mind, it is recommended that NGOs explore the range of activities available to them and identify which of those activities they feel they are best placed to undertake and which are most relevant under particular conditions. Related to this is the importance of NGOs working together in coalition. This has practical benefits as it ensures that NGOs can divide limited capacity between themselves and ensure that their activities complement each other, leaving no important gaps. Working in coalition also has the benefit of increasing power, something of particular importance when NGOs often find themselves on the back foot.

It was suggested in the discussion that measuring advocacy should be done regularly, reviewing immediate goals in the context of longer-term goals and adapting these as needed over time, and in response to the prevailing conditions, identifying what opportunities there are, what the goals of each activity are and how that contributes to the broader goal. Thinking in this way can help ensure that any indicators are used with the goal in mind, thus ensuring their relevance and value.

The previous chapter ended with a proposed monitoring framework for advocacy, emphasising the importance of anchoring such a framework in the conditions and for using longer-term goals to judge progress and success. Such a monitoring framework can be a useful tool for NGOs in the planning and monitoring of their advocacy, particularly for linking up actions to the conditions. It is suggested that NGOs use the proposed framework, or an adapted version, as a planning tool as well as to aid the ongoing evaluation of advocacy. A key strength of the presented framework is the fact that it is anchored in the conditions, and that it draws upon the conditions, tactics *and* measures to help support either the planning or evaluation of advocacy. This framework can be used to help guide planning on what actions to prioritise and provokes thought about the prevailing conditions which may dictate the best actions to undertake.

To summarise, therefore, this thesis has provided meaningful insight to the PHN advocacy can be used practically by NGOs. It has highlighted the importance of NGOs giving particular attention to the conditions in their advocacy planning to help identify the most appropriate advocacy actions at different times. Importantly these conditions not only help determine the most appropriate tactics to be used but can aid the measuring and monitoring of advocacy and ensure that both short- and long-term goals are considered. NGOs should recognise that they have a role in shaping, navigating and

reacting to different conditions. While there are few guarantees in advocacy, this can support NGOs in taking opportunities that arise and thus increasing the likelihood of success. In addition, there is the potential for PHN advocacy groups to do more to meaningful engagement with the public, not just in a tokenistic way by making the public spokespersons for a pre-determined cause, but by ensuring that messaging and priorities addresses the real problems that people experience. These issues will be picked up through the proceeding sections of this chapter within the context of building a monitoring framework for PHN advocacy.

8.2.3 Considerations for funder and donors

As highlighted in the research, and experienced first-hand by the author, funding and the requirements of funders are important determinants of advocacy actions and reporting. This thesis shows that the real impact of advocacy is the long-term change that can occur, rather than short-term impact measured using reach and similar metrics. Many of the meaningful changes that are achieved, such as nuanced shifts in language, are actually relatively intangible and cannot be captured using reach and other simple and numerical measures. Furthermore, significant change rarely occurs as the direct result of one action or NGO, making attribution of change challenging. It can be recommended that funders and donors recognise that the biggest impacts will take time and may not be easily measured. Funders should be encouraged to resist short-term funding and thus short-term measuring frameworks, and instead fund longer-term projects with broader goals and unrestricted finances that enable advocates to undertake activities in response to the conditions rather than grant agreements. Funders can use the monitoring framework presented in the previous chapter to build a picture of what an advocate has been doing and validating their approach according to the conditions which likely need to be addressed in order to achieve the project goals.

8.3 Reflections on the research process

The details of the methods and approaches used were described in chapter 3. Here we reflect on the methods adopted and the research process overall, the changes that took place over the course of the process and on some of the adjustments to the process that could have been made.

This research emerged from concern about the state of public health nutrition in England, the slow progress being made towards comprehensive policies, and the power disparities that exist between actors in the policy making space. This led to a question about the role of NGO advocacy, what is effective and what could be done better to improve effectiveness and in turn benefit the public good. In addition, there was interest in the role of accountability and monitoring frameworks in the food and

nutrition space, and a curiosity about whether a monitoring framework for advocacy would be possible to help support NGOs in their advocacy.

The evolution of the research

The initial driver of this research was two-fold. An interest in NGO benchmarking as part of their advocacy, and an interest in exploring an equivalent framework for NGO advocacy, in both cases drawing on INFORMAS. Following a review of existing literature, it was decided that a broad approach would be appropriate due to the limited existing research on measures in advocacy to use as a basis for this research, particularly PHN advocacy. Overall, this meant that the research has presented a much broader assessment of PHN advocacy in England than was originally intended. Given the lack of existing research in this area, this fills an important gap in our understanding of the role of PHN advocacy and how it could be strengthened. Conversely, such a broad approach did present some challenges, particularly during the analysis and discussions as it generated such a broad and diverse amount of data, but with limited depth, making it challenging to analyse and identify the main findings.

In addition, the author's own understanding and perceptions of advocacy transformed throughout the research process. Initially, the planning of the research was based on the notion that advocacy was finite which, challenges aside, could be objectified, generalised and measured. Furthermore, the three main research questions were based on the idea that tactics, measures and conditions were all important considerations for advocacy. Indeed, this research highlighted that they are not only important but that the three interact and only by looking at all three can we build a true picture of advocacy. Furthermore, the research process has challenged the very notion that advocacy is one thing that can be objectified, instead suggesting a range of advocacies exist. This is important to reflect on as it had implications for the planning and analysis of the research. Indeed, the findings suggest that the appropriate measures and tactics may be different at different times, thus making it difficult to make generalisations about advocacy. Knowing this now, the research may have been improved with a focus on identifying examples of advocacy success or 'wins' in order to identify key contributing factors, rather than exploring what was done in order to try and identify indicators for that advocacy.

The focus on the PHN advocacy carried out by 'official' NGOs registered with the Charity Commission rather than grassroots, corporate, global or individual advocacy limits the scope of the research and is a particularly important consideration given some of the findings described in later chapters related to the breadth and nuanced nature of advocacy.

