

Section 3

Advocacy Guidelines

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Advocacy Guidelines

Table of Contents

Introduction	3-1
Developing an Advocacy Strategy: Component I — Looking Outward	3-5
Step 1: Understand the Political Decision-Making Process	3-6
Step 2: Select and Define a Health Reform Policy	3-7
Step 3: Set Advocacy Objectives	3-10
Step 4: Identify and Analyze Audiences	3-12
Developing an Advocacy Strategy: Component II — Looking Inward	3-16
Step 5: Select Advocacy Activities	3-17
Step 6: Implement Advocacy Activities	3-27
Developing an Advocacy Strategy: Component III — Looking Ahead	3-28
Step 7: Evaluate and Adjust Strategy	3-29
Conclusion	3-30
Bibliography	3-32
Annex 3-A: Audience Identification Worksheet	3-3
Annex 3-B: Audience Knowledge, Position, and Interests Worksheet	3-35
Annex 3-C: Allies and Opposition Matrix	3-37
Annex 3-D: Message Content Worksheet	3-39
Annex 3-E: Selecting a Messenger Worksheet	3-41
Annex 3-F: Communications Plan Worksheet	3-43

List of Boxes, Figures, and Tables

Box 3.1. Discussion questions: How policy decisions are made	3-6
Box 3.2. Health reform policy definition #1	3-8
Box 3.3. Health reform policy definition #2	3-8
Box 3.4. Discussion questions: Determining if a policy is politically viable	3-9
Box 3.5. Discussion questions: Setting advocacy objectives	3-11
Box 3.6. Advocacy objective #1	3-11
Box 3.7. Advocacy objective #2	3-11

Box 3.8.	Discussion questions: Ensuring that advocacy objectives are SMART	3-11
Box 3.9.	Discussion questions: Identifying target audiences	3-13
Box 3.10	Audiences for health reform in Ecuador	3-13
Box 3.11.	The benefits of networks	3-18
Box 3.12.	Types of coalitions	3-19
Box 3.13.	Collaboration to strengthen community.	3-20
Box 3.14.	Equity as a health sector objective in Ecuador	3-20
Box 3.15.	Discussion questions: Developing and delivering policy messages	3-22
Box 3.16.	Decentralizing health services.	3-23
Box 3.17.	Different formats for national health advocacy in Ecuador.	3-25
Box 3.18.	Using mass media	3-27
Box 3.19.	Lobbying.	3-27
Box 3.20.	Discussion questions: Monitoring your progress	3-30
Box 3.21.	Discussion questions: Evaluating your results	3-31

Figure 3.1.	Policy Stages, Technically Dominated	3-3
Figure 3.2.	Components of an Advocacy Objective	3-10
Figure 3.3.	Example of a Personal Network	3-18
Figure 3.4.	The SEE Method.	3-23

Table 3.1.	Example of Costs and Benefits of a Health Reform Policy: Increased Efficiency in Use of MOH Resources	3-8
Table 3.2.	Possible Key Actors and Stakeholders in Health Reform	3-14
Table 3.3.	Advantages and Disadvantages of Coalitions	3-19
Table 3.4.	Data Sources for Health Sector Reform.	3-21

Advocacy at a Glance

What Is Advocacy?

There are many definitions of advocacy.

- ▶ Advocacy is influencing decision-makers.
- ▶ Advocacy is championing an issue, drawing attention to it, and getting it on the agenda.
- ▶ Advocacy is identifying a problem, recommending a solution, and putting problem and solution together.
- ▶ Advocacy is changing the policies, positions, programs, or budgets of any institution.
- ▶ Advocacy is changing an organization or system.
- ▶ Advocacy is educating leaders, policymakers, policy implementers, and others.
- ▶ Advocacy is building support for an issue.

For the purposes of this Policy Toolkit, advocacy is a set of targeted actions directed at decision-makers and other key stakeholders in support of a specific policy issue.

Why Is Advocacy Important to Health Reform?

The common thread among these definitions of advocacy is that “[w]herever change needs to occur, advocacy has a role to play” (Sharma n.d.). Implementing health sector reform is all about change, hence the importance of advocacy.

Advocacy is a tool for health reform teams, providing a strategic approach to building and maintaining support for implementing health reforms. Developing an advocacy strategy involves looking outward to determine your goals, objectives, and audiences; looking inward to assess your resources for information and influence; and looking ahead to monitor the effectiveness of your strategy and adjust the strategy as needed to achieve your reform goals and objectives.

Many experienced policy advocates describe advocacy as part science and part art. There is no universal scientifically proven formula or method for effective advocacy, but experience suggests that advocacy strategies are more likely to succeed when they are based on solid analysis and careful planning. Designing and implementing an effective advocacy strategy also generally involves qualitative research, communication, negotiation, and politics—skills and knowledge that are often lacking among members of health reform teams.

Advocacy is also part art. Successful advocates inspire and motivate a wide range of people to take action. They are also creative and seek alternative, innovative ways to draw attention to

their issue. They have well-honed political instincts and timing, strategically choosing when to fight and when to lay low and always keeping an eye on the ultimate victory—achieving their reform goal.

Most of these skills can be learned and refined through practice, and both successful and failed advocacy efforts are instructive. With time, effort, and experience, you can build the confidence to practice the art as well as the science of advocacy.

What Are the Steps in Developing an Advocacy Strategy?

Figure 3.1 illustrates a strategic approach to advocacy, which comprises three components: looking outward, looking inward, and looking ahead. Each step is discussed in detail in the advocacy guidelines.

Component I—Looking Outward

- Step 1. Understand the political decision-making process
- Step 2. Select and define a health reform policy
- Step 3. Set advocacy objectives
- Step 4. Identify and analyze audiences

Component II—Looking Inward

- Step 5. Articulate advocacy activities
- Step 6. Implement advocacy activities

Component III—Looking Ahead

- Step 7. Evaluate and adjust strategy

Figure 3.1. A Strategic Approach to Advocacy

Strategic Approach	Strategic Action	Advocacy Steps
 Looking Outward	Analyze policy environment <ul style="list-style-type: none">• Policy process• Policy actors• Health reform policies and strategies	<ul style="list-style-type: none">• Understand the policy decision-making process• Select and define a health reform policy• Set advocacy objectives• Identify and analyze audiences
 Looking Inward	Analyze resources <ul style="list-style-type: none">• Information and data• Resources• Influence	<ul style="list-style-type: none">• Articulate advocacy activities• Implement advocacy activities
 Looking Ahead	Analyze impact on reform policy	<ul style="list-style-type: none">• Evaluate and adjust strategy

Advocacy Guidelines

Introduction

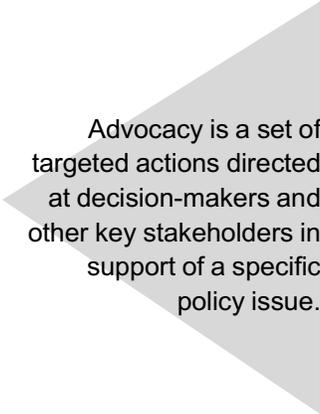
Many countries, both developed and developing, have undertaken some type of health sector reform over the past decade, ranging from targeted interventions aimed at improving the effectiveness of the health ministry to radical restructuring of the entire health sector. This collective international experience has demonstrated that reform is technically complex and difficult to implement and, though the reasons for uneven implementation have varied, some common constraints have emerged:

- ▶ **Political constraints:** Because of the highly complex and technical nature of health reform, the process is often dominated by technicians, and these technical experts often neglect to seek “buy-in” from key stakeholders and others who are directly affected by reform. Moreover, influential politicians and policymakers frequently hesitate to support reforms they do not fully understand or that may prove controversial.
- ▶ **Resource-related constraints:** Even with political support from the top, however, some health reforms fail because of a lack of resources — insufficient funding, staff, or technical skills to implement or sustain reform over time.
- ▶ **Organizational constraints:** Key institutions may need to be reorganized or restructured before the proposed changes can be appropriately implemented. Even then, key staff members may be resistant to change and may obstruct implementation of the reforms.

Why is advocacy important to health reform?

To be effective, a health reform team must address and overcome these constraints to implementation. Increasingly, this requires that team members become advocates for health reform. A well-planned and carefully thought-out advocacy strategy can maximize efforts to:

- ▶ **Shape the policy debate surrounding health reform:** Advocacy can help define how health reforms are perceived and understood by key stakeholders. Using facts and figures to make a persuasive argument for your reform policies helps build support among key groups. Introducing sound and reliable policy analysis also fosters a more accurate and objective discussion of health reform issues.



Advocacy is a set of targeted actions directed at decision-makers and other key stakeholders in support of a specific policy issue.

