

Advocacy Toolkit



A toolkit to equip young people with the skills to become powerful advocates for Youth Sexual Reproductive Health and Rights (YSRH&R)



Earlier this year, when I arrived in the UK from Uganda to lead the Advocacy for Youth Sexual and Reproductive Health and Rights project (YSRH&R) with Students Partnership Worldwide (SPW), I came with one message for young people in the UK. It was this: young people across both the developing and the developed world are confronted with the same sexual and reproductive health problems and yet we live in worlds that differ dramatically in terms of access to essential SRH services, information and supplies. There is an urgent need for young people in the developed world with more liberty and power than us, to advocate for universal access to these vital youth friendly SRH services.

Uganda's population is predominantly young with one in every three (33.5%) Ugandans being a young person aged between 10 – 24¹ as of 2004 when the population totalled 24.7 million. Since then the population has grown and is currently estimated at around 27 million with the majority still being young people. Just as in many developing countries, these young people face numerous Sexual and Reproductive Health and Rights (SRH&R) problems. An incredible 46% of all people living with HIV and AIDS in Uganda are young people aged 10 – 24. Unplanned pregnancies, unsafe abortions and unprotected sex coupled with inadequate youth friendly SRH services and limited access to supplies such as condoms and other contraceptives

provides an unfortunate yet accurate picture of the sexual life of a young person in Uganda.

What makes young people particularly vulnerable is their dependency, inexperience and a lack of positive guidance. Furthermore, conflicting social value systems and economic constraints compound this already vulnerable position.

This is why there is such an urgent need for young people like us, regardless of the country we live in, to stand up and advocate for positive change...for a future that will see less young people dying due to unacceptable inaccessibility to adequate, timely and youth friendly SRH services and supplies. This toolkit is designed to empower young people in the UK to advocate for youth led and youth targeted interventions that will address the difficulties faced by young people in accessing SRH services and supplies in the developing world. It is one of the best toolkits I have ever read, developed entirely by young people and as I return to Uganda my message to the young advocates and young people of the UK is this; continue to pressurize the policy makers and those in power for positive change and progress. There is no room for negligence and no time for bureaucracy when it comes to advocating for young people's SRH&R.

Richard Wanzala

SPW Advocate for Action

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Glossary

A4A	Advocates for Action: Youth led Advocacy Group coordinated by Students Partnership Worldwide (SPW) www.spw.org	HIV treatment	Antiretroviral drugs (ARVs) delay the onset of AIDS. They slow down the replication of the HIV virus and can significantly improve the length and quality of an HIV+ person's life.
AIDS	Acquired Immune Deficiency Syndrome. Condition caused by HIV which occurs when an HIV+ person's immune system is so weak that other viruses such as TB or pneumonia, are able to invade and infect the body.	ICPD	International Conference on Population and Development (1994) was coordinated by the United Nations in Cairo, Egypt. The ICPD confirmed the close links between sustainable development, reproductive health and gender equality. 179 countries agreed that education and health, including reproductive health are prerequisites for long term sustainable development.
APPG	All Party Parliamentary Groups are made up of politicians from all different parties who come together to discuss a particular issue of concern. APPGs allow others such as campaign groups to become involved in discussions and influence politicians. The APPGs relevant to SRH&R are the APPG on AIDS and the APPG on Population, Development and Reproductive Health.	Maputo Plan of Action	The African Union's plan of action for achieving Universal Access to Comprehensive Sexual and Reproductive Health Services in Africa. The plan was agreed at a conference in Maputo, Mozambique in September 2006.
African Union	An organisation consisting of fifty-three African states. Established in 2001. The purpose of the union is to help secure Africa's democracy, human rights, and a sustainable economy.	MDGs	Millennium Development Goals
DFID	UK Government's Department for International Development	NGO	Non Governmental Organisation
G8 Summit	Meeting where leaders of 8 of the world's most powerful countries discuss some of the world's most pressing issues.	SMART	Specific, Measurable, Action-oriented, Realistic and Time-based
HIV	Human Immunodeficiency Virus. The HIV virus infects key cells (called CD4 cells) which co-ordinate the immune system's fight against infection. HIV prevents the immune system from working properly.	SRH	Sexual and Reproductive Health
		(Y) SRH&R	(Youth) Sexual and Reproductive Health and Rights
		STI	Sexually Transmitted Infection
		Universal Access	Goal of making HIV prevention, treatment, care and support available to everyone across the world. At the G8 summit (2005), the UK Government led world leaders in committing to achieving universal access by 2010.



