# Advocacy for Immunization

How to generate and maintain support for vaccination programs





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# Introduction

### WHY IMMUNIZATION?

Immunization saves 3 million lives each year. In 1974, only five percent of the world's children were immunized against the six key vaccine-preventable diseases of childhood (polio, diphtheria, pertussis, measles, tetanus, and tuberculosis). In 1998, nearly 74 percent of children around the world were immunized against these diseases. This improvement in immunization coverage has been the single greatest public health achievement of all time.

But the disparity between immunization rates in developing versus developed countries is vast. New vaccines available in the United States and Europe are still not available in many developing countries. About 3 million people still die each year from vaccine-preventable diseases. At least 30 million children still do not have access to basic immunization services in sub-Saharan Africa, Asia, and Latin America. This means that every ten seconds, someone dies from a vaccine-preventable disease.

### The world is focusing on immunization

Advocates at the global level are bringing immunization into the spotlight among international health partners. In 1999, key multinational organizations—including the World Health Organization (WHO), the World Bank, United Nations Children's Fund (UNICEF), the Rockefeller Foundation, International Federation of Pharmaceutical Manufacturers Association (IFPMA), and the Bill and Melinda Gates Children's Vaccine Program (CVP) at PATH (Program for Appropriate Technology in Health)—agreed to work together to improve the introduction and delivery of vaccines in developing countries. This network, called the Global Alliance for Vaccines and Immunization (GAVI), and a new funding mechanism called the Global Fund for Children's Vaccines have begun to chart a new course for worldwide immunization.

#### **GAVI** website:

www.VaccineAlliance.org

#### **Global Fund website:**

www.VaccineAlliance.org/ reference/globalfund.html

## Overall health systems benefit from stronger immunization programs

Throughout the next several years, regional, national, and local advocates have an opportunity to truly make a difference to health systems. Immunization is the most cost-effective health intervention known to mankind. When countries can successfully provide vaccines to their children, they are already making an immense difference to the health of their citizens. But immunization alone is not sufficient—all areas of health care deserve attention and resources. A successful immunization program can contribute to stronger overall health by providing a structural foundation for national health systems. By taking advantage of the support currently offered in routine immunization and the introduction of new vaccines, governments can use immunization models to improve management, planning, forecasting, evaluation, inventory control, cold-chain systems, community

outreach, provider training, and patient outreach. These management and skill-building tools can positively impact overall health services and make resources available for other areas of health care.

### INTRODUCTION TO ADVOCACY

Advocacy might be best characterized as any effort to influence policy and decision makers, to fight for social change, to transform public perceptions and attitudes, to modify behaviors, or to mobilize human and financial resources. In your efforts to improve immunization and child health, advocacy might encompass all these definitions in one form or another.

### Characteristics of an Advocate<sup>1</sup>

- · Researches the issue.
- Believes in the issue.
- Gives real-life examples.
- · Plans for small changes.
- Is passionate and persistent.
- Takes advantage of opportunities.
- Is a good negotiator.
- · Is hard to intimidate.
- Stays focused on the issues.

Many advocacy activities are common to almost every job in health and public services: meeting with a community leader, meeting with your boss, talking to parents and children, training health workers, writing a letter to the finance ministry, or discussing future funding with a donor. This handbook provides a framework for thinking strategically about advocacy and creating new opportunities to engage decision makers, the media, government, communities, and families in the effort to improve immunization services.

#### Who can be an advocate?

Anyone can be an advocate—the only requirement is to actively support a cause. Advocates for immunization can include health-or child-focused nongovernmental organizations (NGOs), international and regional agencies, government officials, researchers, health providers, private business people, parents, young people, faith groups, and community members.

### Does advocacy work?

Yes! There are many examples of successful advocacy efforts—some of which have shown dramatic results. Remember that all advocacy efforts require careful planning, commitment, resources, and energy. When you are able and willing to sustain your advocacy efforts over the long term, meaningful change can occur.

6 Introduction

# Preparation

# Step 1: GATHERING INFORMATION

Quality information is the foundation of any advocacy effort. Without proven facts, reliable data, common sense, and good science behind your effort, you may lose credibility and the trust of key decision makers. Gathering information goes far beyond summarizing facts and figures about immunization. You will also need to gather information on the people you are trying to influence and determine what, when, why, and how things need to change.

### **Assemble facts and figures**

Gather local facts and figures related to immunization. People respond best to issues that affect them personally. If you find a compelling national or global statistic, compare it to a corresponding local or regional statistic. By making the issue as personal and local as possible, you will engage a greater number of people.

Data on immunization rates in your country should be readily available, even on the district level. Governments report statistics every year to WHO and UNICEF, and the health ministry should be able to provide additional information. Talk to local physicians and health experts to learn more about disease burden, average immunization costs per person, and the cost of treating diseases in your area. Basic demographic information for

your area—data such as population figures, average life expectancy, education levels, and number of children per family—is available from the United Nations Population Division website (http://www.undp.org/popin/).\*

Think about challenges that are specific to your country, region, or district. Have you experienced recent outbreaks of measles? Have anti-vaccine articles appeared in the local press? Is your country focusing on the last phases of polio eradication? Your strategies must consider local priorities and issues in order to be most beneficial and effective.

### Gather reliable data

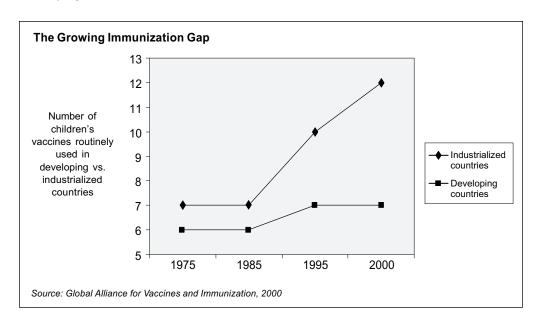
Always make sure your information comes from a reputable source. Remember to cite your sources when presenting data.

### **Create charts and graphs**

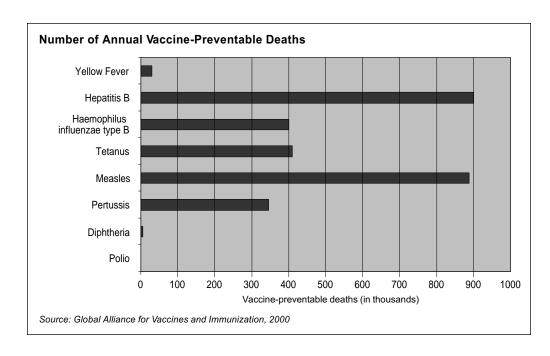
Whenever possible, create charts and graphs that show your local immunization rates compared to regional, national, or global averages. Visual depictions of facts and figures are much more powerful and easier to grasp than written figures.

<sup>\*</sup> Those without access to the internet may request information from the United Nations Population Division by telephone (212) 963 2147, or by mail: Population Division, United Nations, 2 United Nations Plaza, Room DC2-1950, New York, NY 10017, U.S.A.

Example: The "Growing Immunization Gap" chart compares vaccine availability in developing versus industrialized countries.



The following graph shows the annual number of deaths attributable to each vaccine-preventable disease. Rather than simply listing figures, it makes a bigger impact to visually represent the numbers. Based on this graph, it is very easy to identify the most deadly diseases.



### **Analyze policies and practices**

Learn what policies affect immunization, whether they are properly implemented, who makes the policy decisions, which organizations are involved in these issues, and how you might gain access to influential people and policymakers. By learning more about the political constraints around immunization, you can be more persuasive and present better solutions to policymakers.

### **Analyze the media**

Libraries and the internet are good places to look for television, magazine, radio, and newspaper stories related to children's health, immunization, and disease outbreaks. Find out what the media thinks about these issues and how the media portrays immunization to the public. If your program is locally based, focus on local media outlets. Likewise, if your effort is national in scope, you will need to search more broadly for local, regional, and national stories.

If you can relate immunization to a subject people already care about, you are more likely to attract the media's attention. Learn which subjects are currently popular in the media, such as AIDS/HIV issues, education, or economic development, and find ways to relate these issues to immunization.

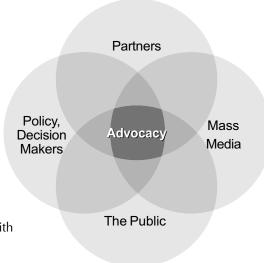
### **Define your audiences**

To understand the knowledge, attitudes, and practices of your audience, you will want to do some audience research. Audience research can help you focus on the organizations and individuals who are key to your success, rather than trying to influence all decision makers and all sectors of society. During the audience research phase, you can begin to narrow broad audience categories into specific groups with shared characteristics.

In immunization advocacy work, you will generally reach out to four distinct audience categories:

- Potential partners: aid organizations, government agencies, nongovernmental organizations, researchers, and others who have a stake in immunization
- Policy and decision makers who influence immunization
- The general public
- Mass media

These target audiences, though diverse, interact with and influence one another. A successful advocacy campaign will work with each audience simultaneously to achieve maximum results.



Following is a brief description of each audience category and suggestions on how you might learn more about them during this research and information-gathering phase. Later in the handbook, you will find whole sections dedicated to each audience with suggestions on how to reach out to them and advocate for change.