- ▶ **Build support and minimize opposition:** The analysis required to design and implement a successful advocacy strategy identifies potential allies for support and individuals and/or groups who may oppose your health reform initiatives. The analysis also suggests strategies to consolidate and maintain support, while at the same time, addressing your opposition.
- ▶ **Motivate action:** Successful advocacy efforts not only provide information, raise awareness, and build support for health reform efforts, they also focus on the *actions required* by the target audiences to implement reforms. Advocacy activities make explicit the decisions to be made, the changes in opinion desired, the level of political commitment needed, and the technical, human, and financial resources required to successfully implement health reform initiatives.

What comprises an effective advocacy strategy?

These advocacy guidelines help you systematically develop an advocacy strategy that builds support and political commitment for your priority health reforms and minimizes the opposition to reform. These guidelines introduce the concept of advocacy with a strategic focus on developing advocacy campaigns, followed by a step-by-step description of the process needed to design and implement an advocacy strategy. The process outlined in these guidelines helps you

- ▶ Articulate what you want to achieve through advocacy
- ▶ Identify and understand whom you need to influence
- ▶ Select appropriate activities to implement your advocacy strategy.

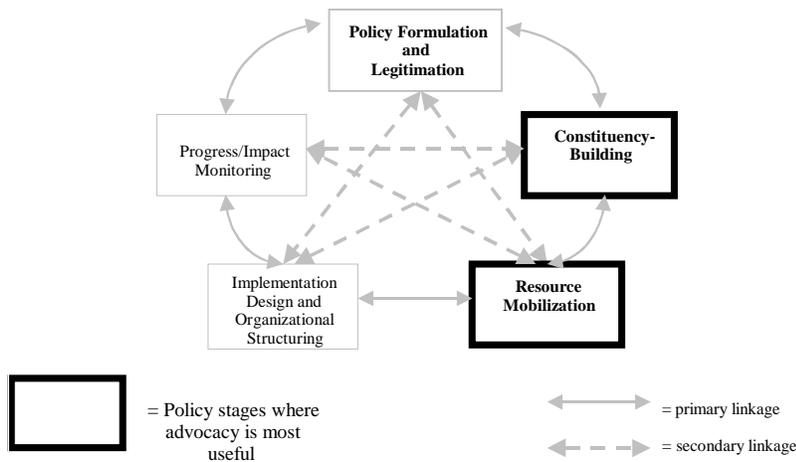
These guidelines also demonstrate the critical role of advocacy in supporting implementation of health reform, teach basic advocacy skills, provide worksheets for conducting the necessary analyses and developing a systematic approach (see Annexes), and build confidence for undertaking advocacy activities that effectively support reform.

The guidelines have been adapted from tools and methodologies developed for other health-related activities (see bibliography) and therefore build on the growing experience in advocacy, policy communication, and management of the policy process. They have been field-tested and are organized to create an approach appropriate to the complexity and diversity of health sector reforms.

Where does advocacy fit into the policy process?

Developing a thorough understanding of the opportunities that exist for influencing the policy process is critical to the success of your advocacy efforts because it focuses your advocacy activities on what is attainable. This requires assessing how the policy process works in your country. The Introduction to this toolkit presents a model for the policy process that includes five stages: policy formulation and legitimization; constituency-building; resource mobilization; implementation design and organizational structuring; and progress/impact monitoring (see Figure 3.1).

Figure 3.1. Policy Stages, Technically Dominated



Reforms are launched when issues and agendas come together and policymakers decide to reform the health sector and set the direction of reform. This politically driven process is what most people associate with advocacy and, in fact, where they tend to focus their advocacy efforts. Experience demonstrates, however, that advocacy is needed in all stages of the health reform policy process and that advocacy can be particularly effective during constituency-building and resource mobilization.

Constituency-Building

You must convince key constituencies that they will benefit from the proposed reforms and that the benefits will justify the costs. A general perception of legitimacy is important to health sector reform, but it is not sufficient to ensure implementation. Moreover, beneficiaries must actively support health sector reform, not simply give their tacit approval. Successfully implementing health sector reform requires broad support at different levels, including from proponents inside and outside government. It is essential to have the participation of stakeholders who publicly support health sector reform and lead by example—by changing their own behaviors and organizational norms. Advocacy is critical for building constituencies and mobilizing them to become active supporters.

Advocacy can be particularly important during constituency-building and resource mobilization.

Resource Mobilization

Implementing health sector reform requires substantial financial, human, and technical resources. Accumulating and mobilizing these resources is another critical advocacy challenge. Constituencies and networks can help you lobby for resources. They may also help you develop incentives or conditions that allow existing resources to be used more efficiently or to be redeployed. However, you cannot become complacent once you have successfully mobilized required resources to implement key health reforms, since these resources can later be reallocated or lost to competing uses and users. As a member of the health sector reform team, you need to recognize and deal with the opposition that is created when resources change hands and continue your advocacy efforts to maintain the resources required to implement health reform policies.

How do the Advocacy Guidelines relate to the other guidelines in this toolkit?

These guidelines are designed to complement and build on the other methodologies in the Policy Toolkit. As a result, the reader is encouraged to refer to the other guidelines and tools as needed. For example, some of the techniques to identify and analyze key policymakers and other influential political actors build on approaches and exercises described in the Stakeholder Analysis Guidelines. Similarly, conflict resolution and negotiation are important to advocacy, and the Conflict Negotiation Guidelines provide substantial, detailed direction on how and when to undertake negotiation. Although each tool can be used independently, you are encouraged to learn the concepts and skills included in all and to use them to further your reform efforts.

Developing an Advocacy Strategy: Component I—Looking Outward

This component of the process comprises four steps: understanding the political decision-making process, selecting and defining a health reform policy, setting advocacy objectives, and identifying and analyzing audiences. The first three steps are often the most difficult and challenging aspects of developing an advocacy strategy. They require analyzing and understanding complex policy processes and relationships, synthesizing highly technical and multifaceted policy issues, prioritizing the relevant reform policies, and clearly defining advocacy objectives. Taking the time to complete the exercises and carry out the analyses required for these steps is very beneficial in the long run. The results of these three steps directly affect all the subsequent steps in the advocacy process—identifying and analyzing target audiences, articulating and implementing advocacy activities, evaluating and adjusting your strategy—and therefore have a direct bearing on the effectiveness of your advocacy effort. Without a fundamental understanding of the political decision-making process and political context, a clear and specific statement of your reform policy, and well-defined advocacy objectives, you run the risk of losing focus and wasting precious resources and energy.

Step 1: Understand the Political Decision-Making Process

Effective advocacy strategies begin with study and research. To effect change in the decision-making or policy-implementation arenas of health reform, you must identify and understand the *processes* through which policy decisions are made and implemented.

These processes involve many actors and many steps. Each actor is a potential source of support or opposition, and each step is a potential point of access into the policy process. By disaggregating, analyzing, and understanding the process, you can better identify the important actors and determine where to intervene. It is equally important to identify, on one hand, the formal rules and procedures of government and, on the other, the unwritten rules of policymaking that affect the roles, relationships, and balance of power among institutions and key actors.

First, assemble a group of colleagues, and brainstorm together to analyze how policy decisions are made. Answer the questions in Box 3.1. Creating a flow chart or mapping the policy process can also be helpful.

Box 3.1. Discussion questions: How policy decisions are made

- ▷ How are ideas or issues generated for a new or revised policy?
- ▷ How is the proposed issue introduced into the formal decision-making process?
- ▷ What is the process for discussing, debating, and altering the proposal?
- ▷ Who are the actors involved?
- ▷ How is the proposal approved or rejected?
- ▷ What is the timeframe for discussing and approving the proposal?
- ▷ If approved, what are the steps to implement the policy?

(Boyd et al. 1999)

Step 2: Select and Define A Health Reform Policy

Now that you have a basic understanding of the policy processes in your country, you must analyze the different health reform policies and select one to be the focus of your advocacy efforts. This is often the most difficult part of designing an advocacy strategy. Health reform is comprised of multiple complex and highly technical policies and strategies, and you must select and define your reform policy in terms that are politically feasible and understandable to policymakers and other key stakeholders.

Step 2 is broken down into four tasks: 1) selecting a health reform policy, 2) defining your policy, 3) analyzing the consequences of implementing your policy, and 4) evaluating its political feasibility.

Select a Health Reform Policy.

For advocacy to be effective, it must be focused on a specific health reform policy. The criteria for selecting a priority health reform policy for your advocacy efforts include the following:

- ▶ The policy directly supports current health reforms.
- ▶ The policy is critical to implementation of your health reforms.
- ▶ The policy is politically viable.
- ▶ The time is opportune to build support for the policy or make decisions and take action regarding the policy.

Refer to the stakeholder analysis guidelines in Section 2 for a more in-depth discussion of how to select and define a policy.

Define the health reform policy.