About This Toolkit

- Do you think it's shocking that 7,000 young people around the world (aged 15 – 24) are infected with HIV every day²?
- Do you think that young people have the right to decide what happens to their own bodies?
- Do you think it's crazy that despite 60% of all new HIV infections occurring amongst young people their sexual health is still not a priority for the UK government's Department for International Development (DFID)³?

If you answered 'YES' to any of these questions then it's time you joined us in taking a stand. Whether you are a student, a professional, an artist or an astronaut we want YOU to join us in influencing international policies, raising awareness of the specific needs of young people and advocating for our rights!

This toolkit has been created for young people in the UK to advocate for the Sexual and Reproductive Health and Rights (SRH&R) of young people around the world. It will equip you with the skills and knowledge to get the UK government to take this problem seriously, and push them to take action.

Inside you'll find more information about SRH&R and a step-by-step guide to building an effective advocacy campaign — from figuring out who to target to exploring ways to get people to listen.

We hope you enjoy this toolkit and will be inspired to join us in advocating for the rights of young people in this important issue.

A Quick Snapshot

Who are young people?

The definition of "young people" varies across the world but for the purpose of this toolkit we will adopt DFID's definition which refers to people between 15 – 24 years old.

What are "Sexual Reproductive Health and Rights"?

The International Conference on Population and Development (ICPD) defines reproductive health as: "a state of complete physical, mental and social well-being and not merely the absence of disease. . .⁴"

Sexual and reproductive health care refers to the different methods and services that play a part in our reproductive and sexual well being⁵ i.e. a course of antibiotics to treat Chlamydia or knowing where to obtain contraceptives such as condoms.

What about rights?

Sexual and reproductive health is not only about disease, it also encompasses a collection of related health and human rights issues.

We have rights over what we do with our bodies:

- we have the right to plan when we want to have children.
- we have the right to decide if we use a condom
- we have the right to say no to sex.
- we have the right to enjoy sex.

Who are we?

Advocates for Action (A4A) is an advocacy programme run by young people for young people and coordinated by Students Partnership Worldwide (SPW). Young people are disproportionately affected by Sexually Transmitted Infections (STIs), unplanned pregnancies and unsafe abortions. Young people are institutionally ignored in the policy making processes that affect their health and lives. We are determined to take our seat at the table and get the government to take action to address this injustice.





The Youth of Today

Understanding the facts

So what's the big deal?

The big deal is that millions of young people are dying from unsafe abortions, unplanned pregnancies and AIDS related illnesses. Millions of young people are being forced into sex; and millions more are contracting STIs, being discriminated against and stigmatised.

The big deal is that all this is essentially preventable.

The World Health Organisation (WHO) knows that SRH education can save lives. In a review of sexual health programmes around the world they found that good-quality SRH education empowers young people with the life skills they need to make informed, safe choices about sex⁶.

As young people across the world we need to come together and demand our rights to SRH education and fight for our right to make informed decisions about our behaviour.

What is advocacy?

Advocacy can be anything from a young girl exercising her right to go to school, to the head of a non-governmental organisation (NGO) chatting with an MP about an issue. Whatever form it takes it will involve "The act or process of supporting a cause or issue⁷".

Throughout this toolkit you'll find advocacy ideas and examples in coloured boxes. If there are any terms we use that you don't understand, refer to the Glossary page at the front.