#### Potential partners

There are many organizations, departments, groups, and individuals who share your interest in immunization and child health. Although you may think of them as people who are already "on your side," they should be approached and handled as systematically and professionally as your other audiences. Your partners may not need convincing that immunization is a priority, but they will benefit from knowing what each partner is doing. When partners are regularly informed about the activities of similar groups, they are more likely to believe in the effort and commit to its success.

#### **Potential Adversaries**

As with any issue, there will be people who disagree with your goals. Adversaries might include anti-vaccination groups or others who are suspicious or fearful of vaccine introduction. These groups are not necessarily an audience for your outreach, but they should be part of your research.

Take time to learn more about both potential supporters and adversaries. Find out what these individuals and organizations believe in, what they are doing, who supports their efforts, and what strengths or weaknesses exist within their organization. Maintain a list of all organizations interested in immunization, health, or child issues, and stay informed of their work; they might become powerful allies for your effort. In the case of adversaries, you will want to be fully aware of their positions on issues so you can address those issues when reporters, decision makers, or others ask about them.

More information about working with partners and building coalitions is available in Step 4: Building a Strong Coalition.

#### Key policy and decision makers

Policymakers, key decision makers, and their staff can be powerful catalysts for change. A significant share of your advocacy effort will likely focus on reaching decision makers and the people who

influence them. Be careful not to narrow your definition of policymakers to government and ministry officials or donor agencies. Important decision makers also exist in hospitals, research institutions, schools, businesses, NGOs, and other agencies that have the power to positively or negatively affect immunization programs in your area.

During the audience-research phase, learn who the key decision makers are in your area. Find out what decisions they've made in the past, what programs they actively support, and how they might positively or negatively impact immunization services through their decisions. Create a list of key decision makers, their contact information, names of staff members or gatekeepers, and summaries of their positions on health issues.

More information about reaching out to important decision makers is available in Step 5: Engaging Policy and Decision Makers.

### The general public

The general public is an increasingly relevant and forceful constituency for social and political change. Ultimately, the public is the beneficiary of better immunization programs; therefore, it is useful to direct advocacy messages to them.

During your audience-research phase, you can begin narrowing this audience to a more manageable subcategory. After all, a general message about immunization will not resonate with everyone who hears it. Think about the people who might have a direct, personal interest in immunization, such as first-time parents and immunization providers. Target your general messages to them.

Once you have identified the individuals and groups in your target audience, you can analyze their beliefs, knowledge, and practices regarding immunization.

- What do they know about diseases and vaccines?
- What has been their experience with the health system?
- How do they feel about taking their own child to a clinic to be immunized?
- What questions do they have regarding immunization?
- What do they think is preventing people from getting their children vaccinated?
- Are they aware of risks associated with vaccines?
- Are they familiar with the diseases that can be prevented by vaccines?
- Do they understand the importance of vaccinating all children?

This research will also help you learn the best way of approaching and influencing your audience's behavior. Following are several commonly-used tools for research among general audiences:

- **Observation and research.** One of the easiest and cheapest ways to get information is through observation and research. It includes talking formally and informally with people who represent your audience; reading documents and reports written by or for the audience; and attending meetings, events, or gatherings where your audience is present.
- Surveys/polls. Surveys and polls are appropriate information-gathering tools for studying larger audiences, such as "women," "youth," or "doctors." Conducting surveys or polls can be expensive and time consuming; find out if there are existing data you can use. Many organizations, media outlets, advertising or public-relations agencies, and governments conduct research on these groups and might be willing to sell their results to you at reduced cost.
- Focus groups and interviews. Qualitative research with small groups or individuals from
  your target audience can be useful to test attitudes, behaviors, and reactions to
  messages. For more information on conducting focus groups and interviews, please
  refer to the *Immunization & Child Health Materials Development Guide*, available in
  the GAVI Advocacy Resource Kit or via the internet (www.ChildrensVaccines.org).

More information about communicating to the public is available in Step 6: Informing and Involving the Public.

### Effective Communication Channels

Advocates working on the polio eradication effort in the Gambia, Nigeria, and Senegal reported that the most effective communication channels for reaching the public included interpersonal (person-toperson) communication and dramas, debates, and educational programs on radio or television. They also found that their best experience in sensitizing people to polio issues was to bring along polio victims to their meetings. If this was not possible, they brought pictures instead. They emphasized that the least effective channel in their area was print media.

More information on communication channels is available on Page 31.

#### Mass media

Mass media is a powerful tool for influencing public opinion and educating important audiences. Its broad reach offers you an opportunity to talk to large audiences and explain your position on important immunization issues. But members of the media should also be viewed as an audience in their own right, not just as a tool to reach the wider public. Think about what you can do to make their jobs easier. Providing consistently reliable information, fact sheets, good stories about real people in the community, and news about upcoming events such as national immunization days or safe injection campaigns will help you build strong relationships that can be mutually beneficial over time.

Invest some time researching various media outlets in your area. Assess which outlets are most popular and what kinds of reputations they have. Be sure to include television and radio stations, magazines, daily newspapers, and weekly papers in your research.

- Which have the widest reach?
- Which are popular among your target audiences?
- What specific outlets (print, television, radio) might be good sources of information for your audiences?

Select a few key newspapers, radio stations, and television news programs that may be interested in working with you to raise awareness about immunization-related topics. Then, find out which reporters cover immunization, child, or health topics. Read stories they have covered in the past to discover their interests and biases.

More information about communicating with the media is available in Step 7: Working with Mass Media.

### Step 2: BUILDING A PLAN

Once you feel that you have a very good understanding of current immunization practices, behaviors, and policies in your area, it is time to analyze the information you gathered, define existing problems or challenges, and choose which problems you can realistically address through advocacy. Then you can propose solutions and decide how you will take action.

### **Develop advocacy objectives**

Advocacy objectives define what you are trying to accomplish. Rather than promoting general cries for change, objectives should be specific and measurable.

Your specific advocacy objectives for immunization may depend greatly on the situation in your area. We encourage you to develop only as many objectives as you can realistically manage. Small successes can give your organization the enthusiasm, credibility, and resources to realize more ambitious objectives.

Examples of advocacy objectives that could take place at a national or community level are listed below.

- Within the year, 30 church and community groups will formally endorse our effort and agree to talk to their communities about the need for immunization.
- Each year for five years, the Ministry of Finance will increase funds by 15 percent for improving immunization services in rural areas.
- Within three years, three of the nation's eight medical schools will integrate the topic of injection safety into their core curricula for all medical students.
- Over the next two years, demand from patients for newly-available vaccines will increase by 25 percent.

# What is an advocacy objective?

An advocacy objective describes how you want to change the policies, opinions, or positions of governments, organizations, or individuals.

Objectives support long-term goals for immunization by specifically stating what needs to change and who will make the change, by how much, and when.

#### Assess available resources

When deciding how to organize an advocacy effort for immunization, it is important to consider the many factors that may influence the success of your effort: the political climate, the amount of quality data available on immunization, money available to support advocacy, and your organizational capacity.

### Criteria for advocacy objectives<sup>2</sup>

Before finalizing your objectives, see if they meet the criteria below. Most objectives will not meet all the criteria, but understanding how and why they do not will help you anticipate challenges you may encounter along the way.

- Do qualitative or quantitative data exist to show that achieving the objective will improve the situation?
- Is the objective achievable? Even with opposition?
- Will the objective gain the support of many people?
- Will you be able to raise money or other resources to support your work on the objective?
- Can you clearly identify key decision makers? What are their names or positions?
- Is the objective easy to explain in just one or two sentences?
- Can the objective be achieved in a realistic time frame?
- Do you have the necessary alliances with key individuals or organizations to reach your objective? How will the objective help build new alliances with other agencies, NGOs, leaders, or stakeholders?
- Will the objective inspire more people to get involved?

Questions to ask your own organization or agency might include:

- Are there staff members who can focus on advocacy?
- What materials on immunization already exist or need to be created?
- Who is available to speak publicly on behalf of immunization?
- What financial resources are available for advocacy efforts?
- What other organizations or government agencies should be involved? Do they have resources they can provide toward an advocacy effort?
- Who has relationships with key reporters and is willing to take part in media outreach activities?

### Determine scope, timeline, and budget for your advocacy effort

As mentioned throughout this handbook, advocacy efforts are most effective when they are not singular activities but part of a broader plan that can continue over time, adapting to changing situations and challenges. Decide how extensive your advocacy effort will be, what activities and objectives you can realistically implement, and when to reassess. If your effort will be long term, consider ways to regularly monitor and measure progress. For more information on this topic, please see *Step 8: Monitoring and Evaluating Your Work*.

Decide on the scope of your project, create a timeline, and calculate the cost of implementing

your effort. A more detailed budget with information on salaries, consultant fees, graphic-design fees, production costs, printing, mailing fees, distribution, and travel costs should be developed for each year. A detailed budget will help your government allocate funds toward your effort or help you raise funds from outside sources in the absence of government support.

Look into whether your advocacy and communication strategies can be integrated directly into your country's plan for immunization or its overall health-system plan, whichever is more appropriate.

# Step 3: CREATING MESSAGES AND MATERIALS

Every day, we receive hundreds of messages through conversations, advertisements, and news programs. People have access to more information today than at any time in history, but they have less time to read, listen, and absorb. Policymakers and key decision makers also lack time and energy to thoughtfully read and review all the issues before them. You can make their jobs easier by distilling your information into concise, simple messages. Provide visual examples to illustrate the main points, and clearly state your proposed solutions.