The research approach

A key challenge when planning this research was the lack of existing research framework for exploring advocacy and specifically for exploring the tactics, measures and conditions to inform this understanding. Other areas that use accountability and monitoring frameworks often draw on a pre-defined list of concepts which were not available for advocacy. For instance, the INFORMAS framework draws on existing standardised lists of policy packages for food and nutrition policy which can then be further developed for the accountability frameworks. In the case of advocacy, such standardised packages of actions and measures do not exist, and as such this research took the approach of identifying some key considerations for advocacy tactics, indicators and conditions which could inform the development of a monitoring framework and our understanding of advocacy, rather than developing the accountability or measuring framework itself.

To do this the researcher started with a number of concepts in mind which led to the research questions, but no detailed conceptual framework was used. On the one hand, this presented challenges when analysing the data and for developing codes as there was no one theory or framework on which to base and test the findings. However, the flexible and inductive nature of research was appropriate for studying an area of advocacy which is relatively under studied. Thus, this research should be viewed as the groundwork for future work on PHN advocacy.

Methods

This research drew on qualitative research which allowed the researcher to capture a range of perspectives on PHN advocacy. While alternative methods could have been used, the overall approach was considered right for this project as it allowed a broad exploration of advocacy by understanding what actually happened according to documents, and what the perceptions on the various issues were. The use of multiple methods was a key strength of this research, as it gave the findings validity, allowing for both actual activities and perceptions of activities to be explored. The interviews were a particularly useful source of information, but without the documents to provide background some of the analysis would have been hard to interpret and understand.

The research elements were carried out in parallel, however on reflection a sequential process may have been valuable in order to allow for more testing and iteration throughout the research, which would have in turn helped to reinforce and validate some of the findings. In particular, the interview questions could have been more focused had they been undertaken after the other elements of the research, or alternatively the interviews could have been better used for scoping and further follow up research could have been conducted drawing on the findings from the research.

In order to achieve the desired breadth, aid validation and to make generalisations about PHN advocacy, the research drew on multiple policies (3) and multiple NGOs (4). While this was valuable for providing the desired breadth of data, it limited the depth that could be reasonably expected as part of this research project. In addition, all of the policies looked at and the NGO activities were from the same time period which, while aiding generalisations and validation, means the research findings are limited to a particular set of circumstances. In order to address both of these points, further research is needed to test the findings presented in this thesis in order to assess whether the findings are applicable in different contexts, for different policies, for other NGOs and for under government structures (e.g. not Westminster).

Future researchers following up on the present research might consider whether to integrate the different datasets/methods, in order to synthesise some of the findings, as well as to including a more historical analysis of the advocacy and efforts on each policy through the 1980s and 1990s. Moving forward, the principles identified in this research could be used to inform more in depth research on these or other policies, and tested for their applicability to NGO advocacy in different contexts.

The analysis process itself was done manually, using a range of techniques including colour coding, post-its and excel functions. This approach was adopted instead of a data management tool such as NVivo for a number of reasons. Firstly, there was a concern that NVivo would over-generate data which would not have been appropriate for the approach taken. Secondly, the researcher decided that a manual approach would help to be closer to the data which in turn would aid interpretation. These justifications stand true, however on reflection a data management tool may have helped with the overall management of the analysis, making it easier to test and retest different ideas or concepts which were less obvious findings.

Added value of the research

Overall, the research presented in this thesis provides an insight into PHN advocacy in England. It adds to existing research, for instance on public health nutrition policy and on specific advocacy campaigns and draws on the connections between different considerations and elements of the policy process from the perspective of advocacy. These connections are a particular added value of this research and was possible due to the broad but distinct research questions that were asked, and the different research methods that were used. The use of multiple methods allowed for iteration and layering of the findings in order to achieve the overall understanding of public health nutrition in England which is presented in this thesis. The findings themselves reinforce the value of the approach taken, highlighting the importance of the broader dynamics and conditions as fundamental pillars of advocacy which would likely not have been captured had a more specific approach been taken. In addition, the lack of existing

research in this area and conceptual framework on which to base the research means that the broad approach taken in this research was appropriate and creates the groundwork for future research which can test and explore different dimensions of advocacy highlighted in this thesis.

8.4 Recommendations for future research

This research has provided insight into PHN advocacy in England throughout the 2000's. The research provides the groundwork for a variety of different research projects which could build on and help validate some of the findings presented throughout this thesis.

As described in Chapter 3, research techniques such as Multi-criteria mapping or Delphi surveys provide options for testing and validating findings. One or both of these could be used to pick up where this research leaves off and explore and test the validity of the framework presented and whether the analysis holds true to those actors that were involved. This could aid the fine tuning of the proposed monitoring framework and various conceptual models ensure that they capture the considerations for PHN advocacy as accurately as possible, and also allow testing in different contexts.

In addition, the findings could be tested in different contexts. The political backdrop in England and the UK at the time of writing this thesis is dominated by Brexit and Conservative-leaning politics, representing quite a different political context to that which was covered in Chapter 4. Exploring how this may impact the advocacy which is undertaken, prioritised and successful would provide additional depth and understanding to those findings presented in this thesis and would in turn aid our understanding of the contextual nature of advocacy and how this can be navigated. In addition, similar research could be undertaken in different countries or at governance levels such as at a regional or local level, to help understand whether or not the findings of this research are unique to PHN advocacy in England and the ease at which they can be translated to different contexts.

This research explored three policy issues in order to look retrospectively at the advocacy that was undertaken and to compare the different policy issues to help understand the different factors that influenced advocacy, and the extent to which these were context specific or issues specific. The relevance of the findings in other scenarios could be tested through an exploration of the advocacy on public health nutrition issues which were not high on the agenda at the time of the research. Exploring public health issues which were low or absent from the political agenda would allow a comparison between the advocacy that is used at different times and would support an exploration of how and why some issues become high on the agenda and the role advocacy may or may not play in this.