The main issues in young people's sexual and reproductive health are:

- **Unintended and unsafe pregnancies**
Pregnancy is a leading cause of death for young women aged 15 to 19 worldwide, with complications of childbirth and unsafe abortions being the major factors⁸. For both physiological and social reasons, girls aged 15 to 19 are twice as likely to die in childbirth as those in their twenties⁹. Worldwide nearly four and a half million adolescents undergo abortion each year; 40% occur under unsafe conditions¹⁰
- **HIV**
60% of all new HIV infections occur amongst young people. Every minute more than five young people acquire HIV, every day an estimated 7,000 young people are infected with the virus¹¹
- **Other STIs**
Every year 100 million new cases of largely treatable STIs occur among young people¹³. Due to lack of access to services and fear of discrimination many of these infections go untreated and cause multiple problems including infertility (from Chlamydia), brain damage (from syphilis) and increased risk of contracting HIV. Unsafe sex is the second most important risk factor leading to disability or death in the poorest communities

"Young people, especially adolescents, struggle with their physical and emotional changes — appropriate information helps them to cope better with the seismic changes happening within their body and minds, without which they are lost in a world of doubt, suspicion and frustration regarding these changes. SRH education eliminates all these anxieties, which generally are not faced by adults".

Rex Joshua

(27 yrs old)

Assistant Monitoring & Evaluation Coordinator of SPW India



HIV/AIDS awareness event, Zambia



HIV awareness drama, Nepal



The Youth of Today

Understanding the facts *continued*

Why are young people at risk?

- they are more likely to have unexpected and unprotected sex.
- they are often denied the information, skills, health services and support they need to navigate adolescence safely and postpone sex until they are physically and socially mature and able to make well-informed, responsible decisions.

Gender imbalances

Women are more vulnerable to STI infections than men for biological and social reasons:



- Biologically the vagina has a larger surface area than the penis, this means that it is easier for sexual infections to enter into the bloodstream.
- Young women can find it difficult to ask their partners to use condoms as men often have more power in sexual relationships. Female condoms can be very expensive and many women still rely on their partners for money. Poverty can also drive women into sex work or transactional relationships where they exchange sex for food or other goods. In many cases, a girl's first sexual experience is forced. More than half the young women in a Malawi study reported coercion and over 20% of young women surveyed in Nigeria reported being forced to have sex¹⁴.



- Young men face tremendous pressure to be sexually active and are, therefore, less likely to seek information about how to protect themselves and their partners for fear of appearing inexperienced. Often social norms dictate that boys and young men should "adopt aggressive, even predatory sexual behaviour"¹⁵.

SRH&R: a matter of life and death

What exactly is the situation in developing countries?

Lack of information

- Globally, 87 percent of young men and 80 percent of young women (15-24) are unable to correctly identify prevention methods of HIV transmission¹⁶.
- In Somalia, 19 out of 20 young women and 17 out of 20 young men (15-24) had never used a condom¹⁷.

Lack of appropriate services

- Fewer than one in five people at risk of infection globally have access to basic prevention services such as voluntary counselling and testing, condoms and treatment for STIs¹⁸.
- Young people also face a number of barriers to accessing sexual health services including fear that their confidentiality will be breached, long distances to services and health providers that are often reluctant to serve adolescents¹⁹.

In summary young people need:

- Information: appropriate SRH&R information is essential, ideally before sexual activity starts, in order for young people to make informed decisions.
- Skills: life-skills based SRH&R education can enable young people to make choices about their health such as negotiating condom use.
- Youth-friendly health services: easily accessible, confidential and affordable services are needed such as voluntary HIV counselling and testing (VCT) and condoms.
- A safe and supportive environment: to enable young people to safely navigate adolescence and lead safe and healthy sexual lives.

It may seem to be a tall order, but it is by no means impossible. We know that SRH education works, we know that it can decrease rates of STIs and unintended pregnancies. We just need to convince decision makers and the people on the ground that appropriate SRH education can change the lives of millions of people across the world.



The Policy Context

It's important to remember that we are not advocating within a vacuum. There are important international frameworks and policies that will impact on the success of our advocacy work. The more we understand about the context we're acting within the better equipped we'll be to fight our battle.

Two international agreements that have had a major impact on the youth SRH&R advocacy environment are:

- The Millennium Development Goals
- The Maputo Plan of Action

These agreements can be seen as our ammunition when we are making the case for improved YSRH&R.

So what are the MDGs and how do they relate to Youth SRH&R²¹?

They are the goals agreed by 189 countries in 2000 to try and help the poorest nations make significant progress towards a better life. And they need to be achieved by 2015!