### **Create compelling messages**

A message is a short phrase or sentence that summarizes your story in simple and understandable terms. It is the "take-away" information that is repeated to colleagues, friends, and other interested parties. A good message is usually short, compelling, and interesting.

Following are some examples of general immunization messages used on a global level:1

- A child in the developing world is ten times more likely to die of a vaccine-preventable disease than a child in the industrialized world.
- Immunization is the most cost-effective health intervention in the world. It prevents death and disability from infectious diseases at a fraction of the cost of treatment.
- Every child should be immunized with all the vaccines he or she needs.
- Immunization helps alleviate poverty.
- Pregnant women in developing countries should be immunized to protect their babies against neonatal tetanus. Each year, 600,000 newborn babies die of neonatal tetanus.
- More than 95 percent of babies born in China are vaccinated. But in Africa, only 50
  percent of babies born are vaccinated. In many countries, the percentage is even lower.
- Measles kills nearly one million children each year—more than any other vaccinepreventable disease. Five hundred thousand of these deaths are in Africa.

## Tailor messages and materials to the informational needs of various audiences

While the above global messages about immunization may work for national policymakers or the general public, messages can be more powerful when they focus on local issues. Below is a chart that outlines the informational needs of various audiences and how messages might be tailored to meet their needs.

### Targeting Advocacy Messages to Different Audiences<sup>1</sup>

Audience	Potential Concerns	Possible Messages
Decision Makers/Politicians  President/Prime Minister  Minister of Health  Minister of Planning  Minister of Finance  Local administration  Parliament and Congress	<ul> <li>Budgetary implications</li> <li>Public opinion</li> <li>Opportunity to show leadership and take credit for success</li> <li>Liabilities of inaction</li> </ul>	<ul> <li>Immunization is the most cost-effective health intervention.</li> <li>Immunization is the right of every child.</li> <li>The immunization program is establishing access to children who have never been reached before.</li> <li>New vaccines are available that can save thousands of young lives.</li> </ul>
<ul> <li>Donors</li> <li>Foundations</li> <li>Bilateral agencies (e.g., SIDA, USAID, DFID, JICA)</li> <li>Multilateral agencies (e.g., World Bank)</li> </ul>	<ul> <li>Ability to produce and document results</li> <li>Cost-effectiveness of an intervention</li> <li>Feasibility of integrating strategy with existing initiatives</li> <li>Sustainability of project</li> <li>Potential domestic benefits of foreign aid</li> </ul>	ulousalius of young lives.
Journalists  Health reporters Foreign correspondents Editors Feature writers Columnists Economics/labor reporters Women's issues reporters	<ul> <li>News value and timing</li> <li>Potential controversy</li> <li>Has the story been told before?</li> <li>Are there good visuals and spokespersons?</li> </ul>	<ul> <li>Key messages will depend on the outlet. For example, highlight the economic benefits for a financial publication.</li> <li>Feature stories on the success of immunization and the people who deliver and benefit from it.</li> <li>News stories on outbreaks, trends, National Immunization Days, cease-fires.</li> <li>Human interest stories about volunteers delivering vaccine.</li> </ul>
NGOs Relief organizations Development organizations Human rights organizations Children's organizations Practitioners' organizations	<ul> <li>Donor and membership support</li> <li>Impact on beneficiaries</li> <li>How message fits with mission statement</li> <li>Common agendas and shared visions</li> <li>Potential to play a unique role</li> </ul>	<ul> <li>Immunization depends on mobilizing communities.</li> <li>Your constituents can help.</li> <li>Help build local infrastructure to improve the health of your community.</li> </ul>
Health Practitioners  Public- and private-sector health workers  Medical associations Research, academic institutions	<ul> <li>Feasibility of eradication</li> <li>Opportunities to use new research and innovations</li> <li>Financial and legal implications for one's work</li> </ul>	<ul> <li>Immunization works.</li> <li>Immunization helps build health infrastructure, putting surveillance systems in place and training health staff.</li> </ul>
Corporations and Industry  Multinationals  Local businesses  Labor organizations	<ul><li>Impact on workforce</li><li>Impact on markets</li><li>Cause-related marketing potential</li></ul>	<ul> <li>Immunization is a good and measurable social investment.</li> <li>Your investment can help the local community.</li> <li>Helping tackle problems in poor countries can make good business sense.</li> </ul>
General Public Issues popular with the public find their way onto the political agenda, and the ground swell of public opinion can have a strong influence on governments.	<ul> <li>Personal level of risk</li> <li>Response of government/health authorities to protect the public</li> <li>A moral duty to help others</li> </ul>	Immunization is a priority in countries where you work.     The savings from high immunization coverage can be used for other purposes.

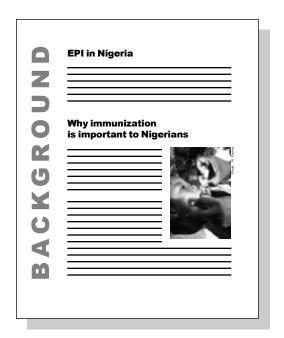
### **Develop educational materials**

Video, radio, and printed materials are the foundation of modern communication. Since they are often shared with others, good materials provide a means for transmitting standardized information to diverse audiences. They also reinforce messages and provide

easy access to detailed information. For more information on developing materials, please refer to the *Immunization & Child Health Materials Development Guide*, available in the GAVI Advocacy Resource Kit or via the internet (www.ChildrensVaccines.org).

Below are a few essential materials to develop or assemble as part of an advocacy effort. Additional materials are often useful, so do not limit yourself to this list.

- Issue background sheet: Create a simple, onepage overview of your immunization program goals and objectives, challenges, and solutions. Break up the text by highlighting quotes or key phrases and inserting visuals (photos, drawings, charts, or graphs). Background sheets are excellent introductory materials and can be handed to anyone who asks about the issue.
- Question and answer sheet: Anticipate difficult questions people may ask (or are afraid to ask), and answer them. The question and answer sheet offers you a chance to end myths and preempt criticism before it becomes a serious obstacle. You may also want to create an internal question and answer sheet for spokespeople.
- Facts about immunization: Assemble a onepage list of compelling facts, including immunization rates, economic analyses of immunization, disease rates, or comparison studies. Choose your most compelling facts for this sheet—the facts will draw people in and encourage them to read more.
- Photos: Gather photos, especially those that remind people of the many children and families who are better off, thanks to immunization. Photos put a



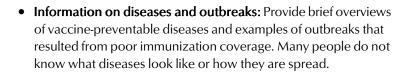
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human face on the issue and give readers something to which they can relate. Because quality photos can be expensive and difficult to acquire, the GAVI Electronic Resource Kit CDROM includes photos you may use for immunization materials

(instructions for use are available on the CDROM).

- Charts and graphs: Create charts and graphs to help people understand complex concepts: immunization coverage, financial costs, disease-burden rates, etc.
- Physical samples: Whenever possible, let your audience experience the subject you are discussing—bring a vaccine vial, an autodisable syringe, or a sample "cold box" used to keep vaccines cool when transported; visit immunization sessions; or bring people to a pediatric ward in a local hospital.
- Immunization success stories: Write short, half-page stories to illustrate the success of immunization programs or the devastation that results from poor immunization coverage. Remember to include photos with your stories.



- Brochures: If appropriate, develop a brochure to help people quickly understand the goal of the effort, who is behind it, and how it will be implemented.
- **Presentations:** Develop a video, slide, PowerPoint, or overhead presentation to help you explain your advocacy objectives during meetings, events, or gatherings.
- News clippings: Assemble relevant newspaper, radio, and television reports on immunization or outbreaks of disease. When people see that the media is interested in an issue, they often feel the issue is important.

- **Posters and promotional materials:** Develop posters, buttons, paintings, stickers, hats, and other materials to help larger audiences remember your messages.
- Public service announcements (PSAs): Create radio or television PSAs to help you communicate to the general public the value of improving immunization.
- Video and radio programs: Create a short video or radio program that discusses immunization. If your audience is a policy or decision maker, the program could feature researchers and health professionals providing statistical information about the need for better immunization services. If for the general public, the program could be a dramatization between two parents discussing the benefits of immunization.

### Materials should be brief, visual and descriptive

Truly effective materials are brief, provide a lot of visual information, and break up text with descriptive headers.

When developing materials, resist the urge to include as much information as possible. Very few people read documents or reports in their entirety—in fact, most people read only enlarged quotes and photo captions. If your materials are too lengthy, they may not be read at all.

# Outreach

# Step 4: BUILDING A STRONG COALITION

Any issue affecting a wide range of people will draw many critics as well as supporters. Immunization is no exception. People care about children and want to do everything in their power to keep children healthy and safe. During the audience-research phase, you had an opportunity to find out who your potential partners might be. By working together with these individuals and organizations, you can build a powerful coalition, or network, whose collective voice is heard throughout the region, nation, or world.

### Why build coalitions?

Coalitions often form naturally between individuals and groups who share the same goals. As long as the group continues to share a common vision, each member of the coalition will benefit from being involved. The power and influence a coalition possesses is many times greater than the power and influence of several groups working alone.