Once you have selected a priority policy, you must define it concretely and clearly to ensure a common understanding of it among policymakers, other stakeholders, and potential supporters. Advocacy is about convincing others of the merits of your health reform policy, and how you articulate the policy helps shape the debate that surrounds it. You must also specify what actions the government must take to implement the reform policy. As the examples in Boxes 3.2 and 3.3 demonstrate, better definitions make it easier to identify who has authority to influence the policy and who will support or oppose it, thereby improving the effectiveness of your advocacy efforts (see also the stakeholder analysis guidelines in Section 2). To ensure that you define your policy in a way that is accurate and comprehensible, be sure to:

- ▶ Use clear and nontechnical language.
- ▶ Be as specific as possible.
- ▶ Be action-oriented.
- ▶ Highlight positive aspects of the policy.

Identify the advantages and disadvantages of implementing the policy.

Box 3.2. Health reform policy definition #1

Definition for the general health reform policy of “Deconcentration of the Ministry of Health.”

Deconcentration of the MOH is the permanent delegation of decision-making power to provincial directors, area chiefs, and hospital directors in the areas of:

- ▷ naming and managing personnel
- ▷ buying equipment and supplies
- ▷ utilizing funds generated by the facilities.

Box 3.3. Health reform policy definition #2

Definition for the general health reform policy of “MOH resource allocation based on results.”

Allocating MOH resources based on results is the provision of resources to Ministry facilities based on the services they provide (according to the number of services produced). The specific resources that would be allocated based on results include:

- ▷ facility and general administrative budgets
- ▷ personnel allocations
- ▷ equipment distribution.

There are advantages and disadvantages for any health reform policy. Stakeholders will decide whether to support a policy based on the advantages and disadvantages that are presented to them. Good advocates understand all possible consequences of their policy and develop advocacy objectives that highlight the advantages and downplay the disadvantages.

Conduct a quick analysis of the advantages and disadvantages by identifying the groups and individuals affected by the proposed policy goal and brainstorming with your colleagues on the reform team to determine which individuals and groups will “benefit” and which will “lose” (see Table 3.1). First, list the advantages of implementing your proposed policy. For each advantage, identify and list those individuals and groups that will win (mark with a “+”). Follow the same process with the potential disadvantages, by listing the disadvantages and identifying those individuals and groups that will lose (mark with a “-”). If you have conducted a stakeholder analysis, then you can use your stakeholder list and/or stakeholder analysis information.

Table 3.1.
Example of Costs and Benefits of a Health Reform Policy: Increased Efficiency in Use of MOH Resources

Advantages	Disadvantages	Stakeholder affected
Decreased costs of service provision		+MOH authorities +Clients
	Increased work load by MOH personnel	-MOH personnel in facilities -Labor unions
Decreased wait time		+Clients +MOH authorities (through better institutional reputation)
	New administrative and budgeting systems	-Ministry of Finance -MOH budgeting at central and facility levels -MOH facility directors
MOH more competitive provider	More competition	-Private sector providers +MOH authorities and facilities
	Possible shut downs of inefficient or unnecessary facilities	-Clients -Facility personnel -Labor unions
	Changes in personnel	-Labor unions -Facility personnel
Allows MOH to continue to provide services		+Clients +MOH personnel

Evaluate the policy's political viability.

Now your team will need to determine if the policy is politically viable (see Box 3.4). For example, in reviewing the analysis in Table 3.1, the health reform team can quickly determine that there are more opponents than supporters for their policy of increasing the efficiency of MOH resources. The next step is to dig further into the analysis to determine if the opposition is stronger than the support. You can quickly see that this health reform team can anticipate strong opposition from key and influential political actors like the Ministry of Finance, MOH technical staff at the central and clinic levels, MOH directors, private sector providers and labor unions. Given the opposition, the team may want to consider selecting another policy that is more feasible or reorienting the chosen policy. The benefit of this analysis is that in short order, the health reform team can quickly determine if their reform policy is politically feasible, needs to be refocused, or should be abandoned for another one less controversial before developing an advocacy strategy that will be misguided from the start.

Box 3.4. Discussion questions: Determining if a policy is politically viable

- ▷ Are there more supporters than opponents?
- ▷ Are the supporters more influential than the opponents?
- ▷ Are there undecided and neutral groups that can be converted to supporters?
- ▷ Is there more opposition than support for your policy? If yes, should you: a) continue? b) refocus the policy? c) choose another, less controversial policy?

Step 3: Set Advocacy Objectives

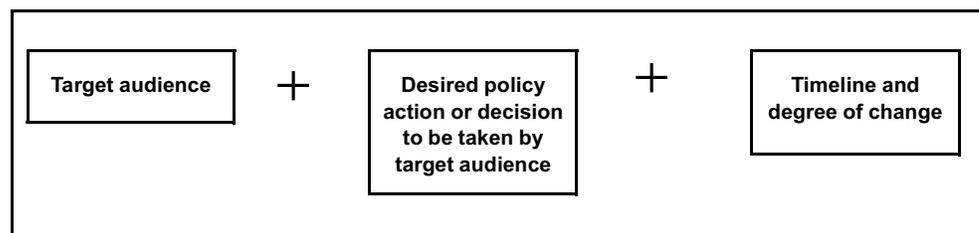
Once you have selected and defined your policy, you are able to begin shaping your advocacy strategy by identifying your advocacy objectives. An advocacy strategy aims to change the behavior or opinions of policymakers, organizations, or key individuals regarding your reform policy and to motivate them to take action in support of your policy. An advocacy objective states what you want to change, who will make the change, and by when. Your advocacy strategy may encompass more than one objective; many advocates simultaneously work on multiple advocacy objectives to implement their policy and achieve their long-term reform goals.

Many advocacy objectives fall into the following three categories:

1. **Maintain and mobilize current supporters** of your health reform policy: Not everyone who supports your health reform policy will work actively for its passage or implementation. Your supporters may need to be asked or, perhaps, convinced to do something to further policy implementation. You may need to persuade them that the benefits of action outweigh the costs, and you must be specific about how they can help.
2. **Minimize active opposition** to your health reform policy: There is a cost to action for your supporters, but your opponents incur a cost for action as well. You may be able to convince your opponents to limit their efforts to obstruct your policy, even if you cannot change their opinions about the merits of the policy. For example, it may be difficult for Ministry of Health officials to argue against a policy decentralizing responsibility and resources for health services if the policy enjoys widespread public support.
3. **Convert neutral parties and opposition** to supporters for your health reform policy: Often, the views of opponents or neutral parties about a policy are based on incomplete or inaccurate information. By providing clear and compelling evidence to support your position, you may sway additional stakeholders to your view.

Brainstorm with your colleagues on the health reform team to identify a comprehensive list of advocacy objectives (see Boxes 3.5, 3.6, and 3.7). Because you have limited time and resources to carry out the activities necessary to achieve these objectives, you must prioritize the list. In addition, each advocacy objective should contain the following three components (see Figure 3.2): a target audience, the desired policy action or decision to be taken by the target audience, and the timeline and degree of change.

Figure 3.2. Components of an Advocacy Objective



Finally, sound objectives are Specific, Measurable, Realistic, and Time-bound (SMART). Use the discussion questions in Box 3.8 to ensure that your advocacy objectives are SMART.

Box 3.5. Discussion questions: Setting advocacy objectives

- ▷ Whose opinion or behavior do you want to change?
- ▷ To what should their opinion or behavior be changed?
- ▷ What actions or steps do you want them to take?
- ▷ What is the timeframe?

Box 3.6. Advocacy objective #1

Advocacy objective for decentralizing health services:

Create support and better understanding of the benefits of decentralization among Ministry of Health leadership before policy is approved by Prime Minister.

Box 3.7. Advocacy objective #2

Advocacy objective for rationalizing health facilities:

Minimize political opposition to closing 50 percent of public health posts by informing key stakeholders such as local politicians, provincial advisory council members, and community leaders about how services will improve with more resources dedicated to fewer clinics.

Box 3.8. Discussion questions: Ensuring that advocacy objectives are SMART

- ▷ **S** — Specific: Is the objective specific enough that your supporters understand what you are trying to achieve?
- ▷ **M** — Measurable: Is the objective measurable, enabling you to assess whether your advocacy activities succeed or fail?
- ▷ **A** — Achievable: Is the objective achievable given the resources (financial, political, and technical) available to your health reform team?
- ▷ **R** — Realistic: Is the objective realistic given your resources, expectations, and timing?
- ▷ **T** — Time-bound: Have you specified a timeframe in which to achieve the objective?

Step 4: Identify and Analyze Audiences

Identify target audiences

Effective advocacy is based on an audience-centered approach that targets institutions and people critical for success, rather than attempting to reach all actors or decision-makers. The audience-centered approach:

- ▶ Distinguishes the target audiences
- ▶ Analyzes their positions and interests
- ▶ Communicates policy messages to them
- ▶ Motivates them to take action.

The stakeholder analysis guidelines in this toolkit (Section 2) provide one method for identifying target audiences by identifying key stakeholders. Another method is to brainstorm with your colleagues to identify all organizations, groups, and individuals with a vested interest and “stake” in your country’s health reform (see Box 3.9).