Finally, in addition to varying the context and focus of the research, ethnographic research which takes a deeper dive into the advocacy of one of two organisations would provide interesting insight as to the

extent to which the document analysis used in this research was able to capture the reality of the advocacy undertaken by the NGOs. This could have implications for future research on NGO advocacy and the way it is monitored.

8.5 Summary

To summarise, this research has taken a broad approach to exploring advocacy and increasing our understanding and knowledge on PHN advocacy, and considerations for defining effectiveness. The research presented in this thesis raises our understanding of advocacy, and particularly of PHN advocacy. It highlights the importance of contextualising advocacy within the broader conditions and explores some of the ways in which advocacy can shape, navigate and react to different conditions. Advocacy in this case is not a source or cause of change per se, rather an enabling factor which allows opportunities to be transformed into change. The breadth of advocacy tactics is discussed, as well as the fact that advocacy may mean different things to different people, in different contexts. Thus, it is suggested that a range of advocacy can be seen, with different tactics having different degrees of public and government engagement. It has been suggested that ‘advocacies’ may be a more pertinent framing of the advocacy explored in this research, suggesting that multiple actions and considerations are involved at a given time. These points are in turn relevant to the measurement of advocacy, particularly the role of conditions. It is suggested that the conditions should be used as a key driver of tactic selection, and that actions should be measured according to the prevailing conditions and what can be achieved in the short and long-term.

It is hoped that the insight and recommendations that have been presented in this thesis will encourage further research on NGO advocacy, and in other fields. It is also hoped that the specific findings of this research can help inform the planning and monitoring of future NGO advocacy in public health nutrition, and in turn support efforts to protect the public interest and demand government action to improve the state of public health nutrition in England through meaningful policy.

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Appendices

Appendix 1: Ethics form



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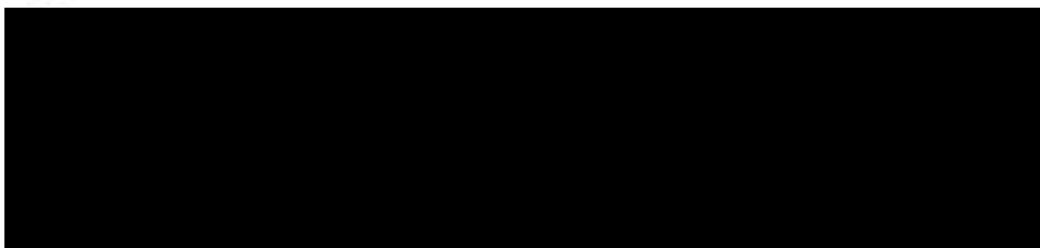
**CITY UNIVERSITY
LONDON**

05 February 2015

To whom it may concern

This is to confirm that the Research Ethics Committee of the Department of Sociology has approved the research project 'Improving the healthiness of food environments - what is the role, impact and effectiveness of NGO advocacy? A critical analysis' on the 5th February 2015. The principal investigator of this project is Ms Hannah Brinsden, doctoral researcher at the Centre for Food Policy, Department of Sociology, City University London.

Should you have any queries regarding the process of ethical approval, please do not hesitate to contact me at [REDACTED].



Appendix 2: Consent form



Title of Study: Improving the healthiness of food environments - what is the role, impact and effectiveness of NGO advocacy? A critical analysis.

Researcher: Ms Hannah Brinsden

Please initial box

1.	<p>I agree to take part in the above City University London research project. I have had the project explained to me, and I have read the participant information sheet, which I may keep for my records.</p> <p>I understand this may involve one or more of the following (initial those relevant):</p> <ul style="list-style-type: none"> • Liaising with the researcher to validate assessments of the activities undertaken by my organisation • being interviewed by the researcher in face-to-face interview • allowing the interview to be audiotaped • completing online questionnaires asking about my organisation's advocacy work • participating in an online Delphi process to develop indicators 	
2.	<p>This information will be held and processed for the following purpose(s): The information will be used as part of the researchers PhD thesis.</p> <p>I understand that I will be given a transcript of data concerning me for my approval before it is included in the write-up of the research.</p> <p>I understand that I have given approval for my sector to be referred to in the final thesis, but otherwise I will remain completely anonymous</p> <p>I understand that prior permission will be sought if any direct quotes are to be used in the write-up of this research and that if they are they will only be attributed to the sector that I work in</p>	
3.	I understand that my participation is voluntary, that I can choose not to participate in part or all of the project, and that I can withdraw at any stage of the project without being penalized or disadvantaged in any way.	
4.	I agree to City University London recording and processing this information about me. I understand that this information will be used only for the purpose(s) set out in this statement and my consent is conditional on the University complying with its duties and obligations under the Data Protection Act 1998.	
5.	I agree to take part in the above study.	

Name of Participant

Signature

Date

When completed, 1 copy for participant; 1 copy for researcher file

Appendix 3: Information sheet**Participant information sheet****Title of study: Improving the healthiness of food environments - what is the role, impact and effectiveness of NGO advocacy? A critical analysis**

We would like to invite you to take part in a research study. Before you decide whether you would like to take part it is important that you understand why the research is being done and what it would involve for you. Please take time to read the following information carefully and discuss it with others if you wish. Ask us if there is anything that is not clear or if you would like more information.

What is the purpose of the study?

This research forms part of doctoral research, based in the Centre for Food Policy at City University London. The aim of this research is to critically analyse the role and impact that NGO advocacy plays in UK food and nutrition policies. It will explore a range of perspectives on the role and methods of advocacy used by NGOs, how effective these actions have been and the wider conditions that influence advocacy and policy change.

Who is funding the research?

The researcher is in receipt of a grant from the Coronary Prevention Group which covers the cost of her research at City University. The grant also contributes to costs associated with her part time employment at the World Obesity Federation (WOF). CPG trustees and World Obesity Policy Director serve as external advisors to the research, but ultimate control of content and methods remains with the researcher and primary supervisor at City University.