- Coalitions are excellent resources. Coalitions allow advocates to share resources and information, generating innovative ideas and building relationships.
- Coalitions can lend credibility to an issue. Most organizations
  work hard to maintain good reputations in their community. A
  good reputation takes a long time to build and usually results in
  high levels of trust from constituents. When an organization joins
  your coalition, they lend you their reputation and give you access
  to their supporters.
- Coalitions communicate information faster and more effectively. Organizations often send information to constituents on a regular basis. By using these existing communication channels, you can quickly reach people and deliver your message through a trusted source.
- Coalitions can influence decision makers. A single organization
  advocating for immunization has much less influence over
  decision makers than five, ten, or fifteen organizations rallying
  around immunization. The greater the number of organizations
  working together for immunization, the more pressure they can
  put on decision makers to change policies or allocate funding
  to immunization.

"Advocacy is working with other people and organizations to make a difference."

 Center for Population and Development Activities

### How to build a coalition

Prominent organizations and individuals in your country, region, or city should be considered potential allies or partners for your local immunization-advocacy activities. Most will have influential connections, mailing lists, helpful program staff, and financial resources you can access to increase awareness about immunization.

Building strong coalitions takes time and patience. Below are some recommended steps for building a coalition. Remember that some coalitions work best when they are only loosely affiliated, and some are better off working from structured work plans. Decide what style works best for you and your colleagues.

### Identify, research, and recruit "natural allies"

If you are not yet part of a coalition, take a little time to get to know your "natural allies" first. These are individuals, groups, and organizations who have a mission similar to your own—those who would easily see the benefit of joining forces. Potential allies for immunization might be found among:

- national health authorities
- national/international health or child-advocacy organizations
- pediatric and medical associations
- health care providers (e.g., health clinics, hospitals, local medical societies/associations, physicians, pediatricians, school nurses)
- health or child-focused nongovernmental organizations

Carefully examine the reputation of potential partners, assess their strengths and weaknesses, and try to identify strong communicators and people with access to decision makers. When you are ready to ask them to be a part of the coalition, be specific about their role, and look for concrete ways to tap into their strengths.

#### Broaden the coalition

To be truly effective and far-reaching, a coalition should be as diverse as possible. Unusual and diverse partners can give you access to new resources and previously unreachable audiences. They also can help you target your messages, making them resonate with larger and more diverse audiences. After recruiting an initial core of strong allies, start thinking about how to broaden your coalition beyond the usual supporters.

### **Potential coalition partners**

Organization	Potential Benefits
Economic development agencies	Can provide resources and fresh ideas about immunization as it relates to poverty and economic improvement.
National economic and education authorities (i.e., Ministries of Finance and Education)	Can provide ideas about immunization as it relates to commerce and education on a national scale.
Celebrities, royalty, sports figures, high-profile politicians	Can effectively raise support for immunization from mass audiences.
Private-sector corporations, businesses, and labor unions	Can communicate with employees about immunization and health-related topics; can also provide resources for immunization efforts.
Schools	Can help illustrate the social impact of disease, such as children becoming sick and dropping out of school. Also can incorporate age-appropriate information about immunization into school curricula.
Youth groups	Can become effective advocates to parents and other adults. Can talk to their communities about immunization.
Religious leaders	Can support advocacy efforts through research, studies, and curricula.
Academia	Can provide ideas about immunization as it relates to the environment and sustainability.
Environmental organizations	Can support efforts to increase safe handling and disposal of medical waste.
Community leaders	Can speak with the community about immunization.
Human-rights groups	Can provide resources and fresh ideas about immunization as it relates to indigenous people, human rights, and marginalized populations.

### Maintain the coalition<sup>3</sup>

Your responsibility to maintain strong connections in a coalition does not end with recruitment. Coalition maintenance is one of the most important and most overlooked steps in advocacy.

- Establish a flow of information between member groups. Distribute information about immunization, the organizational goals of each partner, and each organization's strengths and limitations. Share correspondence relating to the objectives of the group.
- **Develop a group mission statement.** The mission statement should be worded to reflect the philosophy of the coalition and to permit a wide variety of groups to participate. A new member's participation can signal its endorsement of the group mission statement and objectives.

- Agree on advocacy objectives. Members of the coalition should work together to develop advocacy objectives. Once the group builds consensus on these objectives, individual members can take on various components of the effort.
- Create and follow a realistic timeline. Building and maintaining a coalition—and seeing
  results from its work—can take many years. Plan for long-term change by organizing
  short-term activities with achievable results.
- Establish a structure and assign roles. Coalitions are most effective when all members have a voice and know they will be heard. Assign a leadership structure that facilitates equal participation and assigns responsibilities among partners.
- Be explicit about how decisions will be made. Coalitions often try to make decisions
  by consensus, requiring the consent of everyone in the group. Unfortunately, there are
  times when one member feels strongly enough against a decision that they will
  publicly oppose it or break from the coalition. Members must decide what will happen
  when consensus cannot be reached, and what decisions can be made by majority vote
  or within smaller subcommittees.
- Share responsibilities through subcommittees. Subcommittees allow more people to participate actively and can be either permanent or limited to a specific project. Define responsibilities, and determine which decisions can be made within the subcommittee without input and approval from the entire group.
- **Expand the base.** Build your coalition by extending an invitation to new members who agree with the mission.
- Hold regular meetings. Hold meetings often enough to respond to current events. The
  meetings should be at a convenient time and at a central location to accommodate as
  many members as possible.

# Case Study: Uganda AIDS Control Program

In 1990, the government of Uganda concluded that HIV/AIDS posed a real threat to life and development in the country and that the best way to fight the disease was by joining forces with others. A national task force was set up to consult with government ministries and to actively involve all major international agencies operating in Uganda. The country's leader, President Yoweri Museveni, took the unprecedented step of speaking openly about HIV/AIDS and insisting it was everyone's problem. He said that only by working together in a coordinated way, from the various administrative and political levels down to grassroots, could the country stop the spread of the disease and help those already infected.

### Program recruited and coordinated partners

The AIDS Control Program (ACP), as the coordinating body, actively recruited partners at international, national, and community levels. These partners included governmental and nongovernmental agencies, research institutions, and religious and cultural groups. The purpose was to reach out and invite everyone to the table.

The ACP encouraged its partners to take responsibility for different areas of work. "We were only too aware that we, as a government body, could not do everything. Our strategy from the beginning was to bring on board as many stakeholders as possible to tackle this huge problem. We also encouraged our partners to concentrate on their areas of expertise, be it counseling or testing, and not spread themselves out too thinly. This would help us become more effective and avoid duplication," explained Dr. Musinguzi, ACP Deputy Program Manager.

"Only by working together in a coordinated way [can we] stop the spread of the disease and help those already infected."

Yoweri Museveni,
President of Uganda

### Mass media and interpersonal communication targeted

Communication at all levels was a crucial part of the government's overall strategy. People needed to be told about this new and devastating disease and how to protect themselves from it. The initial focus of the campaign was to provide as much information as possible about the disease through leaflets, radio and newspaper advertisements in English and local languages, television programs, and public meetings. In addition, AIDS Control Program units were established within every ministry. Word-of-mouth communication through public meetings was also important, as a high percentage of Ugandans are illiterate.

### Messages developed centrally, communicated locally

Dr. Musinguzi explained that information and messages about HIV/AIDS could be confusing, especially when coming from various individual organizations. To prevent mixed messages, the Advisory Committee defined the core messages centrally to ensure they were consistent at every level. Messages focused on basic facts about the disease, its devastating effects, and how to avoid contracting it by using condoms. Partner organizations could decide the best way of communicating the information as long as it was consistent with the ACP core messages.

Partner organizations were free to decide the best way of communicating the information to their constituencies as long as it was consistent with the ACP core messages.

This collaborative approach was extremely beneficial in strengthening the country's response to HIV/AIDS. The large-scale, coordinated effort enabled Uganda to become a great success story in Africa, as it has cut in half the incidence of HIV/AIDS over a period of ten years.

# Step 5: ENGAGING POLICY AND DECISION MAKERS

Many important decisions are made at the policy level of governments, organizations, hospitals, schools, and communities. Reaching out to key decision makers is a fundamental strategy of any advocacy effort. Competition for a decision maker's time, therefore, is often fierce, and your interactions with decision makers must be well organized, professional, and productive.

The following activities focus on interactions with government-level policymakers but can apply to decision makers at any level.

### Schedule face-to-face meetings with policymakers or their staff

Policymakers, especially those elected by the public, rely on relationships for support and information. Visits with policymakers are an effective way of building relationships and earning their trust and respect. Personal visits also tend to make policymakers more accountable for their actions, because they know who you are and that you are paying attention to their decisions. If you are unable to meet with policymakers, meet with their staff. In many countries, key staff people have tremendous influence over policymakers and remain in office longer than the policymakers themselves. Building relationships with staff sometimes produces greater and more long-lasting results than trying to connect directly with policymakers.

### Clearly state the point of your visit

Be sure to clearly articulate what you are asking of the policymaker during your visit. Leave behind a simple, one-page outline of your request as a tangible reminder of your visit, and, if asked, provide additional information in a timely manner. Never misrepresent an issue to policymakers. If you do not know the answer to a question, tell them so. They will respect your honesty and learn to trust you as a valid source of information on immunization issues.

- Select an appropriate spokesperson: Choose a spokesperson who can relate to and earn the respect of the policymaker. Usually, this means sending a top-level person from your organization or coalition to speak about the issue.
- **Be informed:** Examine the policymaker's history of involvement in other health issues. Note the type of initiatives the policymaker has previously supported, and learn which individuals and institutions seem to have some influence on him or her.