While there may be variations among countries, the target audiences for health reform policies generally include representatives from the following sectors: international, government, political, commercial, nongovernmental, and social. Table 3.2 provides a comprehensive list of possible target audiences, and Box 3.10 lists the target audiences of a health reform initiative in Ecuador.

After you have identified the stakeholders, separate them into primary and secondary audiences:

- ▶ Primary audiences have the ability and authority to directly affect your advocacy objectives. These groups make decisions, take action, and create change. They should be the primary targets for your advocacy strategy. In the case of health sector reform, primary audiences may include ministers of Health, Planning, and Finance, various levels of central and local governments, staff at the health facilities, and private sector service providers.
- ▶ Secondary audiences are people and groups who influence your primary audiences. To the extent that they affect the decisions and actions of primary audiences, they also should be targets of advocacy actions. Opposition may be included among your secondary audiences. Key secondary audiences for health sector reform include doctors’ syndicates and other associations of health professionals, the media, and, possibly, nongovernmental organizations (NGOs) and the public. (The public is usually considered a secondary audience because it affects change by reacting to the incentives created by policies or reformed systems, not by directly influencing the policies or systems.)

The Audience Identification Worksheet (see Annex 3-A) helps you list your primary audiences according to objective and your secondary audiences as they relate to primary audiences.

Primary audiences have the ability and authority to directly affect your objectives. They make decisions, take action, and create change. Secondary audiences are people and groups who influence your primary audiences.

This worksheet will help you identify all target audiences and see clearly which groups or individuals are listed multiple times.

Identifying key political actors and stakeholders is an important step in developing your advocacy strategy. Health reform teams frequently focus solely on their own institutions and their immediate circles of influence, but it is essential to look outward to identify potential allies *and* potential opponents. Indeed, the introduction of health sector reforms often elicits direct and open opposition from important groups, such as strike threats from health worker unions and negative public relations campaigns from medical associations and private sector health organizations. Whether the opposition is mild or strong, you must be prepared to address it in ways that benefit your stated policy:

- ▶ Be careful to identify and include potential opposition in your advocacy efforts.
- ▶ Be informed about the opposition's specific issues and base of support.
- ▶ Anticipate the opposition's response, and include them whenever possible in the policy debate.
- ▶ Prepare messages to refute the opponent's arguments as they arise.

The “undecided” or neutral parties are often overlooked by health reform teams. Many undecided groups may become full supporters of your reform policy with only a minimal effort because many simply lack information or need only to be asked to become actively involved in health reform efforts. Many policymakers and key stakeholders are hesitant to voice an opinion on health reform issues they fear may be controversial, but your advocacy efforts may effectively convert these target audiences from neutral to supportive.

Collect Information about Your Audiences

Collecting information about your target audiences is critical for tailoring effective messages and identifying appropriate advocacy strategies. You need to learn your audiences' knowledge of, attitudes toward, and interests in the reform policy, as well as the other issues about which your audiences care deeply.

- ▶ **Knowledge:** What is their level of knowledge about your reform policy? Are they conversant with key health reform issues? Do they understand the consequences of implementing the policy?
- ▶ **Attitudes and/or perceptions:** What do they really think and feel about your reform policy? Are they in favor? Opposed? What is their official position? unofficial position?

Box 3.9. Discussion questions: Identifying target audiences

- ▷ Who or what groups have direct decision-making authority, influence, or power over my reform policy?
- ▷ Who or what groups influence these individuals or groups?
- ▷ What organizations or individuals are affected by my reform policy? Are they affected negatively? Positively?
- ▷ What organizations or individuals are interested or potentially support my reform policy?

Box 3.10. Audiences for health reform in Ecuador

Before the Ministry of Health (MOH) in Ecuador proposed specific health reform policies and related constitutional amendments, it researched and consulted a wide range of groups to enhance the political feasibility of its proposals. The MOH identified more than 15 groups, including:

- ▷ Central and provincial-level employees of the MOH
- ▷ Doctors
- ▷ Nurses
- ▷ Private sector service providers
- ▷ Nongovernmental organizations (NGOs)
- ▷ Indigenous groups
- ▷ Women's groups
- ▷ Universities

- ▶ **Interests:** Do they care about health reform in general? this policy in particular? Why? How does the policy affect them?
- ▶ **Other issues:** What other issues do your target audiences care deeply about (they can be unrelated to your policy goal and health reform)?

This audience-centered data mentioned above is key to the effectiveness of your effort. For example, if your primary audience has little or no information about your reform policy, your advocacy objective may be to provide them information and raise their awareness. Knowing the issues your target audiences care about helps you link your reform policy to their political agenda, increasing the likelihood that you will gain their support. Similarly, understanding how your reform policy affects your audiences—particularly what they stand to “lose” from the policy—helps you craft messages that directly address their concerns.

There are several methods for collecting information on target audiences. The stakeholder analysis guidelines (Section 2) includes useful tools for compiling, analyzing, and presenting

Table 3.2. Possible Key Actors and Stakeholders in Health Reform

Sectors	Actors
International	International agencies (World Health Organization, Pan American Health Organization, etc.) International financial institutions (World Bank, African Development Bank, InterAmerican Development Bank, etc.) Bilateral donors (US Agency for International Development, etc.) International private voluntary organizations (PVOs)
Government	Executive branch Legislative branch Government ministries (health, finance, education, etc.) Military Regional and local government
Political	Political parties (in power) Political parties (in opposition) Other political organizations Social movements
Commercial	Private entities (private hospitals, private provider networks, etc.) Commercial private sector (pharmaceutical companies, insurance schemes, etc.)
Nongovernmental	Health activists Religious groups, leaders Nongovernmental organizations (NGOs), PVOs Professional Associations (doctors, nurses, midwives, health workers, etc.) Media
Social	Voters Community leaders Indigenous and other community groups Labor unions/groups

this information. If you do not conduct a stakeholder analysis, you can gather information by talking to people familiar with your audiences, reading speeches or documents written by them, and attending meetings where they are speaking or participating. The following methods are also useful:

- ▶ **Informant interviews:** Interviews provide in-depth information on key target audiences' feelings and beliefs regarding your reform policy. You can use informational interviews with a limited number of influential or knowledgeable individuals (who are representative of key groups) to better assess how secondary audiences interact and influence primary audiences. Informant interviews are particularly helpful when the audience is a single person or a group small enough to be interviewed together. Be careful, however, not to consider answers from a single individual to be representative of an entire audience.
- ▶ **Focus groups:** These are semi-structured sessions where small groups from your target population respond to questions and discuss issues of interest. They provide an in-depth perspective and the opportunity to generate discussion and validate opinions from representatives of the target audiences. Find someone your audience considers neutral to lead the focus groups.
- ▶ **Surveys/polls:** Surveys and polls are helpful for learning about large audiences such as "voters" or "communities." Surveys can be important for testing the water for key reforms by gauging how different groups will react to a particular policy. Since surveys are expensive to conduct, however, first review existing survey data.

You can compile and present the information you gather in the Audience Knowledge, Position, and Issues Worksheet (see Annex 3-B). Use one worksheet for each advocacy objective. List the primary and secondary audiences in the first column. Based on the data you collect, list what you know about their knowledge, attitude and positions, interest in the policy, and other key issues of concern. If you are unsure about any of these, enter "research needed" in the appropriate box and fill in the information as it becomes available.

Developing an Advocacy Strategy: Component II—Looking Inward

The second component of the strategic approach to advocacy is looking inward. By looking outward in Steps 1-4, you have built a solid foundation for an advocacy strategy. You now must inject some realism into your policy and advocacy objectives by looking inward to assess whether you have the resources necessary to achieve your objectives. Resources are defined as:

- ▶ **Influence:** Your alliances with other individuals and organizations are your primary resources for influence. Allies can demonstrate their support through their numbers in letter-writing campaigns or rallies. Influential individuals can lobby decision-makers, deliver advocacy messages, or otherwise persuade your target audiences through different channels. Building and strengthening alliances are critical to the success of your advocacy strategy.
- ▶ **Information:** Information such as statistics, testimonials, and analyses can be used to highlight a problem, identify or evaluate alternative solutions, or assess the effectiveness of current programs or policies. Facts and figures are critical to crafting persuasive arguments and advocacy messages. Specific types of information are more compelling to specific audiences (e.g., statistics versus testimonials). Gathering information and/or conducting research helps ensure that you have the necessary information to support your other advocacy activities.
- ▶ **Other Resources:** You need funding and technical expertise to implement your advocacy activities. Typical advocacy activities—workshops, training events, and policy seminars—all require financial support. You also may need to hire contractors or consultants to develop, produce, and implement advocacy materials and activities, such as policy briefs, public relations activities, and media campaigns. You need to identify resources, assess who has control of them, and determine how to mobilize them in support of your advocacy efforts.

Looking inward to assess what resources are available to you helps you balance your advocacy objectives against the advocacy activities you can realistically implement. Once you have assessed your resources, you may need to return to Steps 1-4 and modify your advocacy objectives in accordance with your available resources.