Why have I been invited?

You have been selected for inclusion in this research as an important stakeholder in UK food and nutrition policy. In total up to 50 interviews will be conducted with stakeholders representing the food industry, NGOs, media, academia and government.

Do I have to take part?

Participation in the project is voluntary, and you can choose not to participate in part or all of the project. You can withdraw at any stage of the project without being penalised or disadvantaged in any way. It is up to you to decide whether or not to take part. If you do decide to take part you will be asked to sign a consent form. If you decide to take part you are still free to withdraw at any time and without giving a reason.

What will happen if I take part?

You may be asked to take part in this research in a number of different ways, the researcher will clearly explain which part of the research you are taking part in. See details for each below.

1. Informal interview

- *The research:* You may be asked to take part in an informal interview related to your organization, your own experiences and the wider policy process. This will be used to help the researcher better understand the perspectives on the issue and identify key policy

documents and NGOs/other actors involved which each of the case studies. These interviews will not be recorded.

- *Duration:* Informal interviews will take varying lengths of time, between 15 and 60 minutes.
- *Where is the research taking place:* This can take place at your own place of work, the researchers offices ([REDACTED]) or at another location convenient to both parties.

2. Online survey

- *The research:* You may be invited to take part in an online survey consisting of questions related to your organisation's advocacy activities and asking you to reflect on the effectiveness of each of these.
- *Duration:* the survey should require no more than 30 minutes of your time and can be completed at a time convenient to you
- *Where is the research taking place:* Online

3. Validation of findings

- *The research:* You may be asked to help validate the researchers findings about either your own organisation's advocacy activities in relation to a particular policy process or the policy process itself. You will be presented with the actions identified and asked to make an assessment on whether or not it is a fair and accurate portrayal, and whether or not there are any key activities missing
- *Duration:* Contact will be made via email
- *Where is the research taking place:* via email

4. Semi-structured interview

- *The research:* You may be invited to take part in a semi-structured face-to-face interview to discuss your views and opinions on a number of issues relating to the research, such as the role of advocacy, how it can be evaluated, what conditions enable or hinder advocacy impact and what indicators can be used to judge this. These interviews will be audio-recorded.
- *Duration:* the semi-structured interviews will take approximately 1 hour.
- *Where is the research taking place:* The research will require a face-to-face interview which can take place at your own place of work or the researchers offices ([REDACTED]). In some cases it may be possible to arrange the interviews to be conducted on the phone or via skype.
- Follow up email correspondence/phone call may be required

5. Online Delphi process

- *The research:* You will be invited to take part in an online, three part process, involving the assessment and feedback on a list of indicators for judging advocacy effectiveness
- *Duration:* The online process will involve 2-3 stages, each of which will require 20-30 minutes of your time over a period of 6 months
- *Where is the research taking place:* via email/ online survey

What are the possible disadvantages and risks of taking part?

No disadvantages or risks to taking part have been identified.

What are the possible benefits of taking part?

Despite efforts, obesity, NCDs and unhealthy food environments still prevail in the UK, and in countries around the world. You have been selected to be included for a known interest in this field and it is anticipated that the research findings will help develop our understanding of what needs

to be done to make meaningful changes to improve food environments in order to improve the health of the population.

What will happen when the research study stops?

Data will be kept in a locked cupboard and in an encrypted folder/memory drive for the duration of the research and 10 years after the study, at which time documentation and audio files will be deleted or shredded. Should you wish to leave the process early, data will be destroyed unless permission is received to keep it and use it for the duration of the study

Will my taking part in the study be kept confidential?

Ms Brinsden and her supervisor will have access to the information which will be stored on a password protected PC and in a locked cupboard at her place of work. Records will be destroyed 10 years after submission of Ms Brinsden's thesis. No personal data will be shared.

What will happen to results of the research study?

The results of the research study will be used for Ms Brinsden's PhD thesis. A number of academic papers are also planned. You will remain anonymous, identified only by your employment role. Any specific quotes and information will be attributed to a stakeholder from the sector within which you work. Specific permission will be asked for use of any direct quotes. The PhD thesis will include your organisation name.

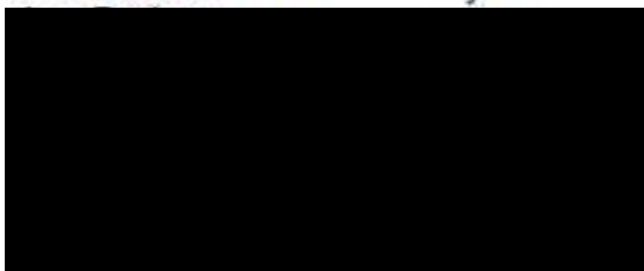
What will happen if I don't want to carry on with the study?

You are free to withdraw from the study without an explanation or penalty at any time. If such a situation arises you will be given the opportunity to request that any data collected up to that point is destroyed and not included in the research.

What if there is a problem?

If you would like to complain about any aspect of the study, City University London has established a complaints procedure via the Secretary to the University's Senate Research Ethics Committee. To complain about the study, you need to phone [REDACTED]. You can then ask to speak to the Secretary to Senate Research Ethics Committee and inform them that the name of the project is: A critical analysis of public health advocacy

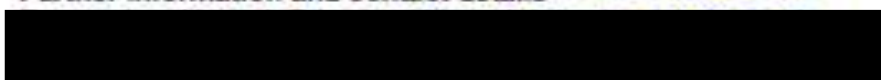
You could also write to the Secretary at:



Who has reviewed the study?

This study has been approved by City University London School of Arts & School of Social Sciences Research Ethics Committee.