"Advocacy is an action directed at changing the policies, positions, or programs of any type of institution."

– SARA/AED Advocacy Training Guide

- **Be prepared:** Know your messages, know who your audience is, and know what you are asking for before you begin a meeting or presentation. Make sure the social and political relevance of your message is clear. Demonstrate that there is public interest in stronger immunization services and new vaccines.
- Organize your discussion points: Before you enter a meeting, make certain that you
  have time to meet with other members of your team, decide who is going to say what,
  and in what order.
- **Be focused:** Bring talking points and an agenda to help keep you focused. Meetings are frequently cut short, so state your main points early in the discussion. Repeat your main points again at the end of the meeting.
- **Be on time:** Whether you are meeting with the media, national decision makers, or local schoolteachers, be on time. It is a simple courtesy that signals you are serious about the issue and respectful of your host's time.
- Tailor messages to your audience: Ministers of health, ministers of finance, nongovernmental organization staff, health care providers, and mothers are concerned about slightly different aspects of the same issue. Remember to whom you are speaking, and address their concerns.
- **Be persuasive:** Clearly articulate the urgency of strengthening immunization systems and the cost-effectiveness of immunization programs.
- Recognize the policymaker's limitations: Recognize the bureaucratic, budgetary, and administrative constraints that exist in governments and other institutions. Be aware of the influence special-interest groups may have on the issue.
- Show how the policymaker might benefit from his or her involvement: Allude to the potential political benefits of showing leadership on an issue and the potential political consequences of failing to take action.
- Repeat key messages: Repeat your key messages several times during your conversation. Most people need to hear something five or six times before they fully understand it.
- **Be relaxed:** Try to be calm, confident, and conversational when you speak; it puts your listeners at ease and helps them focus on what you are saying.
- Speak slowly: You know what comes next in your presentation, but your audience does
  not. Allow time for your audience to write things down and absorb your statements.
  Add a pause before or after a particularly important phrase. Breathe.

- Be aware of your body movements: Pay attention to your gestures, body movements, facial expressions, and eye contact. Together, these nonverbal forms of communication say much more than your words.
- Do not get drawn into a debate: Keep coming back to your messages. Do not get
  mired in details and technical information. Tell a human story to dramatize the effects of
  the issue you are addressing.
- Leave pertinent information with your audience: Leave behind written information, visual charts and graphs, and stories that will help your audience better understand your issue.
- Keep track of meeting results: Develop a tracking system that enables you to record
  the details of each meeting for your own reference. After the meeting, jot down notes
  in the following categories: with whom you met with, what you discussed, what
  commitments were made, what information requires follow-up, and what information
  you left behind.
- Follow up with key players after the presentation: Write a personal thank you note, even if you met with a junior staff member. Call and ask if there is any other information you can provide to clarify your position.

### Invite policymakers to visit immunization sessions and children's wards

Policymakers often visit government facilities to give themselves a "real-life context" for the issues they deliberate. The visits allow them to see the implementation of important public policies they create. Visits to the field are an effective way to provide policymakers with a better understanding of the work being done (and not being done) in the public sector. Try to schedule visits so they do not conflict with other government business.

### Communicate regularly with policymakers (letters, e-mails, phone calls)

Many policymakers are reachable by telephone, e-mail, or mail. A legible, well-written personal letter with your name, address, and phone number is still considered more effective than e-mail or phone calls in most advocacy circles. Be sensitive about the amount of communication you send to policymakers—you want to be helpful and informative—not annoying.

### **Case Studies:**

# Campaign to End Child Labor in Garbage Dumps, Brazil

In June 1999, UNICEF-Brazil, together with 30 other Brazilian institutions, launched a national campaign to eradicate child labor in garbage dumps by the year 2002. The campaign aims to raise awareness about child labor and to encourage mayors and municipal authorities to enroll the children in school, offer them medical assistance, and help their families increase income by offering appropriate training.

Toward this end, campaign organizers sent informational materials and a questionnaire on the situation of rubbish collection to 5,500 mayors throughout Brazil. Each mayor was then asked to sign a Letter of Intent to confirm their commitment to take action against child labor in the dumps. The media promoted the compelling effort to get signatures from each of the mayors, putting further political pressure on the mayors to sign and return their Letters of Intent. Less than two months after the launch of the campaign, over 1,000 municipalities had pledged their commitment and signed the Letter of Intent.

### Days of Tranquility, Democratic Republic of Congo

In 1999, polio eradication efforts in the Democratic Republic of Congo (DRC) were in jeopardy due to war in the region. To improve the situation, a team of international advocates from United Nations agencies, led by UN Secretary General Kofi Annan, appealed directly to Congolese President Laurent Kabila and to opposition leaders to declare a cease-fire during the upcoming National Immunization Days (NIDs) so mothers could safely take their children to the clinics.

The warring parties responded by declaring a "Day of Tranquility," to allow the vaccination campaign to proceed peacefully. The President and his wife personally launched the NIDs, and the army helped with vaccine distribution. As a result of these efforts, the DRC reached over 90 percent of the targeted 10 million children to be immunized throughout the country.

# Step 6: INFORMING AND INVOLVING THE PUBLIC

Including the general public in your outreach efforts can help you establish broad support for immunization. Public outreach and education can help you involve people in immunization advocacy efforts and teach them how policy and attitude changes can improve the health of their children. If you can gain community-wide support, you can mobilize a great deal of enthusiasm and energy toward your efforts. When the public feels strongly about a problem, policymakers and others may feel pressure to do something about it.

### Narrow the audience

Public education is most effective when it targets specific segments of the public with tailored messages. Find out which groups of people are most likely to be interested in immunization issues—for example, first-time parents, health care providers, religious leaders, or advocates for children.

As mentioned in *Step 1: Gathering Information*, you should conduct audience research to find out what your audiences currently know about immunization, how they feel about it, whether they have immunized their own children, and what barriers exist to providing or receiving immunizations. You should also test your messages with target audiences before using them—this way, you can ensure the information is appropriate and compelling. For more information on audience research, please refer to the *Immunization & Child Health Materials Development Guide*, available in the GAVI Advocacy Resource Kit or via the internet (www.ChildrensVaccines.org).

### Audience research unveils the truth

An American automaker was proud to introduce one of their top-selling automobiles in Latin America. Although the car met all the needs of Latin American drivers—low gas-mileage, compact size, affordability, and safety—it would not sell. To their embarrassment, they learned that the Chevy Nova, when translated to Spanish, meant "no va" (does not go)!

### **Deliver messages through proper channels**

Messages should be simple and short when addressing large audiences. They can be more targeted and detailed when addressing more specific audiences. Messages can be delivered to the general public through many channels, from face-to-face meetings to mass media, and from buttons and pins to special events. Following are a few proven delivery channels for your messages.

- Interpersonal channels: Person-to-person communication is the most effective (and least expensive) advocacy tool you have. Ask opinion leaders and other supporters to talk to their friends, family, and community about immunization. If opinion leaders are difficult to reach, write letters and enclose materials for them to read and distribute. Get youth groups involved in advocacy; they can help spread information and learn the importance of immunizing their own children one day.
- Community meetings: Community meetings, including tribal gatherings, school
  meetings, religious meetings or church services, and social gatherings, are excellent
  channels for delivering immunization and health information. Because these meetings
  include and are led primarily by local people, audience members are more likely to trust
  and listen to the information presented.

"Advocacy is speaking up, drawing a community's attention to an important issue, and directing decision makers toward a solution."

– SARA/AEDAdvocacy Training Guide

- Meetings, seminars, symposia, conferences, training sessions:
   Professional gatherings are good dissemination opportunities for
   specific audience groups. State your messages in presentations,
   provide written materials to all attendees, and tell attendees how
   they can help.
- **Special events:** Press events, rallies, community gatherings, and other special events are good venues for disseminating information and messages and encouraging people to support your effort. If possible, bring something tangible for attendees—e.g., a fact sheet, button, or flyer. Reinforce your messages verbally, and always offer people a way to get involved.
- Advertisements and PSAs: Many radio and television stations are willing to air public service announcements free of charge or at a reduced rate. Even a newspaper advertisement can be printed at a reduced rate when it conveys a message for the public good. Call the station or newspaper beforehand to gauge their interest in the PSA, and find out what size, length, and formatting requirements you must meet. For more information on creating radio or video materials, please refer to the Immunization & Child Health Materials Development Guide, available in the GAVI Advocacy Resource Kit or via the internet (www.ChildrensVaccines.org).
- Electronic distribution: If electronic mail and internet use is common among your
  audience, these channels can be good ways to distribute information and solicit support.
  Create a simple website for your effort, provide links to resources and other
  organizations in your network, establish e-mail lists, send occasional updates, organize
  online discussion groups, and ask people to send e-mails to policy and decision makers
  in support of your effort.
- **Direct mailing or delivery:** If your budget allows, consider sending materials to your audience in the mail or through a regularly delivered newspaper. Although this is a rather expensive option, it is sometimes an effective way to deliver complex information to large numbers of people.