Step 5: Select Advocacy Activities

Advocacy Activity 1: Identify and Develop Potential Allies, Networks, and Coalitions

As an advocate for health sector reform, you need to build support and consensus for health reform and for your reform policy. Effective advocates build networks to acquire a greater number of allies and diversify their bases of support. They also form or participate in coalitions among organizations to create political momentum and amass public support. Below is a brief overview of the different strategies you can use to mobilize support through alliances, networks, and coalitions. (This section draws from two excellent resources on this topic: *Introduction to Advocacy* published by the USAID-funded Support for Analysis and Research in Africa (SARA) Project (Sharma n.d.), and *Networking for Policy Change: An Advocacy Training Manual*, published by USAID's POLICY Project (Boyd et al. 1999)).

Identify potential allies.

The first step in expanding your base of support is to identify potential allies. The Allies and Opposition Matrix (Annex 3-C) helps you display supporters, potential supporters, and opponents. This presents another opportunity to use the results of your stakeholder analysis (Section 2). Take the following steps to identify potential allies:

- ▶ **Start with your core supporters.** Who are the people working most closely with you—other members of the health sector reform team, the minister of health, key staff members at the ministry of health, and other collaborators? Work with your core supporters to reach consensus on goals and objectives.
- ▶ **Identify other potential supporters.** Who among your primary and secondary audiences can be brought on board? What other groups or individuals share your position and have resources to use as influence? Solicit their participation and action.
- ▶ **Identify the opposition.** Assess the constituencies of your opposition. How do they compare to yours? If your base of support is weak by comparison, reach out to a broader audience. Consider including anyone who may be convinced to support your position.

Build relationships through networking.

“..networks are universal. Whether acknowledged as such or not, most people belong to formal or informal groups—networks—organized around family, jobs, religious activities or recreational activities. (Boyd et al. 1999)

Networking is simply a process for initiating and maintaining contact with individuals and organizations that share a common goal and agree to work together to achieve that goal. Developing and maintaining networks can help you achieve your advocacy objectives (see Box 3.11), but doing so takes time and energy because it involves building relationships and trust among people. Furthermore, networks require organization and structure in order to bring together the resources, energy, and talents of different individuals and organizations and work efficiently.



Allies are people and organizations who support your advocacy efforts.



Networks are loose associations of individuals and organizations that share your goals and can help you achieve them.

Box 3.11. The benefits of networks

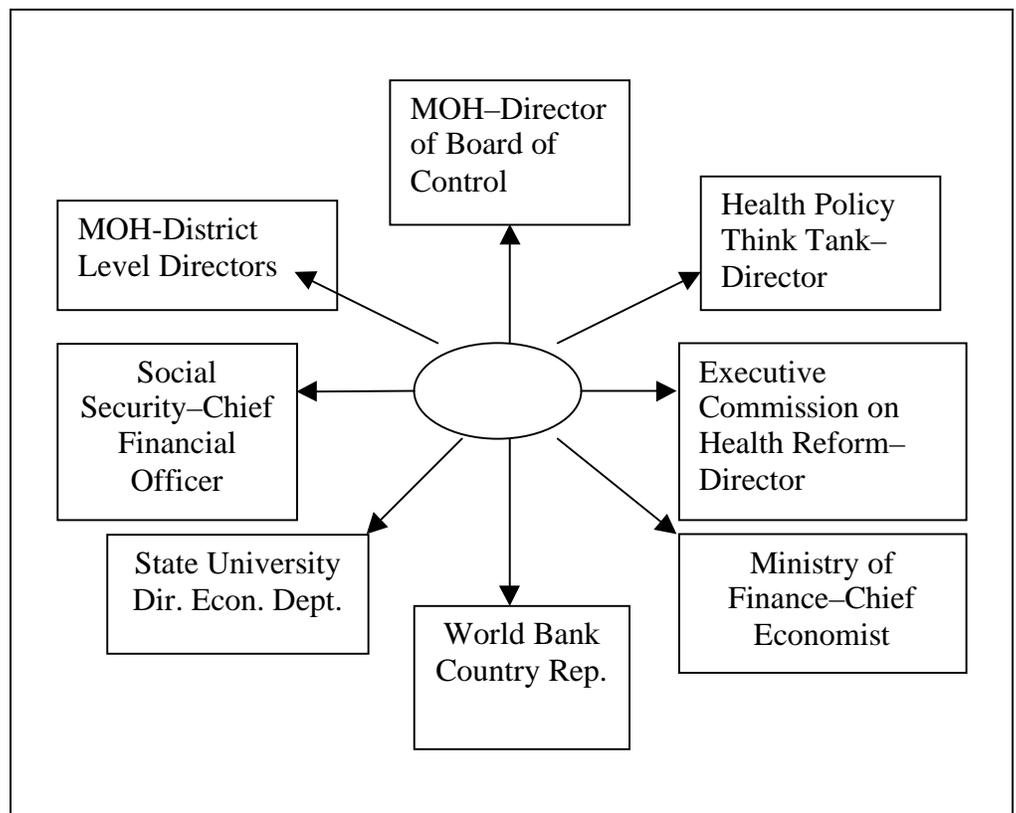
- ▷ Networks keep you up to date on what is happening in health reform.
- ▷ Networks provide a ready audience for your ideas and policy analysis.
- ▷ Networks generate support for your actions.
- ▷ Networks provide access to resources and skills.
- ▷ Networks pool limited resources for the common goal.
- ▷ Networks provide safety and power in numbers.
- ▷ Networks expand your base of support.

(adapted from Boyd et al. 1999)

You can begin by developing your own personal network: select individuals and organizations that you know and are associated with health reform and/or your policy. Think of people both within and outside your organization. Display your contacts using a diagram similar to the one in Figure 3.3. You may find that you already have an extensive network of influential political actors that you can potentially involve in your advocacy efforts. To solidify and strengthen your network, it is important to build open and trusting relationships. Here are a few strategies:

collaborate on projects of mutual interest; help bring attention to their work; assist them with special projects; share information with them; attend their meetings and invite them to yours; and offer to serve as a technical resource for their meetings and seminars. The strategies you learn from your own networking experience can be applied to fostering relationships and trust with potential allies and supporters as you implement your advocacy strategy.

Figure 3.3. Example of a Personal Network



Forge alliances through coalitions.

Coalitions are more formal than networks, thereby requiring greater commitment and resources. However, your coalition partners also make a greater commitment to you and your objectives, so you can expect more from them in return.

There are different types of coalitions, and the categories are not mutually exclusive (see Box 3.12). Coalitions can be very fluid or highly structured, and different types attract different audiences.

To help ensure that your coalition functions smoothly and your efforts at coalition-building are worthwhile, agree on objectives beforehand. Work with your coalition partners to define short- and long-term goals. Select issues and activities that bring the coalition together. Finally, communicate with your partners about roles, progress, and difficult issues. Coalitions require more work than networks, but the benefits can be greater. Before joining or starting a coalition, carefully consider the advantages and disadvantages, as outlined in Table 3.3.

Allies, networks, and coalitions are valuable when they demonstrate their support. As demonstrated by the example from the Dominican Republic (Box 3.13), allies can support your efforts in many ways. The Municipal Health Directorate of Santo Domingo Centro found partners that could deliver health services and build community support. Supportive individuals and organizations are one of your most important resources; cultivate and use them. Think about how they can help you and then specifically request their assistance.

A coalition is a group of several like-minded organizations working together to achieve a common goal.

Box 3.12. Types of coalitions

Permanent: These are incorporated organizations with a staff and board of directors, such as associations, trade unions, or federations.

Temporary: Organizations may come together for a specific goal. Once the goal is achieved, these types of coalitions typically disband.

Formal: Members formally join the coalition, pay dues, and are identified as coalition members.

Informal: There is no official membership, and members may often change, as may issues and tactics.

Multi-issue: Coalitions that work on a number of issues or objectives, although they may address only one issue at a time.

Single-issue: Coalitions are formed around a single issue or objective, which sometimes leads to strange alliances between organizations that oppose each other on other issues.

(adapted from Sharma n.d.)

Table 3.3. Advantages and Disadvantages of Coalitions

Advantages	Disadvantages
▷ Enlarges your base of support	▷ Distracts from your other work
▷ Provides safety for advocacy efforts and protection for members	▷ May require that you compromise your position on issues or tactics
▷ Increases financial and programmatic resources	▷ May require that you give in to more powerful coalition partners
▷ Enhances credibility and influence of advocacy campaign and individual coalition members	▷ You may not receive credit for your work if recognition goes to the coalition as a whole
▷ Helps develop new leadership	▷ All members' credibility may be damaged if the coalition breaks down
▷ Assists in individual and organizational networking	
▷ Broadens your scope of work	

Adapted from Sharma n.d.

Box 3.13. Collaboration to strengthen community support and provide health services in the Dominican Republic

The Municipal Health Directorate of Santo Domingo Centro (SDC) is tasked with providing health services to the more than 1.3 million Dominicans living in its jurisdiction. The SDC's ability to provide health services is constrained by scarce resources and the complex, urban environment in which it operates.