Further information and contact details



Appendix 4: Full list of participants

Participant	Category
A01	NGO
A02	NGO
A03	NGO
A04	NGO
A05	Campaigner
A06	Consultant
A07	NGO
A08	Food industry
A09	Academic
A010	Food Industry
A011	NGO
A012	NGO
A013	NGO
A014	Academic
A015	Ex-government advisor
A016	NGO
A017	NGO
A018	Ex-government advisor
A019	Ex-government advisor
A020	Academic
A021	Food industry
A022	Food industry
A023	Media
A024	Food industry
A025	Ex-government advisor
A026	NGO
A027	Nutrition consultant
A028	Food industry
A029	NGO

Appendix 5: Question guide

Main Question	Supplementary questions
How do you define advocacy?	
What role do [you/NGOs] play in the policy process through advocacy activities?	<i>What is it seeking to do/add? Is it important, effective? Whose policies trying to impact?</i>
Relationship with [NGOs and their advocacy activities /other stakeholders as part of advocacy ?]	<i>engage or collaborate? formally/informally? Alliances/coalitions? Are they open to interaction? What opportunities/barriers are there to interact directly/indirectly?]</i>
Range of activities - What methods of advocacy are you most familiar with/ aware of [do you undertake]	<i>Do any of them stand out as particularly important / common / effective. Can you comment on why? Examples – tell me about a specific example - what are the goals, why chosen</i>
Importance of monitoring/accountability role that NGOs play. Can you comment?	<i>Any examples where it has worked particularly well? What is its key function/target? Who or what should they be monitoring, is it effective, how does it inform policy, is it reliable?</i>
How would you define or describe “success” in advocacy?	<i>What does it look like? Are there different level/types? What about progress towards end goals?</i>
How evaluate advocacy? What indicators/metrics do you use?	<i>What do you want to measure, do you have indicators? Reflect on own goals/aims – what aiming for? What would you say was successful. how would you defend against criticism</i>
	<i>For NGOs only - What challenges exist to evaluating and determining success of advocacy?</i>
Specific example where advocacy has made a difference or can be considered to be successful? What about other stakeholder advocacy?	<i>Why successful, what basis of judging effectiveness? What is effective? what impact on you/ government/ industry policy? CONDITIONS/opportunities that arose reverse – what about an example where policy change occurred– what role did advocacy play in this? Any specific factors? Prompt on labelling, marketing, salt if not mentioned</i>
	For NGOS -
What about an example where advocacy failed?	<i>what barriers were there to change, what factors contributed to failure? What are the limitations of campaigns</i>
What about key lessons for advocates	<i>Also question on limitations of campaigns/advocacy</i>

Appendix 6: Policy document timeline 1983-2015

Document type	Document or policy title	Author/publisher	Year	Summary
Dietary guideline	Proposals for Nutritional Guidelines for Health Education in Britain	NACNE	1983	The first set of nutrition and dietary recommendations for England containing specific recommendations on intake of fat, salt, sugar and fibre in the UK. (James, 1983)
Dietary guideline	Diet and cardiovascular disease	COMA (DH)	1984	Presents a series of dietary recommendations specifically in the context of CVD, focused on fat and saturated fat. (Department of Health, 1984)
Dietary guideline	Dietary sugars and human disease	COMA (DH)	1989	Reviews evidence of the link between dietary sugar and health, with a focus on extrinsic sugars. The report highlights links to dental caries and obesity. Department of Health, 1989)
Dietary guideline	Dietary Reference Values for Food Energy and Nutrients for the United Kingdom	COMA (DH)	1991	Publication of Dietary Reference Values across several macro and micronutrients, including for total fat, saturated fat, total carbohydrate, sugars, and dietary fibre. No target for salt was set. Department of Health, 1991)
Strategy	The health of the nation: a strategy for health in England	DH	1992	The first national strategy aimed at improving the overall health of the British population, recognising the need to improve overall health not just reduce sickness. It included a target to reduce obesity to 7% by 2005. (Department of Health, 1992)
Dietary guideline	Nutritional Aspects of Cardiovascular Disease	COMA(DH)	1994	Building on the 1991 COMA report on nutrition, this report included a recommendation for salt intake, however the recommendation was not endorsed by the Chief Medical Officer at the time. Department of Health, 1994a)
Strategy	Eat Well! An Action Plan from the Nutrition Task Force to Achieve the Health of the Nation Targets on Diet and Nutrition	DH	1994	Emphasised the need to improve diet and nutrition, primarily focused on choice and individual responsibility rather than on addressing the wider drivers of poor diet and ill-health (Department of Health, 1994b)
Report	Eatwell II. A progress report from the Nutrition Task Force on the action plan to achieve the Health of the Nation targets on diet and nutrition	DH	1996	The evaluation of the 'health of the nation strategy' indicated that it failed due to a lack of cross-governmental ownership, supportive guidelines and engagement at a local level. An integrated framework, with clear expectations and targets was recommended for future reports. (Department of Health, 1996)
Report	Food Standards	Select Committee on Food Standards	1999	Report on the draft Bill of the Food Standards Agency, emphasising the need to include nutrition and dietary advice within its remit. Included a specific recommendation for the FSA to serve as an advisory body on issues around advertising to children. (Select Committee on Food Standards, 1999)