- Radio call-in programs: Find out if there is a radio station willing to discuss immunization once a month or on a regular basis. Listeners can call in with their questions, and immunization experts can answer common questions and dispel myths around immunization.
- TV or radio series: Health education is frequently the topic of television or radio programs and dramatic series. The issues surrounding immunization can become the focus of a particular show or an entire series depending on the area and public interest in vaccine-preventable diseases.

# Case Study: The Children's Health Club of Mexico

In 1998, the Mexican Child Health Care Program launched the Children's Health Club. The project encourages boys and girls, ages three to six years old, to join with others and learn about hygiene, immunization, and other healthy practices. "We believe that if we work with children from an early age, we can inspire a culture of caring for their own health and turn children into health promoters in their homes," says Gabriela Helguera García, Director of Educational Communication and Community Participation at the Secretariat of Health's National Council of Vaccination.



To become a member of the Club, children must commit to a "pact of honor" in front of their teachers or families: "We will be immunized, wash our hands before eating and after using the bathroom, stay inside when it's cold to avoid coughs and colds, ask that we be weighed and measured regularly, eat hygienic food, and we will not play with dangerous objects."



The first chapter was inaugurated in the state of Colima. Today the Club has grown to include over 75,000 girls and boys nationwide, mostly in primary schools, day care centers, and centers run by the National Institute of Indigenous Cultures. Over 1,500 schools have installed special mailboxes for mail to the Club.

Children have demonstrated their interest and enthusiasm in the program by mailing in drawings, cards, poems, riddles, stories, and statements about how they care for their health and that of their households. Some of the drawings have been used in national media campaigns.

In addition to promoting preventive health care, the Children's Health Club helps adult program staff learn more about what boys and girls believe about health topics and further understand their questions. This enables the staff to more effectively design educational strategies for the future.

The next goal is to branch out to the private sector, which can help the program develop a more sophisticated system for tracking and monitoring correspondence and membership. As the program becomes decentralized, the government hopes that it can expand to every municipality in Mexico.

# Step 7: WORKING WITH MASS MEDIA

The media is a powerful vehicle for influencing public opinion and educating broad audiences. Its wide reach offers you an opportunity to talk to large audiences and explain your position on important immunization issues. The media is also a valuable resource for creating news about immunization and communicating to your partners and the general public about the benefits of stronger immunization services. Think about which media channels are most accessible and popular among your audience, and direct your energy there. Do not spend all your time working with print reporters if the audience you are trying to reach is low-literate or non-urban. Focus instead on radio (a prevalent and inexpensive source of information and entertainment) or television.

### Be the first person reporters turn to for information on immunization

Reporters and editors are important targets of advocacy messages; they have the power either to bring your issue to the forefront or ignore it. Take the opportunity to build professional relationships with reporters so they know who you are and how you can be a source of information for them. Frequent interaction with key reporters will give you insight into their story planning and will give them a chance to develop a better understanding of your issue.

### **Press briefings**

Press briefings are good venues for educating reporters about vaccine-preventable diseases, the role of immunization, GAVI's mission, and immunization goals in your area. Briefings also give you an opportunity to build relationships with reporters and earn their trust as a source of quality information on immunization. Invite several reporters or editors to your office for an informal briefing over breakfast or lunch. Provide clear briefing materials (such as an issue background sheet, fact sheet, and information on diseases), and spend a half hour or so explaining the issue and answering questions.

#### Editorial meetings

Sometimes newspapers, radio, and television stations may invite you, as a policy expert, to give an "editorial briefing" at their offices. Or you can suggest a meeting on your own, if you have a specific issue on your agenda. Editorial briefings are excellent opportunities to gain the editorial support of a newspaper or station. Before the meeting, study stories that have appeared in the media and the position the editors tend to take, particularly in relation to immunization. Arrive with facts and figures that are relevant to that newspaper's or station's audience. Make a persuasive argument to the editor that his or her audience should be concerned about immunization. Be ready to answer any questions the editors may have.

### What is news?

Editors are inclined to cover stories that meet one or more of the following criteria.

- The story is newsworthy, timely, and interesting. An announcement of an award from the Global Fund to your country is a good example of a story that is newsworthy; it is timely, affects your entire country, and discusses the challenge of vaccinating all children. Other newsworthy events could be the delivery of the first hepatitis B vaccines to the country or the release of the latest immunization-coverage data.
- The story has a local impact warranting media attention. Reporters want to know how an issue affects the local population. Find a way to relate the story to your community. For example, find local families who have been afflicted with vaccine-preventable diseases and explain how a renewed focus on immunization can keep disease from affecting more children in your area.
- The story is important because it raises other issues that may have regional, provincial, statewide, or national impact. Think of ways to tie immunization to other important issues in the community. If economic development or education is a popular issue, discuss the benefits immunization has on worker productivity and school attendance.

### **Fellowships**

News reporters in your area may be interested in participating in a fellowship with your organization to better understand the daily challenges and successes of immunization. Provide opportunities for reporters to work with you and become more involved in immunization issues. As a result, you will have a close friend in the media who intimately understands your issue.

#### Lunch

Invite a reporter to lunch. This simple courtesy helps you build a personal relationship with reporters and gives you a chance to informally explain the importance of your issue.

#### Journalist workshops

Consider inviting journalists and reporters to a day-long workshop to teach them about the common diseases of childhood and the work you are doing to improve child health. Reporters are often looking for good stories, and a well-planned workshop can spark their interest in covering immunization and child health issues from your viewpoint. Workshops also provide accurate information that reporters can use in the future.

### Create a press list

Even if you already maintain a press list, go through each name on the list and update contact information, learn more about the issues each reporter covers, and find out who else should be on your contact list. Consider adding newswire reporters and people who cover issues other than health. For example, business reporters may be interested in immunization stories that discuss the economic impact of disease.

## **Develop press materials**

Much of your communication with the media will take place through written press materials in one or more of the following formats:

#### Press packet

A press packet usually contains general introductory materials about your issue and a news release about a current news event. The following materials are typically part of a

packet that would go to a reporter who is unfamiliar with your organization and your mission: background sheet, fact sheet, question and answer sheet, contact information, and a news release.

#### News release

A news release (also called press release) presents a news item and story idea to reporters. Because reporters receive many releases every day, they often read only the headlines. Make your headline informative, interesting, and relevant. It is customary to issue a release on the day of a news event or conference or to submit it in advance, to be held until the date of your news story. Fax or mail releases to news editors, health writers, and other contacts you know are interested in covering your story. Then follow up with a telephone call to discuss your story idea.

#### Press advisories

Advisories are used to alert reporters to a media event, photo opportunity, or news conference. An advisory should provide the "who, what, where, and when" of the event. A good advisory should also build some anticipation concerning the news that will be announced. Fax or mail the advisory to the proper reporter or editor approximately ten days before the event.

# When to hire a public relations consultant<sup>2</sup>

If you are producing a big event, releasing a major story, or trying to attract international media, you may wish to hire a public-relations consultant. There are a number of well-known international agencies operating all over the world. To make your selection, it is worth asking colleagues in other organizations and private companies for their recommendations. It is important to define the terms of reference and be very clear about what you wish the consultant to undertake. Ask several consultants to prepare a proposal with an outline of how they will meet your objectives, at what cost, and in what time frame. Be clear about who in the company will be your contact and who will be carrying out the work. It is sometimes advisable to agree that you will write press materials (as you know your subject best) and the consultant will be responsible for printing, distributing, and following up with journalists.

# **Create press opportunities**

Sometimes a press release alone is not enough to attract the attention of the media. There are several ways to create additional press opportunities or make small press announcements bigger—following are several strategies.

#### Media events

Media events are good venues for announcing major initiatives, project results, or policy changes. By hosting an event, you can invite many journalists and brief them all at once. But be absolutely certain you have a news item big enough to call upon the journalists' personal attendance. It might take the participation of a celebrity, a minister, or an artist to get media attention. Facing journalists and television cameras is often a very effective and efficient way of getting your message across to wide audiences. A sample event timeline for a media event announcing your country's award from GAVI and the Global Fund is available in the Appendix.

#### Opinion-editorials<sup>2</sup>

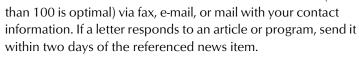
Most newspapers print opinion-editorials (op-eds) or guest columns. An op-ed is an expression of opinion rather than a statement of news or fact. Although style varies according to different countries, an op-ed tends to be lively, provocative, and sometimes controversial. It is a very effective way to register concern about a disease to policymakers and to inform communities about why they should care about controlling diseases. Op-eds are usually around a 1,000 words. It is best to call the newspaper first to request their guidelines for submitting an op-ed and to convince them of the importance of your issue.

#### Feature articles

Occasionally, publications accept prewritten stories submitted by "experts." Call the editor to find out whether they accept these stories and agree on the number of words and the required format. Before writing your article, learn all you can about the publication and its audience. Your writing style and content should resonate with that particular audience.

#### Letters to the editor

Newspapers, magazines, and radio shows accept letters from readers or listeners and publish or read them aloud. Letters are fairly easy to get published, are widely read, and provide an excellent opportunity to promote a cause or organization. A letter should make one main point and end with a call to action. Send short letters of 500 words or less (less





#### Photo opportunities

Look for any opportunities to invite television and still photographers to your area. If you are hosting a press event, pay special attention to how the event will look on camera. Create a huge banner or invite children or celebrities to stand on-stage during announcements. Create photo opportunities that symbolically support your news item. For example, invite photographers to take pictures of the handshake that seals a policy decision, or organize a photo opportunity with children being immunized when a shipment of new vaccine arrives in

your area. Photo opportunities can be announced in a press advisory sent to the picture editor of a newspaper or television station.