Given these constraints, SDC concluded that, alone, it cannot successfully meet community health needs, and it has developed links with other service providers and health sector actors in its jurisdiction. In 1999, SDC began identifying key audiences that could help encourage community participation, develop favorable public opinion, mobilize financial resources, expand coverage, and enhance quality of specific programs (such as tuberculosis control). To date, SDC has developed a list of approximately 40 organizations, with areas for potential collaboration and expected results for each. SDC hopes to develop targeted partnerships with these organizations to support implementation of its work plan.

Advocacy Activity 2: Policy Communication

Use data as a resource for communicating with stakeholders.

A second significant resource for your advocacy strategy and activities is information. As the saying goes “information is power,” and, as a member of a health reform technical team, you have access to important analyses, data, and other types of information on health reform (see Table 3.4). This information can be used effectively in advocacy campaigns to support reform initiatives. Policy analyses can help shape the debate on health reform, create a more positive image for your reform efforts, and foster an accurate discussion among key stakeholders on health reform issues. Facts and figures make persuasive arguments for reform policies. Finally, information better prepares your audience for both the positive and negative consequences of health

reform policies. For example, in Ecuador, focused research and the targeted presentation of the results helped to build consensus for making equity an important objective of the country's health sector reform (see Box 3.14).

A message is a concise and persuasive statement about your policy that captures what you want to achieve, why you want to achieve it, and how you plan to achieve it.

Develop your message.

Sharing data with your stakeholders is only half the task; to be an effective advocate, you need to communicate this information in a way that helps your target audiences listen, understand, and act. To communicate effectively, you need a clear and consistent message that is tailored to your target audiences' interests. Audience research plays an important role in identifying appropriate messages targeted to various policy audiences. (See Sharma n.d., and Murphy 1994, for more detailed descriptions of policy communication).

The process of developing and delivering policy messages entails several elements (see Box 3.15):

- ▶ Message content and language
- ▶ Source/messenger
- ▶ Format
- ▶ Time and place

Message content and language. A message is a concise and persuasive statement about your policy that captures what you want to achieve, why you want to achieve it, and how you plan to achieve it. The underlying purpose of a message is to create action, and so your message should include the specific actions you would like the audience to take. Messages usually include the following elements:

Box 3.14. Equity as a health sector objective in Ecuador

Remedying inequities in health provision and services is an objective common to many health sector reform agendas. Yet it can be difficult to promote the importance of equity solely by appealing to people's morality and emotions, especially when equity objectives compete for financially scarce resources. In Ecuador, the Ministry of Health incorporated equity into its health sector reform agenda and tasked the Centro de Estudios de Población y Promoción para el Desarrollo Social (CEPAR), a nonprofit research institution, with identifying and documenting the current state of health inequities. CEPAR documented the principle health problems of the population and mapped them spatially to show how they were geographically concentrated in poor, indigenous, rural, and/or suburban areas. This information was used to create targeted materials, which helped build widespread consensus on the need for reform among a variety of audiences.

Table 3.4. Data Sources for Health Sector Reform

Type of data	Routine information	Surveys	Studies
Demographic information and health status	▷ Health information system	▷ Census	▷ Burden of disease
	▷ Annual reports of ministry of health	▷ Demographic Health Survey	▷ Maternal and infant mortality
	▷ Web sites of World Health Organization, World Bank, and other international organizations	▷ Living Standard Measurement Survey	▷ Other specific research and analysis
	▷ Surveillance	▷ Consumption surveys	
	▷ Vital registration	▷ Nutrition surveys	
Health care financing	▷ Government budget	▷ Household surveys	▷ National health accounts
	▷ Expenditures of public financing agencies (MOH, social insurance schemes, etc.)	▷ Provider surveys	▷ Public expenditure reviews
		▷ Labor force participation	
	▷ Pharmaceutical procurement reports		
	▷ Macroeconomic data on prices		
Resource allocation	▷ Budgets and expenditures of public financing agents		▷ National health accounts
			▷ Facility-level costing
	▷ budget tracking systems (where available)	▷	▷ Equity analysis
			▷ Cost-effectiveness analysis
		▷ Public expenditure reviews	
Consumer demand	▷ Health information system	▷ Household surveys	▷ Special studies and analyses (e.g., rapid assessment)
		▷ Focus groups	
Supply of health care services	▷ Health information system	▷ Provider surveys	▷ Health manpower
	▷ Routine annual reports of MOH and other public entities		▷ Facility-level costing studies
	▷ Service delivery statistics		
Institutional and system performance	▷ Laws and regulations governing health sector		▷ Analysis of organizational structure
	▷ Licensing and accreditation procedures		▷ Institutional analysis
Political framework and environment	▷ Observation	▷ Focus groups	▷ Political mapping
	▷ Public statements, position papers	▷ Polls/public opinion surveys	▷ Stakeholder analysis
	▷ Media scans	▷ Baseline surveys	▷ Key informant interviews
	▷ Ministry reports, five-year plans, annual workplans		

Box 3.15. Discussion questions: Developing and delivering policy messages

- ▷ Message content and language: What ideas do you want to convey? What arguments will you use to persuade your audience? What words will you choose to get your message across clearly? Are there words you should not use?
- ▷ Source/Messenger: Who will the audience respond to as credible?
- ▷ Format: How will you deliver your message for maximum impact?
- ▷ Time and Place: When is the best time to deliver the message? Is there a place that will enhance its credibility or give it more political impact?

adapted from Sharma n.d.

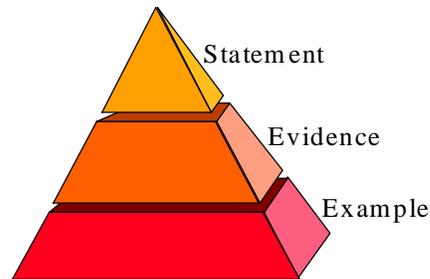
- ▶ **What you want to achieve:** Depending on your audience and how directly the policy concerns them, this may be phrased as your goal, your objective, or a part of your goal or objective.
- ▶ **Why you want to achieve it:** Show the benefits of action versus the negative results of inaction. Tailor the message to your audiences by focusing on their interests and framing the benefits and costs in terms of those interests.
- ▶ **How you propose to achieve it:** Describe your policy strategy. The characteristics of your target audience may dictate how detailed and comprehensive your description should be.
- ▶ **What action you want the audience to take:** Be specific about what you want the target audience to do. Providing details increases the likelihood that your audience will take the desired action.

The Message Content Worksheet (Annex 3-D) can help you craft your policy message. First, identify your target audience and the action you want them to take. Then, fill in the basic components of your message—what, why, and how. After you have written the component pieces of your message on the worksheet, use a clean sheet of paper to reword your message so that it is more effective. There are five characteristics of an effective message (see Murphy 1994):

- ▶ The message is simple.
- ▶ The message is concise.
- ▶ The message uses nontechnical language.
- ▶ The tone and language are consistent with the message.

Practice this first cut at your policy message with your colleagues on the reform team to see if they understand your message. If not, go back to the drawing board until you succeed.

Another approach to develop your policy message is the “SEE” method: Statement, Evidence and Example (see Figure 3.4). The SEE approach is a very persuasive communication method because it puts a “human face” on the issue by telling a story about a person, family, or groups affected by the proposed policy. State your message, provide evidence to back it up, and conclude with a story or analogy. This method frames the reform policy in human terms that the audience can relate to. Box 3.16 includes an example of a policy message that uses the SEE method.

Figure 3.4. The SEE Method**Box 3.16. Decentralizing health services****Policy**

Decentralization of health services: redistribution of power, responsibilities, and resources (human and financial) to the local levels of government.

- ▷ Promote participation by local population in health-related decisions.
- ▷ Address problems and provide needed resources at the levels where the population is affected (i.e., where the problems are occurring).
- ▷ Ensure that health care providers and users are supported by an adequate national regulatory system.

Advocacy objective

Create support and better understanding of the benefits of decentralization among ministry of health leadership.

Target Audience

Minister of health, deputy minister of health, permanent secretary, and other high-level ministry officials

Message

The decentralization of services is a proven mechanism for improving the health of families in our country. Mayor Juan Perez from Santiago de Plano, a town in the rural areas, helped establish a clinic in partnership with MSP. In a very short time, Mayor Perez — along with the clinic staff and the municipal health advisory board — succeeded in linking all services and institutions related to health care provision. At this time, virtually everyone in the community enjoys basic health care coverage, people are using the services appropriately, and there are visible and documented improvements in the overall health status of the town. We should be helping mayors from all towns improve their health care services. We need your support and leadership to facilitate decentralization in all regions.