Report	Independent inquiry into equalities in health report	HSC	1998	Provided a review of inequalities in health in England, with the purpose of identifying areas for policy development to support the Government's health strategy. Children and families were highlighted as a high priority for action and amongst others, the report made recommendations on school nutrition, health considerations of CAP and subsidies, support for low-income families to access healthy food, reformulation of processed food to reduce salt content and improving nutrition of women of childbearing age (Health Select Committee, 1998)
Strategy	Saving lives: our healthier nation	DH	1999	The first strategy from the Labour Government highlighted the importance of disease prevention and the need to tackle the underlying social, economic and environmental conditions of ill-health. It highlighted poor nutrition, obesity and physical inactivity as key risk factors for chronic disease. A large amount of the onus was still put on individual responsibility. (Department of Health, 1999)
Legislation	Food Standards Act	UK Government	1999	The Act outlined the set up and functions of the FSA which was launched in 2000. The Agency had no specific objective to address the effect of diet on weight gain or obesity, however did have a commitment to defining a healthy diet, promoting choice and providing information to consumers (Food Standards Act, 1999)
Report	Health – Second Report (Public Health)	HSC	2001	This report set out to gauge the extent to which the DH strategy and policies would address public health concerns. The conclusion was that more needs to be done to rebalance the emphasis on health care and on public health. The report also highlights issues of leadership in the context of public health (Health Select Committee, 2001)
Report	Annual report of the Chief Medical Officer to the Department of Health. On the State of Public Health	CMO	2001	Amongst other recommendations, the CMO (Liam Donaldson) supported the notion of salt reformulation of processed foods and the need for government leadership on the matter in order to prevent high blood pressure. (Donaldson, 2001)
Report	Tackling Obesity in England	NAO	2001	The first report from a government body specifically on obesity, primarily focusing on the cost of the rising levels and the value for money that prevention provides. It described the government's response to obesity as being patchy and inadequate and recommends that a higher priority is given to nutrition initiatives, that across-government strategy is required, that physical activity should be encouraged, that guidance should be offered to school to balance commercial sponsorship which may undermine good nutrition. (National Audit Office, 2001)
Report	Annual report - Health Check On the State of the Public Health - Annual Report of the CMO. Chapter 5 'diffusing the obesity timebomb'	CMO	2002	The 2002 annual report from the Chief Medical Officer made obesity one of the key focus topics, describing it as "time bomb". It highlighted the fact that the rapid rise has been too fast to attribute to genetics, and therefore there is a need to look at energy balance. It highlighted the fact that the population is consuming more snacks, large portions and that food out of the home is high in fat. In relation to diet it made recommendations for cross-government approach, that the food industry should address added fat sugar and salt and help consumers make informed choices and reduced food marketing. (Donaldson, 2002)

Report	Tackling obesity in England	Committee of Public Accounts	2002	Report focused on improving diet and nutrition, including nutritional standards for school lunches, pilot schemes for free fruit in schools, and community pilot projects to promote fruit and vegetable eating. In line with the NHS Plan. (Committee of Public Accounts, 2002)
Report	Securing our future health: taking a long-term view	DH/Treasury	2002	Report carried out for the HM Treasury, focusing on the investment needed to secure long-term health, firstly by securing resources to provide high-quality health services. Amongst other factors, there was a focus on the need to invest in health promotion and prevention to reduce disease and support health services in the long term. as part of a long-term view. (Wanless, 2002)
Dietary guideline	Salt and Health	SACN	2003	Commissioned by the FSA as part of their consideration on salt, this report re looked at recommendations relating salt to health and endorsed the recommendations made in the 1994 COMA report (Scientific Advisory Committee on Nutrition, 2003)
Campaign	Salt Campaign	FSA	2004	A four-phase awareness campaign on salt reduction, carried out in 2004, 2005, 2007 and 2009. Phase 1 focused on why salt was bad for health, phase 2 focused on the need to check food labels, phase 3 focused on the hidden salt in processed food, phase 4 focused on the positive changes that consumers can make to reduce intake. Concurrently, the FSA also engaged with food industry and developed voluntary salt targets across 80 categories of food which were due to be met in 2010 and 2012. Further targets had been planned, but the FSA in England was disbanded in 2010 before this could happen. (Food Standards Agency, 2004)
Report	Securing good health for the whole population	DH/Treasury	2004	This report places an emphasis on behaviour change and individuals, however it does suggest a comprehensive action plan by gov to prevent disease. Building on the 2002 report, this update put forward a strong case for public health and prevention investment, taking the view that investment in health services alone would be insufficient. It noted the role that governments have in supporting individuals to make health choices and the policy instruments that can be used included taxes (price elasticity, nutrient targeted taxes, subsidies (school fruit scheme), voluntary agreements (e.g. on labelling, marketing restrictions) and the provision of information. (Wanless, 2004)
Report	Health - third report	HSC	2004	This report had a specific focus on obesity, including trends, causes, solutions and structures for action in order to make policy recommendations. It recognised the challenges of addressing obesity but highlighted the need for action. It highlighted the role of individual responsibility but emphasised the need for government actions and to resist accusations of “nanny statism”. Key overarching recommendations at the end of the report include the fact that a wide range of solutions are needed and that government review progress and engagement with industry to decide if a more regulatory approach is required. (Health Select Committee, 2004)
Strategy	Strategic Plan 2005-2010 – putting consumers first	FSA	2005	Revised strategic plan for the period 2005-2010 which included a commitment to supporting Ofcom with the development of advertising restrictions, particularly around developing the nutrient profiling model, as well as continue commitment to promoting a voluntary front-of-pack traffic light label, salt campaign and saturated fat campaign. (Food Standards Agency, 2005)