- 1 Eradicate extreme poverty and hunger
- 2 Achieve universal primary education
- 3 Promote gender equality and empower women
- 4 Reduce child mortality
- 5 Improve maternal health
- 6 Combat HIV/AIDS, Malaria and other diseases
- 7 Ensure environmental sustainability
- 8 Develop a global partnership for development

What have the MDGs got to do with sex?

Sexual and reproductive health and rights are important to nearly every one of the MDGs.

For example:

- Early pregnancy keeps young people in poverty (often young mothers cannot support their children) making it harder for a country to meet MDG 1.
- Unsafe abortions occur most often in young women (15 – 24) and are a major contributing factor to maternal mortality making it harder for a country to meet MDG 5.

But, it is not all doom and gloom. If young people had access to SRH&R appropriate life-skills based education then the poorest countries would be able to benefit from a healthier and more productive generation of young people who could address gender inequalities, receive a vital education and tackle poverty.

The Maputo Plan of Action

The Maputo Plan of Action was agreed at a conference of the Health Ministers of the African Union held in Maputo, Mozambique in September 2006. It builds on the commitments of the MDGs and provides a guide for African countries to achieve Universal Access to comprehensive SRH&R. As a tool it provides us with the comprehensive ammunition we need to press our government for increased action on this issue. Not only is the entire plan focused on our cause, but it even has a priority focus on Youth-friendly services. See the Useful Resources section at the back for more information.

So let's bring it back to the UK...

The Department for International Development (DFID) is the part of the UK Government that manages Britain's aid to poor countries and works to eliminate extreme poverty.

DFID have two headquarters in the UK and 64 offices overseas. They work with the governments of developing countries, NGOs and multilateral institutions such as the United Nations, to bring people out of poverty.

The UK agreed to help the poorest nations in the world meet the Millennium Development Goals by 2015. Consequently, DFID has made the achievement of the MDG's their main priority. However, the chances of meeting these goals are slim.

DFID recognises that young people are a vulnerable group and claims to put them at the "centre" or "heart²²" of their response to the HIV pandemic. However, young people are invisible in the MDGs; they are excluded from DFID's development plans and consistently lumped together with other "vulnerable groups".

Our government has made a promise that they will not meet because they have failed to include the SRH&R needs of young people in their development plans. We think youth SRH&R needs to be included, explicitly, to achieve these global goals.

One study showed that in Dakar, Senegal young people visiting family planning clinics were told they were "too young" to receive contraception²⁰





Section A: Developing an Advocacy Strategy

Johnny Guaylupo

(25 years old)

Latino

I was raised in the South Bronx in NYC by my grandmother. I entered an all-boys Catholic school at 14 and was taught about abstinence and not to have sex until marriage. But that was where the confusion began. I wasn't straight, so how could I get married? I was a young gay boy in the wrong place.

In school I became friends with a classmate who was gay and through him met a 35-year old man. He introduced me to condoms, but a few months later the condoms were no longer on. I was in love and not educated about HIV/AIDS so I wasn't concerned.

One morning I woke up with a terrible stomach ache. My mom wasn't around because she was on the street, using drugs. I went through a few tests and a few days later I was told that I had HIV. I didn't know what to do. How could I be 17 and HIV-positive?

After a few hard years battling with depression and the side effects from my ARV treatment I decided to become a peer educator, to learn and teach about this virus that I carry so that others won't go through what I went through.

When I joined the Campaign to End AIDS, I joined a family. I heard many stories about the fights in the 80's for people living with AIDS and I knew I wanted to fight for my rights and for the

rights of people like myself everywhere. And that is what I am doing.

I currently work at Housing Works, an organisation focused on ensuring that adequate housing, services and opportunities are available to homeless people living with AIDS and HIV.

I am the face of HIV: I am a 25-year-old, gay, Hispanic, HIV-positive man, and I don't feel that the US government or any other government in the world is doing what they should and can do to control and stop the spread of HIV.

This has to change, and the more young people know about protection and the more they come out about their HIV status, the fewer people will have to live a secret life.