If newspapers and television stations are unwilling to send photographers, you may want to hire a photographer yourself or prepare a "video news release" (VNR). A VNR is basically a news report which broadcasters can use and contains footage of, for example, children suffering from vaccine-preventable diseases, interviews with experts, and immunization sessions.

#### Television and radio discussions

Many television and radio stations broadcast news and discussion shows on current issues. Identify news directors and talk-show producers who might be interested in covering the issue. The host of a discussion show might be interested in dedicating an hour to a suggested issue. "Call-in" radio shows on a relevant topic can provide opportunities for a spokesperson or leader to speak directly to the radio audience.

### Expect the unexpected<sup>5</sup>

At some point you may have to deal with perceived or real health problems relating to immunization. Following are a few steps to help you handle difficult, controversial, or otherwise unpleasant questions from reporters and key opinion leaders.

#### Plan ahead

- Identify an individual who will be in charge of your response. A senior person should be
  given this responsibility so that it is clear to outsiders that top staff are concerned and
  responsible.
- Prepare in advance fact sheets that discuss adverse events relating to immunization.
- Build up a relationship with the media, especially health correspondents. It is useful to
  provide fact sheets about the probability of adverse events under normal circumstances
  so the correspondents have something to refer to if and when an adverse event occurs.
- Establish reputable information channels such as a regular health spot on the radio or in a health magazine.
- Seek top-level advice from good, local public-relations specialists on how they propose you handle an adverse event.
- Ensure there is a budget line for training, planning for, and reacting to crises.

#### Train yourself

• Train yourself and other senior staff to work with the media. This includes preparing written materials as well as training sessions where people can practice interviewing and speaking about sensitive issues in front of a camera.

#### Verify the event

Verify the facts. The moment an adverse event is reported, steps must be taken to
ascertain what has actually happened. If possible, visit or place a phone call to someone
at the source of the occurrence.

## Put a positive "spin" on events

"Spin" is simply a way of describing a situation in positive terms. It does not mean lying or concealing the truth. In the context of an immunization campaign, the media have an opportunity to "spin" the facts to their purpose: selling more newspapers or capturing more viewers. "Spin control" is when program managers and others take the initiative to offer interpretation of public health events before the media can characterize the events on their own.

Learn how serious or common the event is. Is there
an easy scientific answer to the event, or do more
studies need to be carried out? Has a similar event
happened in another country?

#### If an event occurs

- Issue a preliminary statement within hours. The statement should include a complete account of the event, framed in its context (e.g., an isolated event, a coincidental event); an outline of actions taken or planned; a description of the cause of the event (but only when this is known with reasonable certainty); and an assurance that corrective action has been or will be taken.
- If the event is serious, call a press conference early, even if there is only very limited information to give.
   This will prevent the circulation of rumors and build a relationship with reporters.
- Rapidly establish a press office or contact point for the press.
- Initiate a technically competent investigation, and keep the press posted on progress.
- Announce who is in charge.
- For a major event, call a daily press conference. Accommodate the media in every way you can.
- Refresh media skills if it has been some time since your last training.
- Set up and announce support for victims (e.g., expenses, hotline, travel arrangements) without accepting guilt or blame.
- Consider recruiting a well-known public figure or celebrity to publicly support continued immunization.
- Evaluate what happened and how things could be handled better next time.

Negative publicity can be both a challenge and an opportunity. If you are prepared, and handle the situation professionally and calmly, you will raise much greater awareness of your issue, establish yourself as a reputable source of information on the issue, and possibly earn the respect and trust of more supporters.

# When talking to reporters during an adverse event:

- Respond to negative events with positive actions or results.
- Correct what is wrong.
- Be assertive, not aggressive.
- · Stay calm.
- Take your time to gather facts.
- Be reasonable.
- Tell the truth.



# Case Study: National Immunization Days, Mozambique

Immunization organizers in Mozambique focused on mass media as a key component of their outreach plan for National Immunization Days. By using mass media to deliver messages about immunization, organizers hoped to achieve higher public participation in NIDs and generate greater public awareness of the importance of immunization. Tactics used to develop relationships with reporters included:

- holding training and briefing sessions with reporters to discuss routine immunization and the goals of the Expanded Programme on Immunization (EPI),
- paying journalists' expenses when appropriate,
- making the Minister and other officials in the Ministry of Health (MOH) available to the media,
- assigning a staff member in the deputy minister's office to act as a liaison between the MOH and the media,
- hosting weekly press conferences with the deputy minister, and
- awarding a national prize to the best health journalist.

As a result of these efforts, the team was able to reach a large and diverse audience and significantly improve participation in NIDs (from 64 percent to 97 percent in some areas). And, thanks to the strong relationships they had built with reporters, organizers continued to work with them on other priority health topics.

# Step 8: MONITORING AND EVALUATING YOUR WORK

Advocacy is often difficult to evaluate because, when implemented properly, it involves the participation of many different stakeholders: government agencies, researchers, health advocates, the media, policy and decision makers, students, teachers, mothers, fathers, grandparents, children, manufacturers, community groups, and others. With all these groups working both together and independently over time, the resulting impact and activities are difficult to calculate or track. Another difficulty in evaluating advocacy work relates to the slow pace at which change occurs. Widespread change is rarely a direct result of one person's or group's efforts. There are often many circumstances outside your control that can bring you closer to or take you further from your objectives.

Still, evaluation is critical to advocacy. Without careful monitoring and evaluation of advocacy activities throughout the process, your effort can quickly and silently fall apart. Without a clear set of results, you can lose some or all of your funding (and make your next request for funding twice as difficult to acquire). You can also lose an opportunity to learn from mistakes and recognize successes of your effort. The following evaluation tools can help you understand more about the effectiveness of your activities, your objectives, and your goals.<sup>3</sup> They are progressively more broad in scope and expensive to measure, but also more relevant to your overall purpose.

## Monthly or quarterly: document your process

By documenting the process and procedures you undertake in an advocacy effort, you can determine how well you manage your activities, whether you are reaching the right people with the right information, and whether you can achieve your objectives. Take time every few months to ask the following types of questions. Try to prepare a written report with your findings so you and others can learn from it.

A process documentation should answer questions such as these:

- Did you produce any materials? How many were printed versus distributed?
- How were they distributed?
- How can distribution be changed or improved next time?
- Did you meet with decision makers? How many? With whom? What was accomplished?
- Did you attend or speak at any meetings? How many? With whom? What was?
- Did you hold an event?
- Did you work with the press?
- How many press releases were sent to editors or reporters?
- How many favorable articles or programs about immunization appeared in the media?
- How many members are involved in your coalition?
- How have coalition members contributed?

Note that the process you undertake is important, but what ultimately matters is how effective you are in reaching your goals. If you spent a lot of time preparing materials, attending meetings, holding press events, sending press releases, and meeting with policymakers—and then found that nothing really changed—you may consider taking on different activities or analyzing why these activities had no net effect.

# Biannually or annually: evaluate the outcomes of your advocacy effort

Outcome evaluations measure how well you are meeting your advocacy objectives. If one of your objectives is to get 50 percent of the general public to learn the major diseases preventable by vaccines, you can reasonably assume that you are reaching your objective when this percentage rises.

Other outcome evaluation questions might include:

- How many opinion leaders endorsed your program?
- How many opinion leaders publicly support immunization?
- Did an organization's policies change as a result of your activities?
- Was any legislation changed as a result of your activities?

After evaluating the outcomes of your activities and determining whether you met your objectives, consider whether these outcomes brought you closer to your goals. If not, refine your advocacy objectives and begin anew. If your objectives are bringing you closer to your goals, try to broaden your objectives and share the news of your success with the public, the media, policymakers, and partners.

# Every three to five years: evaluate the impact your effort has had on long-range goals

An impact evaluation measures your progress toward reaching big-picture, long-range goals. By testing the net impact your efforts have had on children, impact evaluations aim to determine how the combined work of advocates, health providers, immunization program managers, vaccine-product manufacturers, cold-chain maintenance workers, agencies, trainers, donors, and others have made a difference in child health.

Impact evaluation questions might include:

- How many more children were immunized in your area?
- Were new vaccines safely introduced?
- How many children received access to these new vaccines?
- Did fewer children suffer from vaccine-preventable diseases?

Because impact evaluations attempt to assess the work of many groups with the same overall goals, no one group can realistically take full credit or blame for the results. Still, the impact you have had on child health, directly and indirectly, is a critical and fundamental question.

# Resources

# Step 9: KNOWING WHERE TO GO FOR HELP

The ideas and suggestions presented in this handbook represent only a fraction of the information currently available on advocacy. We hope you will take the time to use this handbook to develop an effective and sustainable advocacy effort. Should you wish to review additional literature on advocacy or immunization, you can send for the following information.