Strategy	Choosing health: making healthier choices easier	DH	2004	This White Paper focused on supporting the public to healthier and more informed choices about health. It provided a comprehensive set of key principles focused around FOP/nutrition labelling, marketing restrictions, industry partnerships, reduction in fat/sugar/salt, increased access to fruit and veg/5-a-day campaign, reduced portion sizes, improved food in schools and education/awareness activities. (Department of Health, 2004)
Strategy	Choosing a better diet: A food and health action plan ⁱ	DH	2005	This document sets out the Government's plans to encourage and co-ordinate action to improve nutrition and health in England, based on targets being missed. It serves as an action plan in support of the 2004 white paper 'Choosing Health: Making healthier choices easier'. Action areas include advertising and promotion of foods to children; food labelling; obesity education and prevention; nutritional standards in schools, hospitals and workplaces. Targets to increase fibre and fruit and vegetable consumption, reduce fat sugar and salt, Reinforced social marketing, salt awareness and 5-a-day campaign
Policy	Voluntary Front of Pack Labelling Scheme	FSA	2007 a	Following consultation, the FSA issued this guidance to businesses wishing to develop front of pack labelling for their products. Since then, front of pack labelling has become increasingly common.
Policy	Ofcom TV restrictions	Ofcom	2007	Ofcom published a package of measures to reduce advertising of HFSS foods to children, defined by FSA nutrient profiling. It applies to programmes specifically made for children, advertisement that particularly appeals to children under 16 and covers licensed characters, promotional offers, claims. (Ofcom, 2007)
Report	Foresight - tackling obesities	Foresight	2007	This comprehensive project led to recommendations that a whole system approach is required to tackle obesity, from production and promotion of healthy diets to redesigning built environments to wider cultural changes to shift societal values. (Foresight, 2007)
Report	Tackling child obesity - first steps	NAO	2006	This report from NAO warns that the governments slow action and lack of timely guidance means that resources are not always being targeted most effectively or targeted on appropriate interventions. The complexity of obesity requires significant changes in the lifestyles of many children and their families to improve their diet and to exercise more. The report makes implementation-based guidelines including leadership and clarity from central government; better definition of regional roles and responsibility; strengthening of local partnerships; support for front line staff to disseminate appropriate information. (National Audit Office, 2006)
Policy	School Nutritional Standards	DoE	2007	Legislation was introduced which required minimum standards for food groups and nutrition to be applied to school lunches in maintained schools from 1st September 2008 (primary schools) and 1st September 2009 (secondary schools, special schools and pupil referral units). (The Education Regulations, 2007)

Strategy	Food Matters	Cabinet Office	2008	The report focused on the the need for an integrated food approach, looking at the food system in the context of health and sustainability, addressing consumer needs, the food supply chain, leadership and the public sector. When the coalition government came into power however this plan was scrapped. Examples of policies recommended include a public sector healthier food mark which will cover formulation, marketing, portion, labelling, and reducing trade distortion. Endorses the 7 recommendations made in the healthy weight healthy lives report. (Cabinet Office, 2008)
Strategy	Healthy Weight, Healthy lives: a cross government strategy for England	DH	2008	A cross government strategy between Department of Health and Department of Education with the goal of helping England to become “the first major nation to reverse the rising tide of obesity and overweight in the population”. It shifted the framing of weight towards ‘healthy weight for all’, thus shifting the emphasis away from only treating established childhood obesity towards a broader societal obesity prevention agenda. It placed the emphasis on changes in the environment to support the adoption of a healthy diet including: early prevention of weight problems to avoid ‘tracking’ into adulthood; promoting healthier food choices; creating incentives for better health; complementing preventative care with treatment for those who already have weight problems. recognises role of food environment and cheap processed food and moves away from a focus solely on obesity to one of promoting healthy weight and so healthy lives. (Department of Health, 2008)
Campaign	Change4Life	DH	2009	Change4Life is the Department of health’s Social marketing campaign to prevent obesity with the slogan “eat well, move more, live longer”. It aims to raise awareness about the risks of being overweight, reduce calorie intake and increase physical activity, particularly focusing on reducing sugar-sweetened beverages, reducing portion size, reducing snacking and increasing fruit and vegetable consumption. Alongside the social marketing campaign, the DH launched a scheme with the Association for Convenience Stores to increase access and availability to fresh fruit and vegetables in deprived areas. It also offers recipes, vouchers and personalised materials to support behaviour change. (Department of Health, 2009)
Report	Health Inequalities – Third report of session 2008-09	HSC	2009	Raised concerns over the Secretary of State's focus on simple health promotion messages, suggesting it underestimated the challenges of removing the barriers to healthy eating, particularly for more disadvantaged groups. The report highlighted that people need cheap and convenient access to healthy food, rather than a multiplicity of takeaways on their high street; comprehensible nutrition labels on the food they buy; skills to cook healthy meals. (Health Select Committee, 2009)
Policy	Saturated Fat Campaign	FSA	2009	The Food Standards Agency launched a public health campaign to raise awareness of the health risks of eating too much saturated fat. It involved a series of 40second TV advertisements about common food sources and what it does to health. It was supported by print marketing about

				simple swaps and dietary changes. A second phase ran in 2010, focused on 1% milk. (Food Standards Agency, 2009)
Strategy	Healthy lives, healthy people: Our strategy for public health in England	DH	2011	This document represents the newly elected governments strategy for public health and includes the launch of a new body – Public Health England –the Responsibility Deal, a partnership between government and the food industry to improve food and renewed support for Change4Life. The strategy is focused on individual responsibility and behaviour change while recognizing the need to improve environments to support healthy choices. "Rather than central government nagging individuals and businesses to become healthier, we believe that sustained behaviour change will only come about with a new approach – genuine partnership. A key component of our approach is the Public Health Responsibility Deal". (Department of Health, 2011a)
Strategy	Healthy lives, healthy people: A call to action on obesity in England	DH	2010	Supports the <i>Healthy Lives Health People Strategy</i> by outlining the role of different actors at different levels, for instance building capacity at a local level as government devolves some of its public health leadership. (Department of Health, 2011b)
Report	A Healthier Nation	Conservative Party	2010	A green paper outlining the Conservative government's position on public health, including an emphasis on decentralization of responsibility to a local level, as well as a focus on behaviour change. Includes a focus on obesity and weight. (Conservative Party, 2010)
Strategy	Launch of the Public Health Responsibility Deal	DH	2011	The Responsibility Deal was the main nutrition policy in England 2010-2015, based on collaboration between government and food industry and consists of several pledges which are included in this table individually. "The Public Health Responsibility Deal aims to tap into the potential for businesses and other influential organisations to make a significant contribution to improving public health by helping us to create this environment. The Responsibility Deal embodies the Government's ambition for a more collaborative approach to tackling the challenges caused by our lifestyle choices." (Department of Health, 2011c)
Pledge	Responsibility Deal: Out of Home Calorie Labelling Pledge	DH	2012 a	The agreed pledge stated that: "We will provide calorie information for food and non-alcoholic drink for our customers in out of home settings from 1 September 2011 in accordance with the principles for calorie labelling agreed by the Responsibility Deal." (Department of Health, 2012a)
Pledge	Responsibility Deal: Salt Reduction Pledge	DH	2012	The agreed pledge stated that: "We commit to the salt targets for the end of 2012 agreed by the Responsibility Deal, which collectively will deliver a further 15 per cent reduction on 2010 targets. For some products this will require acceptable technical solutions which we are working to achieve. These targets will give a total salt reduction of nearly 1g per person per day compared to 2007 levels in food. We recognise that achieving the public health goal of consuming no more than 6g of salt per person per day will necessitate action across the whole industry, Government, NGOs and individuals." A salt reduction pledge for caterers (2012), and another with update