My message to young advocates: Use your voice! If we work in solidarity fighting for the same cause the decision makers will hear us and they will hear us loud and clear. We are the future's leaders we cannot and will not be ignored.



Johnny Guaylupo being arrested at a demonstration against abstinence only policies, US

ACTIVITY:

Sexual Health Quiz

Check your knowledge:

- 1 Chlamydia often has no symptoms
True/False
- 2 HIV cannot be transmitted through breast milk
True/False
- 3 Statistics show that people in African countries have more sexual partners than people in the UK. This is why they have higher rates of HIV.
True/False
- 4 How can you tell whether or not someone is HIV+?
a) They have a rash on their face
b) They look very tired
c) Flu-like symptoms
d) You can't — they look the same as everyone else
- 5 Young people account for more than 50% of total HIV prevalence in the world
True/False
- 6 Is it possible to lower the risk of an HIV positive woman infecting her baby before birth?
Yes/No
- 7 In most developing countries young girls (15–24) are more vulnerable to SRH related problems than young men of the same age.
True/False
- 8 How effective are condoms at preventing pregnancy if used consistently and correctly?
a) 50% b) 85% c) 99%

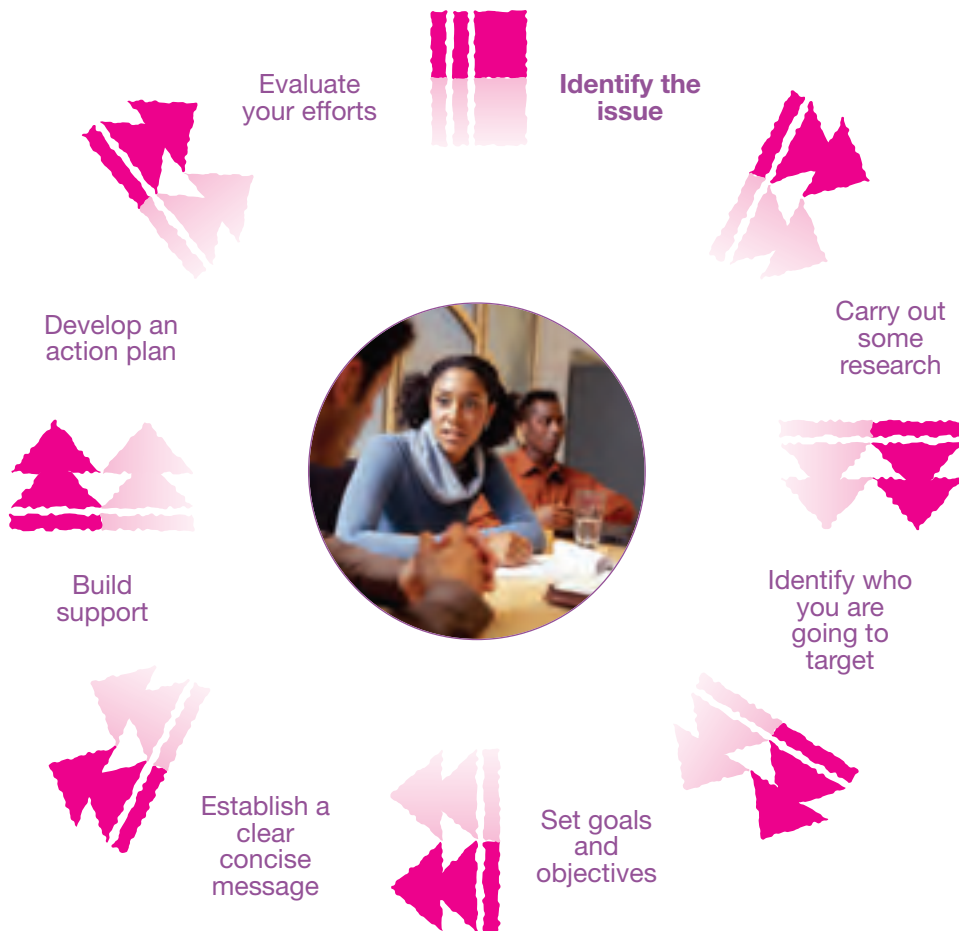
Answers: 1 True 2 False 3 False 4 d 5 True 6 Yes 7 True 8 c



SPW peer educators, Sierra Leone



In order to build a really effective advocacy campaign you need to have a plan. The best place to start is with the tried and tested advocacy strategy below²³.



