



# Collective Learning: Engaging with policy and policymakers

Written by [Deena Dejani \(University of Leeds\)](#)

In June, Praxis, alongside Changing the Story and CE4MR, hosted an interdisciplinary workshop on the use of community engagement methods to tackle Antimicrobial Resistance (AMR) in Nepal.



Credit: Nichola Jones

In line with Praxis' aims of drawing out learning across projects to make explicit the contribution of arts and humanities themes and methods for addressing global challenges, including global health challenges, on Day 3 of the workshop, Praxis hosted an interactive exercise titled "Engaging with Policy and Policy Makers". The group exercise aimed to identify the range of experiences of practitioners who use creative methods in public health.

Experiences ranged from opportunities to challenges, and the interactive exercise utilised the learning from individual projects to generate a group discussion on the potentialities of policy engagement. Here are some of the most prominent collective lessons shared with us by practitioners in global health, drawing on their first-hand experience:

## Addressing the full complexity of development challenges

The most commonly shared insight among practitioners was that creative methods challenge existing ways of working in public health. It does so in two different ways; first, by introducing a shift in public health from individual to contextual approaches; and second, by challenging "top-down" ways of working in public health.

Across the wide range of countries in which practitioners work, these two contributions were considered incredibly important for tackling global health challenges. Arts and humanities methods were seen as enabling a holistic approach that addresses the full complexity of development challenges, while diversifying and democratizing voices taking part in the debate.

While acknowledging this immense potential from first-hand experience, practitioners also told us that the possibilities of engaging policymakers in this important "shift" depended on whether the issue at hand has been acknowledged as an existing policy priority. In other words, if a health issue, like AMR, has been considered a policy priority area, then policymakers are very keen to adopt new approaches (including creative methods) because of the new solutions these methods generate. If an issue has not been prioritised on the policy agenda, then policymakers are significantly more reluctant to engage with novel methods and approaches. In these situations, creative methods find themselves facing a bulwark of questions on their cost, sustainability, and short-term (rather than long-term) impact.

## Acknowledging the local context – including power

The capacity of arts and humanities methods to recognise and allow for more diverse voices in tackling global health challenges roused some resistance in some countries. For example, one participant explained that the shift from an individual approach to a contextual approach translated into acknowledging structural and infrastructural problems (in addition to community and societal obstacles). This was not well-received by policymakers. Another participant told us that policymakers engaged with an issue differently depending on the

population it affected; for example, policymakers were less willing to engage with projects that work in rural communities that are viewed as not politically “important”. Or, in the words of another participant, “Human Rights approaches are not politically popular.”

This was believed to be due to the fact that while arts and humanities methods enable the inclusion of new and previously unheard voices, this is not the way policy traditionally works. Community voices are not usually involved in formulating policies. One participant said that even local experts are not listened to in the same way as international partners.

It therefore appears that arts and humanities approaches, in addressing global health challenges, also contribute to tackling a whole range of other Sustainable Development Goals, including creating inclusive and equitable societies.

In instances of successful outcomes, arts and humanities methods show tremendous promise for orienting global health challenges to the perspective of the public good – creating lasting benefits for all. For example, one practitioner told us how senior doctors at a hospital in Kenya were moved to tears after watching a performance based on stories of poor women’s experiences of healthcare services.

Another told us that in Uganda a senior town clerk who watched a community theatre production about council-driven corruption in the local housing market said that he was moved “emotionally as well as intellectually” by the performance. He went on to facilitate a re-staging of the performance for the entire town council and the regional land board, and he worked to cut (some) of the corruption out.



Credit: Stuart Taberner

## The Mary Poppins Bag

Praxis is committed to creating and sharing resources among its network. By resources we don’t just mean toolkits, but also peer-advice based on first-hand experience. We are calling this the Mary Poppins bag, a space where the many diverse experiences of researchers – big or small – can be stored.

Listed below is some of the best advice shared in the June event, which we will be adding to the Mary Poppins bag:

- Approach policymakers as a cohort or a cluster rather than as individuals. It is much more powerful when five people representing different organizations/institutions come together to say, “this is a problem”. You will rarely get the same impact if you schedule an appointment to say so on your own.
- Give policymakers certificates to acknowledge their time and contribution in the success of a project. This may appear silly but can make a big difference. In a project in the Philippines, policymakers were very proud of the certificates and framed them and hung them in their public offices.
- Policymakers often move around, and this can be very frustrating. You spend years cultivating a relationship with a policymaker and then s/he is transferred to another department. Don't give up on the relationship just because the policymaker has moved elsewhere. Continue investing in the relationship. Think of it as now having influence in two departments, not one.
- Involve policymakers from the beginning. If possible, involve them from the stage of project conceptualization.
- Work with local government. Relationships are usually more productive than working with regional or national authorities.
- Make sure you have visibility on the web. This is crucial. Policymakers will check your website after they meet you... or, if your website is very visible, they may come across it themselves and then contact you!

TAGS: ARTS AND HUMANITIES DEVELOPMENT GLOBAL HEALTH POLICY PRAXIS