There are three points to keep in mind while developing your message:

- ▶ Limit the number of points. There should ideally be one point and, at most, three points in your message. Too many points will confuse and possibly overwhelm your target audience.
- ▶ Pretest the messages. Pretest messages with representatives of your target audience to ensure they understand the message. To the extent possible, messages should be tested in their final format. Schedule sufficient time to respond to the feedback you receive and to adapt the materials as necessary.
- ▶ Focus the message on action. Use data carefully and only to support the message, not replace it.

Source/Messenger. Your messenger may be as important, or more important, than the message. He or she must have access to the target audience, be perceived as credible, and be someone to whom the audience responds. The messenger should be articulate, know the issue thoroughly, and be able to present the message clearly. There are basically two types of messengers (Murphy 1994):

- ▶ Change agents: people who are highly respected by the audience but, in general, are not members of the target audience, such as international experts in health reform or political leaders
- ▶ Opinion leaders: prominent, trusted members of the target audience, usually living and working among them.

Use the Selecting a Messenger Worksheet (Annex 3-E) to list all possible messengers for a target audience and assess whether they meet certain criteria that will make them effective: access to target audience, credibility, knowledge, and speaking skills. Rank each potential messenger by these criteria, and determine who fulfills the most. Assess which criteria are more important and select your messenger accordingly. For example, experience has demonstrated that there are few credible and knowledgeable spokespersons who are also good speakers.

Format. The format is the medium through which you deliver your message for maximum impact. Possible message formats include the following (adapted from Sharma n.d.):

- ▶ Formal or informal meetings
- ▶ Informal conversations at social, religious, business, or political gatherings
- ▶ Policy forums
- ▶ Public rallies
- ▶ Executive briefing packets
- ▶ Pamphlets, brochures, or fact sheets
- ▶ Posters and/or flyers in public places
- ▶ Computer and slide presentations
- ▶ Newspaper articles or advertisements
- ▶ Broadcast commentary or coverage
- ▶ Public debate.

The format must be appropriate to your target audience, message, and messenger. As illustrated by the example in Box 3.17, different audiences can be targeted using different formats. For example, high-level audiences do not have much time, so the message formats appropriate for them are brief, to-the-point, easy-to-read, and free of technical jargon. The format should demonstrate the following characteristics (Murphy 1994):

- ▶ **Clarity:** The message, including graphics, should not be too technical or complex.
- ▶ **Brevity:** Keep it short, with an executive summary, highlighted quotes, text boxes, or tables, as appropriate.
- ▶ **Attractiveness:** Good design makes publications and visual aids easier to read and understand.
- ▶ **Accuracy:** Data must be correct, and claims of benefits or costs should be realistic and defensible, because credibility is paramount.
- ▶ **Timing:** Information should be communicated when it is new or most relevant.

Box 3.17. Different formats for national health accounts advocacy in Ecuador

In Ecuador, the Ministry of Health advocated National Health Accounts by 1) holding seminars, 2) developing policy-relevant materials (directly relating NHA to audience's interests), 3) disseminating news bulletins communicating progress, and 4) holding individual meetings. As a result of these activities, all of the sectors are providing information and support for NHA.

Time and Place. The final element in the process of developing and delivering your message is the time and place.

- ▶ **Timing is important.** In many countries breakfast meetings or early morning seminars are common practice and represent acceptable times to deliver messages. You may link the delivery of your message to other political events to draw more attention to your issue. For example, is there an electoral campaign underway that might make policymakers more receptive to your message?
- ▶ **The place where you deliver your message is also as important as timing and should be appropriate for your target audience.** Is there a place to deliver the message that enhances its credibility or gives it more political impact? For example, a press release on equitable access to health care presented at a health post in a poor neighborhood may have more impact than a similar message delivered from a podium in a downtown hotel.

Message Development. Once you have determined the details of your message, the Communications Plan Worksheet (Annex 3-F) helps you bring together all the components of your communication plan, assessing and adjusting the plan as needed. First, list your target audience, followed by the action you want the audience to take. Second, include your concise policy message targeted for this specific audience along with the list of possible messengers, time and place for delivery, and the formats you plan to use.

Advocacy Activity 3: Conflict resolution and negotiation

Conflict resolution and negotiation are skills that are used in every aspect of the health reform process. Negotiation helps you broker expectations while trying to build consensus for your priority health reform policy. Negotiation skills are crucial for directly addressing conflict or crafting agreements that reduce or neutralize your opposition. Finally, you need to negotiate and

bargain “political resources” in exchange for resources necessary to implement health reform policies. The conflict negotiation guidelines (Section 4 of this toolkit) provide more substantial direction and detail on how and when to undertake negotiation.

Step 6: Implement Advocacy Activities

Now it is time to pull together all the products from Steps 1-5 and to identify different activities that can help you achieve your advocacy objectives. Be creative. There is a wide range of advocacy activities from which to choose, including town-hall meetings, one-on-one meetings, caucuses, lobbying, policy seminars, workshops, conferences, and developing materials such as executive briefing packets, positions statements, and press releases. Press conferences, public awareness campaigns, public rallies, networking, building alliances, and participating in coalitions are all advocacy activities. There is no “right” or “wrong” advocacy activity. The key to successful advocacy is to be persistent, to use multiple activities with a consistent message, and to be innovative and creative in selecting activities to reach your target audiences. Boxes 3.18 and 3.19 highlight two of the most common advocacy activities for effectively communicating with different target audiences, mass media and lobbying.

Box 3.18. Using mass media

Print (newspapers and magazines) and broadcast (television and radio) media are key channels of communication. The media enable you to influence the greatest number of people in the shortest time. Use mass media when your target audience is the public. The media are useful for educating people about proposed reforms, changing attitudes toward reforms, recruiting supporters, and raising money. Media also can be helpful when you want your secondary audience, the public, to influence decision-makers.

To effectively use the media, you must understand the different ways media sources and specific reporters and journalists cover health sector and health policy issues. What are the patterns of media coverage? Who is interested in health-related stories? What appear to be their particular biases or preferences? You can discover this information by monitoring and tracking the media's coverage of health issues. Understanding the media's interest in health will help you improve the timing of your communications efforts and present your message in a way the media consider newsworthy.

Use these and other media tools encourage or facilitate the media's coverage of your issues:

- ▷ Press releases
- ▷ Press conferences
- ▷ Letters to the editor
- ▷ Editorials
- ▷ Newspaper and magazine articles
- ▷ Television and radio appearances
- ▷ Televised or printed interviews

For more detailed advice on preparing specific communications pieces, see IPPF 1995 and Center for Development and Population Activities 1995.

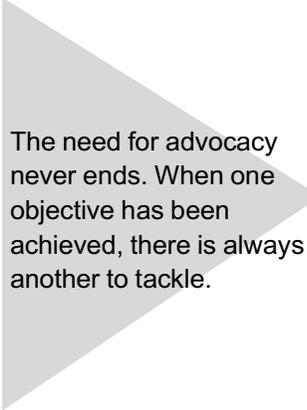
Box 3.19. Lobbying

Lobbying is a special type of communication involving policymakers. You approach policymakers through interpersonal channels. Possible formats include formal or informal meetings, briefings, letters, or phone calls. Because of the intimate nature of the communication, audience research is especially important. You will need to understand your policymakers' positions, interests, and issues in order to appropriately target your messages. Selecting credible messengers is also critically important. Here are some additional tips for effective lobbying:

- ▷ Understand the decision-making process. This will help you target the right decision-maker and time your lobbying efforts for maximum effect.
- ▷ Help educate your audience about your policy. Become an information resource and be willing to help out.
- ▷ Develop a relationship with your audience. Inform policymakers about your progress and efforts, and include them in activities where appropriate.
- ▷ Endeavor to keep your issue on policymakers' agenda. Communicate with them frequently and provide them with helpful information.
- ▷ Engage and be willing to assist the policymaker's staff. Staff members are influential, and you should consider them a key secondary audience.

For more detailed advice on lobbying, refer to IPPF 1995 and Center for Development and Population Activities 1995.

Developing an Advocacy Strategy: Component III— Looking Ahead



The need for advocacy never ends. When one objective has been achieved, there is always another to tackle.

Avoid getting caught up in the details of designing and implementing your advocacy strategies and losing sight of your long-term goal: sustaining support to implement your reform policy. To keep focused on your ultimate goal, you need to look beyond your advocacy strategies and keep your reform policy in sight. To succeed, you will need to constantly assess and adjust your advocacy strategy. Monitoring and evaluation are also essential for well-targeted and focused advocacy.

This component defines the difference between monitoring and evaluation, helps you develop a monitoring and evaluation framework, and provides some questions to help you assess the progress and impact of your advocacy activities.

Step 7: Evaluate and Adjust Strategy

A sound monitoring and evaluation component helps you track the success of your advocacy strategy, build credibility, and motivate your team members to sustain the momentum. If you achieve your advocacy objective and/or succeed in bringing about the changes implied in your reform policy, monitoring and evaluation will help you demonstrate a clear connection between your activities and objectives and the policy outcome.