Step 1

Identify the issue

The previous pages have highlighted many of the SRH&R related issues affecting young people around the world, but it is always helpful to summarise:

- Young people are often sexually active.
- Young people across the world are disproportionately affected by problems relating to sexual and reproductive health.
- Whilst our government has recognised that young people are “particularly vulnerable to problems of sexual and reproductive health²⁴”, they have not translated this into any specific policies.
- Young people are suffering, becoming ill and dying because of inaccessibility to SRH&R services and supplies.



Student Stop AIDS Campaign meet Hilary Benn

Step 2

Carry out some research

Find out the facts about the issue:

- Who does this issue affect? How? And why?
- Who is involved?
- What needs to change?

This toolkit provides you with some initial research to get you started.

For more information check the Useful Resources section at the end of the toolkit.

ACTIVITY:

The Problem Tree²⁵

This is one best done in a group, but equally you can do it yourself with a pen and paper. This activity will help you break down the issues and identify the root causes and consequences. You might need to do some reading and research in preparation!

Materials needed: flip chart and marker pens/pen and paper

Time: 20 mins

Steps:

- 1 If you are working in groups have no more than 8 people per group.
- 2 Identify the core problem you are working on e.g. young people's lack of access to information on sexual health issues or the exclusion of young people's SRH&R from development plans. Different groups could choose different core problems. Write this on the trunk of your problem tree.
- 3 Brainstorm a list of causes, e.g. adults deny that young people are sexually active. These are the roots of your tree.
- 4 Brainstorm a list of consequences of the core problem e.g. fast increasing rates of HIV infection amongst young people. These are the branches of your tree.
- 5 If you are working in groups it can be very productive to stick the trees up on the wall and discuss each topic and how it relates to the key problem. Once you have completed this exercise you may want to identify further research you need to do to plan your advocacy campaign.

When you are coming up with your objectives you may find it useful to refer to the causes on your problem tree.



South Africa



Step 3

Identify who you are going to target

- **So who has the power to do something about this issue?**

Choose your target:

Finding out who holds the power is the key to successful advocacy. Often this involves finding people who you'll be able to influence locally. Constituents have a strong voice because of their voting power; they can call on their MPs for action on important issues.

Who are you going to lobby?

Which individuals have the power to help you to achieve your objectives? Do you or anyone you know have any existing connections to a decision maker who could help you?

Know your target:

Research the decision makers who will be involved in international sexual health policies and decide who you will approach and in what order. Start with firm supporters, their support will extend your network so by the time you meet with the hotshots you can impress them with the amount of support you have for your cause. Then, learn all you can about them — check speeches, newspaper articles and the internet with a fine-toothcomb. Do they support your advocacy issue? Do they have any personal connections with the issue? Do they have teenagers themselves? Are there any barriers that might stop them doing what you ask? If so, explore them and think of ways around them!

See the Useful Resources section for tips on how to contact your MP.

ACTIVITY:

Decision Maker Role Play

This activity works best in pairs but if you don't have a partner just imagine each scenario, how you might react to it, what you might say and how the decision maker may respond. This activity will help you to develop the skills necessary to confidently meet with a decision maker and get your message across clearly and concisely.

Materials needed: different sheets with scenarios on

Time: 10 mins (5 mins per person then switch over)

Steps:

- 1 Split into pairs
- 2 Each pair has one of four different scenarios

Scenario 1 — You get in a lift with the Secretary of State for International Development. He has just returned from Uganda. Advocate for funding for youth-led SRH&R projects.

Scenario 2 — You meet with your MP at an HIV awareness event in your community. Advocate for increased research into youth SRH&R.

Scenario 3 — You meet the head policy adviser from a large international NGO during the lunch break at a conference. Challenge them on why their organisation does not recognise youth as a specific and marginalised group.