				targets (2014) have since been added to support this original pledge. (Department of Health, 2012b, 2012c)
Pledge	Responsibility Deal: No use and removal of trans fat	DH	2012	The agreed pledge stated that: "(a). We do not use ingredients that contain artificial trans fats." "(b). We are working to remove artificial trans fats from our products within the next 12 months." (Department of Health, 2012d)
Pledge	Responsibility Deal: Calorie Reduction Pledge	DH	2012	The agreed pledge stated that: "Recognising that the Call to Action on Obesity in England set out the importance of action on obesity, and issued a challenge to the population to reduce its total calorie consumption by 5 billion calories (kcal) a day, We will support and enable our customers to eat and drink fewer calories through actions such as product/ menu reformulation, reviewing portion sizes, education and information, and actions to shift the marketing mix towards lower calorie options. We will monitor and report on our actions on an annual basis." (Department of Health, 2012e)
Pledge	Responsibility Deal: Fruit & vegetable	DH	2012	The agreed pledge stated that: "We will do more to create a positive environment that supports and enables people to increase their consumption of fruit and vegetables." (Department of Health, 2012f)
Report	Behaviour Change	House of Lords	2012	Presents doubts about the effectiveness of voluntary agreements with commercial organisations, where there are potential conflicts of interest. "we have major doubts about the effectiveness of voluntary agreements with commercial organisations, in particular where there are potential conflicts of interest" [...] Given that these principles do not appear to have been applied consistently to the Public Health Responsibility Deal Network, we urge the Department of Health, in particular, to ensure that these principles are followed when negotiating further voluntary agreements." (House of Lords, 2012)
Report	Update on government approach to tackling obesity	NAO	2012	Provides an update on the status of the Government's effort to tackle obesity. Sections on labelling, marketing, reformulation. The report concludes that efforts to work with industry have not been working and a shift in focus is needed towards increasing the sale of healthy food. (National Audit Office, 2012)
Report	Labours Policy Review – Children, food and obesity	Labour Party	2013	A review published by the Labour government while serving as the shadow party. Food marketing, reformulation (Sugar reduction), traffic light labelling, increase availability of health food choices, school food to cover all schools (Labour Party, 2013)
Policy	Front-of-pack nutrient labelling	DH	2013	Following the publication of EU Food Information Regulations (FIR), the Department of Health (with others) developed a consistent front of pack labelling design which incorporated colour-coding, the words high, medium and low, and percentages of guideline daily amounts. Although the guidance remains voluntary, the proposed label must be used by a company if they are to provide any front-of-pack information. (Department of Health, 2013)

Pledge	Responsibility Deal: Front-of-pack labelling	DH	2014	The agreed pledge stated that: “We will adopt and implement the UK Governments’ 2013 recommended Front of Pack Nutrition Labelling Scheme” (Department of Health, 2014b)
Pledge	Responsibility Deal: Saturated Fat	DH	2014	The agreed pledge states that: “Recognising the role of over-consumption of saturated fat in the risk of premature avoidable mortality from cardiovascular and coronary heart disease, and public health recommendations to reduce saturated fat consumption (to less than 11% of food energy for everyone over 5yrs of age, compared to current levels of 12.7%): We will support and enable people to consume less saturated fat through actions such as product/menu reformulation, reviewing portion sizes, education and information and incentivising consumers to choose healthier options. We will monitor and report on our actions on an annual basis. Progress in reducing people’s saturated fat intakes will be measured via the National Diet and Nutrition Survey.” (Department of Health, 2014c)
Report	Sugar reduction: responding to the challenge	PHE	2014	A report published by Public Health England on their priorities relating to reducing sugar in the population diet. The strategy document reaffirmed their commitment to social marketing and Change4Life and committed to evidence reviews on other strategies such as marketing restrictions and fiscal measures. (Public Health England, 2014)
Policy	School Food Standards	DoE	2014	New mandatory school food standards were launched for all maintained schools, and new academies and free schools. They focus on food based rather than nutrition-based standards and aim to simplify and streamline the guidelines they replace. The Department of Education recommendations also include cooking skills in the curriculum, with all primary school children to learn the principles of healthy eating, where food comes from and basic cooking techniques while Secondary school children will be taught about nutrition and how to cook basic meals. (Department of Education, 2014. School Food Standards, 2014)
Dietary guideline	Draft Carbohydrates and Health report	SACN	2015	SACN has revised their recommendations on carbohydrate consumption, reducing the recommended consumption of free sugars to be 5%, in line with WHO proposals. There is also a recommendation to reduce sugar-sweetened beverage consumption in children. (Scientific Advisory Committee on Nutrition, 2015)
DH = Department of Health; DoE = Department of Education; SACN = Scientific Advisory Committee on Nutrition; PHE = Public Health England; NAO = National Audit Office; HSC = Health Select Committee; COMA = Committed on Medical Aspects of Nutrition and Food policy; NACNE = Nutrition Advisory Committee on Nutrition Education ; DEFRA = Department for Environment, food and Rural Affairs; FSA – Food Standards Agency.				