Monitoring Your Progress

Monitoring is the process of routinely gathering information on all aspects of an advocacy campaign and using the information to manage decision-making regarding your strategy (adapted from Boyd et al. 1999). It helps you identify areas for improvement, make mid-course corrections, and revise your objective or strategy as needed. You must be creative and persistent: if one activity does not work, try another. If you decide to make adjustments, be sure that all the elements of your strategy remain cohesive, with realistic timeframes and appropriate people assigned responsibilities. To effectively monitor your progress, build into your advocacy strategy systems for collecting data and information on key activities as well as systems for summarizing, analyzing, and using that information to make decisions and take corrective action if necessary.

Gather your colleagues together again to develop a monitoring and evaluation framework. To develop your monitoring plan for your advocacy strategy, answer the following questions:

- ▶ What should we monitor? (Box 3.20 suggests questions to guide your analysis.)
- ▶ Who will be responsible for collecting and analyzing the information?
- ▶ When will the monitoring take place?
- ▶ What are the measurable indicators and their sources of information?
- ▶ How will we gather the necessary information?
- ▶ How will we present the information?
- ▶ Based on the information, what decisions or actions need to be taken to improve the performance of our advocacy strategy?

Evaluating Your Results

Evaluation helps you assess the impact and results of your advocacy strategy. It is not enough to know if your advocacy strategy has been well-planned, well-timed, and well-implemented. It is also important to know whether your activities have been effective, that is, if they have brought about the desired policy change. Evaluation involves a systematic, objective analysis of your advocacy strategy's performance (adapted from Boyd et al. 1999). Evaluate your strategy to:

- ▶ Determine if you have successfully achieved your policy goal and advocacy objectives

Box 3.20. Discussion questions: Monitoring your progress**Objective:**

- ▷ What progress did you make toward achieving your objective?
- ▷ Is your objective still achievable?
- ▷ Why does it make sense to continue to focus your advocacy efforts on that objective, or why might you select another?

Audience:

- ▷ Did you reach your target audience?
- ▷ Were you able to influence their actions?
- ▷ Do they have the influence you anticipated?
- ▷ Was your information on target audiences accurate?
- ▷ Was the information sufficient?

Advocacy Activity 1: Allies, networks, and coalitions

- ▷ Are your existing allies, networks, and coalitions sufficient?
- ▷ How have your alliances helped you expand your base of support?
- ▷ Have you been able to build your network and/or coalitions?
- ▷ Have coalitions focused on your most important issues?
- ▷ Has the benefit of building your constituency been worth the effort?

Advocacy Activity 2: Policy Communications

- ▷ Messages: Were the messages appropriate for the different audiences as indicated by audience research? Were the messages concise, easy to understand, and action oriented?
- ▷ Messenger: Did you select good messengers? Did your target audience consider them credible? Did the messengers succeed in delivering the message? Were they able to influence the target audience?
- ▷ Channel: Did you use the best channels available to reach your audience? Did you use different channels for different audiences and messages?
- ▷ Format: Was the format appropriate for the audience? Were the products attractive and easy to understand? Did you pretest the messages and formats with members of the target audiences?
- ▷ Timing: Was the timing right? Were messages delivered when the target audience had time and opportunity to act? Did the timing enable messages to link into other related activities? Was the message repeated often enough to have lasting impact?

- ▶ Draw lessons learned from your experience to improve the effectiveness of your current and future advocacy strategies
- ▶ Demonstrate success to your team members or others involved in your advocacy strategy to maintain their motivation to continue advocating for health reform.

To develop an evaluation framework, gather your colleagues to answer the following questions:

- ▶ What should we evaluate? (See Box 3.21)
- ▶ Who will be responsible for collecting and analyzing the information?
- ▶ What will be the measurable indicators and their sources of information?
- ▶ When will the evaluation take place?
- ▶ How will we gather the necessary information?
- ▶ How will we present the information?
- ▶ Based on the information, what decisions or actions need to be taken to improve the results of our advocacy strategy?

Conclusion

Health sector reform is typically complex and is often constrained by political interests, limited resources, and rigid organizations. Advocacy helps you respond to these challenges by shaping the policy debate, building support for reforms, and motivating action. Your advocacy strategy can build a constituency for health reforms and mobilize decision-makers and other stakeholders to act on behalf of your health sector objectives.

Your advocacy efforts to promote and sustain health sector reforms will benefit from the strategic approach outlined in these guidelines:

- ▶ Looking out forces you to recognize your environment and the opportunities and constraints you face. You are pushed to articulate specific advocacy objectives that will inspire and guide your advocacy activities. You will understand the process by which policies are made and implemented and identify the best places to intervene to influence health reform outcomes. You will identify the key players and their interests, in order to develop more targeted and persuasive advocacy messages and activities. By looking out, you will better understand your policy environment and be able to determine what is feasible within that context.

- ▶ Looking in enables you to assess where you are. You can gauge what resources are available to you—what allies have influence, what information you control, what financing or technical expertise you command. When you fully understand your advocacy objectives and accurately gauge your available resources, you can select the most appropriate advocacy activities. These may include developing alliances, networks, and coalitions; communicating with policymakers and other stakeholders; and negotiating conflicts. By looking in, you select advocacy activities that are feasible and therefore can realistically move you toward your advocacy objectives.
- ▶ Looking ahead helps you train your sights on your ultimate goal and helps you see the road that leads there. This is the opportunity to apply your resources, implement your advocacy activities, and create desired changes in behaviors and opinions. Monitoring your progress helps you determine whether you are heading in the right direction. Evaluating the results helps you recognize when you have arrived. Using the information gathered during your monitoring and evaluation helps you adapt your strategy and/or objectives and be as effective as possible in achieving your health sector reforms.

Box 3.21. Discussion questions: Evaluating your results

To determine what your team should evaluate, refer to your:

- ▷ reform policy
- ▷ advocacy objectives
- ▷ target audiences
- ▷ advocacy strategies
- ▷ alliances, networks, coalitions
- ▷ policy communication
- ▷ conflict resolution and negotiation
- ▷ advocacy activities.

Then develop questions for each step of the process to develop an advocacy strategy. For example, the evaluation questions for your advocacy objective could be:

- ▷ Did you achieve your advocacy objective?
- ▷ If you achieved all or part of your objective, how did it contribute toward your policy and goal?
- ▷ Your own assessment may not be completely objective. You should consult with your allies and colleagues to obtain their feedback as well.

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Annex 3-A

Audience Identification Worksheet

This worksheet can help you list and organize your target audiences. For each objective, list everyone with a key role in making decisions or implementing change under "primary audience." For each primary audience, list everyone who might influence the primary audience's decisions.

Advocacy Objective:	
Primary Audience "Key actors"	Secondary Audiences "Influentials" (including opposition)
1.	1. 2. 3. 4.
2.	1. 2. 3. 4.
3.	1. 2. 3. 4.
4.	1. 2. 3. 4.

Annex 3-B

Audience Knowledge, Position, and Interests Worksheet

This worksheet can help you organize information about your audiences. For each target audience listed in the left-hand column, describe what you know about their knowledge, position, and interests in the appropriate cells. (See reverse side.)

Objective:				
Audience	Audience knowledge about issue/objective What is their level of knowledge?	Audience position and attitudes about issue/objective Are they in favor or opposed to the issue/objective? What do they think about it?	Audience interest in the issue/objective Why do they care about this issue/objective? How does it affect them?	Other issues that the audience cares about (may be unrelated to issue/objective) What other issues are important to them?

Annex 3-C

Allies and Opposition Matrix

This matrix can help you visualize your supporters and opposition. When you develop a strategy to increase support, you will want to consider the objective, target audience, other supporters, and opposition in deciding where to focus your efforts.

Core Supporters	Potential Allies	Opposition

Annex 3-D

Message Content Worksheet

When communicating with your target audience, you must be clear about what you are asking of them and why. In completing this worksheet, be sure that you present what you want to achieve and why as relevant to your audience's positions and interests. How you propose to achieve your goal should explain how the audience's role contributes to what you want to achieve.

Audience:	
Action you want the audience to take	
What you want to achieve	
Why you want to achieve it	
How you propose to achieve it	

Annex 3-E

Selecting a Messenger Worksheet

Use this worksheet to assess a possible messenger against certain criteria. For example, list all the means the messenger has to access your audience. For the messenger's credibility, knowledge, and presentation ability, note whether it is high, medium, or low. The more information you include, the easier it will be to select among the candidates. (See reverse side.)

Target audience:				
Possible messengers	Criteria for selecting a messenger			
	Access to audience	Credibility with audience	Knowledge of issue	Ability to clearly present issue
1.				
2.				
3.				
4.				
5.				

Annex 3-F

Communications Plan Worksheet

This worksheet brings together all the components of your communications plan for each objective you have established. Having it all on one page can help you assess important factors such as whether various activities complement or compete with one another, whether you have adequate financial and personnel resources, whether all your resources are being effectively used, and what would be a realistic timeframe for each activity. (See reverse side.)

Objective:				
Target audience	Message content	Messenger	Channel	Format