Scenario 4 — You are working as a receptionist for someone highly important and the President of the US phones to speak to them. You have a maximum of 30 seconds to talk to them before you have to put the call through. How will you persuade them to reconsider the focus on abstinence only prevention programmes?



Youth Resource Centre, Zambia



Meet a Young Advocate



Katy Athersuch

(23 years old)
British

How did you become involved with SRH&R?

I first became involved with Sexual and Reproductive Health and Rights advocacy through the Student Stop AIDS Campaign at University. The avoidable devastation that is being caused by the spread of HIV is an outrage. That's what first inspired me to get involved.

What do you feel most strongly about?

It sickens me that in a recent report it was shown that there are approximately only 10 condoms available per man per year in Africa. All too often people are not given the information and services they need to protect their own health and this is wrong.

What is your message to other young advocates?

Raise your voices because you can. Not everyone has that privilege. You do so make sure you use it!



Step 4

Set goals and objectives

What is a goal?

Your overall aim — what your advocacy campaign hopes to achieve in the long term.

What is an objective?

The milestones you seek to achieve along the way to help you to reach your goal. Your objectives should be SMART (Specific, Measurable, Action-oriented, Realistic and Time-based).

What about tactics?

Tactics are the activities you carry out to achieve your objectives. Make sure these match your objectives. . .

For example:

Goal

to get DFID to increase funding into young people's SRH&R services.

Objective 1

to get your local MP to raise the issue with the Secretary of State for International Development.

Good Tactic

e.g. invite your local MP along to a meeting where you show a video about young people's SRH&R in developing countries.

Bad tactic

e.g. invite your local MP along to a meeting then spring a stunt on her by pelting her with condoms and getting the photos in the local paper!

The tactic must fit the objective or it won't be very useful!

What is a campaign?

A campaign is a coherent series of activities, they may come one after another or they may overlap, but the most important thing is that they all work towards a clear aim.

Before you start a campaign you need to come up with the goals and objectives.



Step 5

Establish a clear, concise message

So, once you have created a clear goal and a set of objectives you need to be able to explain to people what you're trying to change! This is often harder than you think, so break your message down into:

- Findings; either quantitative or qualitative.
 - Quantitative data refers to figures or statistics e.g. 62% of Bangladeshi women experience physical or sexual violence by an intimate partner²⁶.
 - Qualitative data is more concerned with case studies, examples or testimonials that can help to explain the numbers gained from quantitative data e.g. "My husband slaps me, has sex with me against my will and I have to conform. Before being interviewed. . . I thought this is only natural. This is the right way a husband behaves." Bangladeshi woman.
- Implications are broad statements that express a need, a direction, or new information implied by the findings e.g. there is a need to develop various ways to inform women about partner violence and where to seek help. Implications are a bridge from your key findings to recommendations.

- Recommendations are aimed at the decision-maker and should be SMART (Specific, Measurable, Action-Oriented, Realistic, Time-bound) e.g. By December 2007, develop, pre-test and print an information booklet about different forms of intimate partner violence and distribute it to local women's groups, at doctors' offices, churches, and schools.

Tips for developing messages

- use simple and concise language
- tailor the message to fit the audience
- avoid technical jargon
- ensure language and tone is consistent with the message



ACTIVITY:

Messaging Exercise

It's useful to do this activity in a group so you can all share ideas, but it's easy to do it alone too. This activity will help you to understand the differences between findings, implications and recommendations and their importance in the creation of a message.

Materials:

Coloured card (3 colours per group, different colour for finding, implication and recommendation) and marker pens. If you are working alone, just write the headings at the top of each piece of paper.

Time: 25 mins

Steps:

- 1 Split into small groups
- 2 Pick your findings: Use the facts in this toolkit to decide which statistics are most important for your campaign. Pick one or two statistics — write them on a piece of card.
- 3 Write your implication: Look back at the example of domestic violence. Remember an implication expresses a need. A good way to phrase your implication is "There is a need..." Write your implication on a different coloured piece of card.
- 4 Come up with your recommendation for these findings (make it SMART). What action do we want? What would make the situation better?

Findings → Implication → Recommendation



Step 6

Build support

“United we stand, divided we fall”

Create allies with a variety of organisations and individuals who can bring in their ideas, skills, connections and voice. The larger your network, the greater the chances of success.