## Information you can send for in the mail

#### Type of Publication

#### How-to Manuals

How to Select and Work with an Advertising Agency (1996)

How to Write a Radio Serial Drama for Social Development (1998)

#### **Working Papers**

 Reaching Young People Worldwide: Lessons Learned from Communication Projects (1986-1995)

 Reaching Men Worldwide: Lessons Learned from Family Planning and Communication Projects (1986-1996)

Understanding Unmet Need (1997)

#### Where Available

Johns Hopkins University Center for Communication Programs 111 Market Place, Suite 310 Baltimore, MD 21202, U.S.A. Telephone (410) 659 6300, Fax (410) 659 6266

E-mail: webadmin@jhuccp.org

Also available on the web at http://www.jhuccp.org

#### Advocacy-Related Materials

Advocating for Adolescent Reproductive Health in Sub-Saharan Africa (1998)

 Advocacy: A Practical Guide with Polio Eradication as a Case Study (1999)

• An Introduction to Advocacy, A Training Guide (1996)

· Realizing the Full Potential of Childhood Immunization: How Health Professionals Can Make a Difference (2000)

Unsafe Injections, Fatal Infections (2000)

Helping Young People Become Youth Advocates for Immunization (2000)

Hepatitis B Vaccine Introduction: Lessons Learned in Advocacy, Communications, and Training (2000)

Advocates for Youth

1025 Vermont Avenue NW, Suite 200 Washington, D.C. 20005, U.S.A. Telephone (202) 347 5700, Fax (202) 347 2263

E-mail: info@advocatesforyouth.org

World Health Organization The Global Polio Eradication Initiative

Department for Vaccines and Biologicals

20, Avenue Appia - CH-1211 Geneva 27, Switzerland

Telephone (41 22) 791 2111 Fax (41 22) 791 4041 E-mail: polioepi@who.ch

Also available on the web at http://www.ChildrensVaccines.org

Support for Analysis and Research in Africa (SARA) Project Academy for Educational Development (AED)

1825 Connecticut Avenue NW Washington, D.C. 20009, U.S.A. Telephone (202) 884 8700 Fax (202) 884 8400 E-mail: sara@aed.org

Also available on the web at http://www.ChildrensVaccines.org

**PATH Seattle** 

4 Nickerson Street, Suite 300 Seattle, WA 98109-1699, U.S.A

Tel: (206) 285-3500, Fax: (206) 285-6619

E-mail: info@path.org

Also available on the web at http://www.ChildrensVaccines.org

#### **Useful websites**

#### Global Alliance for Vaccines and Immunizations (GAVI)

This site provides up-to-date information about GAVI and the Global Fund for Children's Vaccines.

www.VaccineAlliance.org

#### Bill and Melinda Gates Children's Vaccine Program

The Resources section of the site offers many free materials, including advocacy-related publications and information on diseases and vaccines.

www.ChildrensVaccine.org

#### **Immunization Action Coalition**

This website offers information and materials on a wide variety of diseases and vaccines. Also available in non-English languages.

www.immunize.org

#### Media/Materials Clearinghouse at Johns Hopkins University

This website provides access to a wealth of immunization materials, posters, videos, photographs, and literature. Many immunization education materials are available from sources outside the United States.

www.jhuccp.org/mmc/immune/

#### The Vaccine Page

This website provides the latest vaccine news and links to high-quality vaccine sites. **www.vaccines.org** 

#### The Communication Initiative

This website provides excellent information and resources for communications staff working in or with developing countries.

www.comminit.com

# References

# References

- World Health Organization Department for Vaccines and Biologicals. Advocacy: A Practical Guide with Polio Eradication as a Case Study. Geneva: WHO, 1999. (WHO publication no. WHO/V&B/99.20).
- Sharma RR. An Introduction to Advocacy: Training Guide. Washington, DC: Academy for Educational Development, Support for Analysis and Research in Africa (SARA) Project, 1996.
- 3. Shannon A, Herdman C, Feinberg M. Advocating for Adolescent Reproductive Health in Sub-Saharan Africa. Washington, DC: Advocates for Youth, 1998.
- 4. World Health Organization, 1999. Partnership Building with the Media: Managing Adverse Events Following Immunization. Geneva, Switzerland.

# Appendix

# Global Fund Award Announcement— Sample Press-Event Timeline

Press events are usually less expensive and easier to produce than other events; however, they still require relentless, repetitive attention to detail. Below is a sample timeline for a press announcement for Global Fund-awarded countries:

## Today:

• Determine who is available to write materials, contact local dignitaries, invite attendees, manage site logistics, call the media, create visual aids, and speak at the event.

## When the event is three weeks away:

- Assemble a team and assign roles, including writing and materials development, site logistics, attendance, media contact, and speaker recruitment and preparation.
- Decide on a site: Does it provide a good visual for television? Can you design a banner for a backdrop?
- Consider any events that may conflict with yours.
- Decide on a local angle for the story: why would the press be interested?
- Gather national or local statistics to support GAVI messages.
- Develop a program—including the length of the event, who will speak and for how long, entertainment, and other agenda items.
- Make a list of everyone who should be informed and involved in the announcement.
- Designate a "master of ceremonies" who will start the event and introduce other attendees.
- Schedule all speakers to make sure everyone can attend.
- Create charts, slides, and other visual aids you may need.
- Visit the site. Any problems with access, light, or outside noise? If so, consider alternative sites.
- If necessary, brief attendees, key decision makers, and supporters on the nature and purpose of the event.

# When the event is ten days away:

- Draft and obtain approval for a media advisory.
- If musicians or other entertainment are coming, find out what they require in staging or sound.
- Secure any sound, lights, and staging you may need. Find outside vendors if necessary.

## One week away:

- Send media advisory to press contacts.
- Determine what staff should be at the event to answer technical questions on background.
- Call key reporters and assignment editors to explain why they should attend.
- Draft talking points for speakers.
- Call all the presenters. Is everything okay? Are they still coming? Do they have directions? Do they need anything?
- Check on the site: is it still available?

# Two days away:

- Fax another copy of the media advisory with "reminder" printed across the top.
- Write a minute-by-minute script of the event, and send it to all speakers.
- Call all the presenters again to confirm their attendance. Answer any questions they
  may have.
- Assemble briefing packets for press (generally, press packets should contain a press release, issue background sheet, questions and answers, contact information, photos, "B-roll" footage for television, and fact sheet).
- Call reporters and assignment editors to sell them on attending. Resend the advisory
  if asked.
- Draft the press release for the event, and get content approved. Call participants to solicit or confirm quotes you are attributing to them.

# One day away:

- Call reporters and assignment editors you were not able to reach earlier.
- Call all logistical contacts (lights and sound, staging, food, entertainment) to confirm they will be there early to set up.

## **Morning of event:**

- Have someone on-site two hours before the event to make sure everything is in place and in working order. Test your microphones, sound system, and other equipment.
- When your participants arrive, hold a brief meeting to go over the script and roles.

## **During the event:**

- Greet reporters as they arrive. Introduce yourself, and hand them a press packet. Point out or introduce participants to reporters. Stay positive and on message.
- Have someone stationed outside to usher in any late-arriving reporters.

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### **After the event:**

- Contact the reporters who attended and ask if they need additional information or interviews.
- Send reporters any information you promised to send.
- Send thank-you notes to everyone involved.
- Ask colleagues to videotape the news program if it is televised.

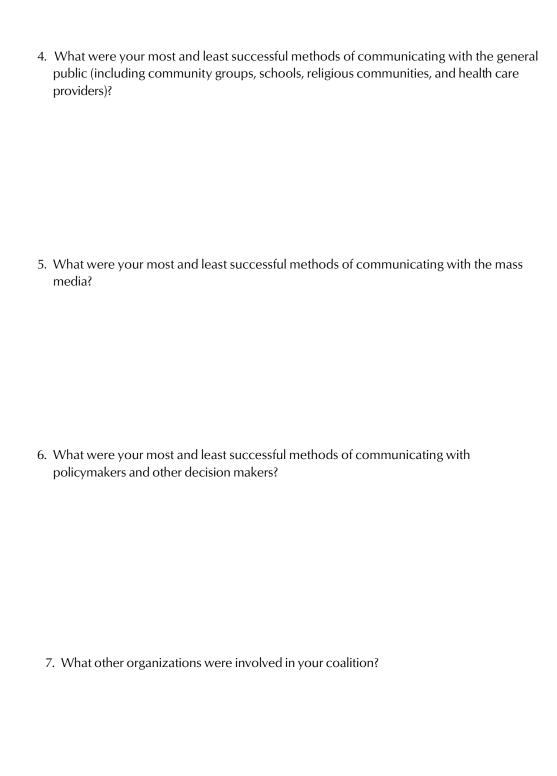
# Feedback

# We want to hear from you!

We encourage you to contact us and tell us about your advocacy efforts. Following is a list of questions to help us understand how we can create a more useful handbook in the future. Please photocopy this section, fill it out, and send it to the address at the end of the section. Feel free to attach additional information, samples of materials you developed, and photographs.

As a "thank you" for your efforts, we will add your organization to our mailing list for free copies of our advocacy-related publications.				
1. Tell us about your organization.				
2. For what issue(s) are you advocating?				

3. What advocacy strategies did you use?



Feedback Form

8. What was the most difficult part of maintaining the coalition?
9. What were the benefits of belonging to a coalition?
10. What information or assistance would make your effort more successful?
Please send this form and other materials relating to your advocacy efforts to:
Bill and Melinda Gates Children's Vaccine Program at PATH c/o Advocacy Communications and Training Team 4 Nickerson Street Seattle, WA 98109 U.S.A.
Or e-mail: info@ChildrensVaccine.org