ACTIVITY:

Picture Your Network

As a group, or on your own, brainstorm all the individuals and organisations who will support your advocacy efforts.

Materials:

Flip chart and marker pens/pen and paper

Time: 15 mins

Steps:

- 1 Split into small groups, each group with a flip chart and marker pens.
- 2 Draw a picture of yourself in the middle of the paper and then, as with a spider diagram, draw pictures of the different organisations and individuals who could assist you with your advocacy campaign.

Step 7

Develop an action plan

This is the really fun bit! The who, what, where, when and how of your advocacy campaign.

Below are some suggestions of how to advocate, you can probably think of loads more. While we can make suggestions it is up to you how to put them into action.

There are no hard and fast rules when it comes to advocacy — advocacy can be sung, spoken, written or acted. But one thing is for certain — the most effective advocacy campaigns are those led by the people affected by the issue and committed to the cause.

We are the best spokespeople to raise concerns about young people’s sexual and reproductive health issues because we are the young people.

- **Campaigning:** high profile activities to exert pressure for change e.g. holding an APPG (All Party Parliamentary Group) meeting at the House of Commons.
- **Lobbying:** a face to face meeting with targeted decision-makers e.g. meeting with your MP, attending an APPG meeting.
- **Witness:** using stories and accounts from people to raise issues. Give people a platform to speak directly to policy makers and those in a position of power e.g. hold an event, invite young HIV+ speakers from developing countries to share their experiences of SRH&R issues in their country.



World AIDS Day Event, Sierra Leone



Students Campaigning for the G8 Summit

Example:

The Student Stop AIDS Campaign

In 2005 the UK hosted the G8 summit — a meeting where leaders of 8 of the world's most powerful countries discuss some of the world's most pressing issues. Hundreds of students around the UK joined a campaign to put the issue of universal access to HIV treatment on the G8's agenda. They protested in Trafalgar Square, met with their MPs, held letter writing campaigns and even followed the leaders up to Scotland where the summit was being held to protest on the streets of Edinburgh. These young people played a key role in securing the commitment by G8 leaders to Universal Access to treatment for all people living with HIV by 2010!

ACTIVITY:

Diamond Ranking Exercise²⁷

This activity is a great way for you to start thinking about the most effective ways to advocate for governments and decision makers to include a focus on youth SRH&R in their development plans. If you are not working in a group just jot down the examples below on Post-it notes or individual scraps of paper so you can rank them yourself.

Materials:

Flip chart paper, set of nine pre-written Post-it notes

Post-it notes: Face-to-face meeting with MP; face-to-face meeting with the Secretary of State for International Development; article in a local newspaper; holding a big event with HIV+ young speakers from around the world and inviting members of parliament, NGO staff and young people; showing a video on importance of youth SRH&R to decision makers; writing a position paper on youth SRH&R and sending it to DFID; meeting with representatives from other NGOs; local radio interview on importance of youth SRH&R; writing a letter to your MP.

Time: 5 mins

Steps:

- 1 Split into small groups.
- 2 Rank the nine different advocacy methods according to how effective you think they would be at getting governments and decision makers to include a focus on youth SRH&R in their development plans.
- 3 Place the most effective method at the top of the chart, place the two second most effective methods below that, and so on with the least effective method at the bottom, forming a diamond pattern.
- 4 If you are working in groups, put the charts on the wall and compare them.



SPW peer educators, Sierra Leone

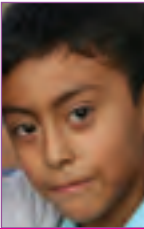
Now you have some ideas about how to advocate you can begin to formulate your own plan. By filling in the Advocacy Planning Table on the next page using the

information you have gathered from the previous activities you can develop an interesting and effective strategy for action.



Advocacy Planning Table

Issue	Target Audience	General Goal	Specific Objectives	Allies	Suggested Activities



Step 8

Evaluate your efforts

Campaigning and advocacy work takes time and effort and the only way to make sure that that time and effort doesn't go to waste is to see what impact they have had. To know this you'll need evidence.

Some of that evidence might be quite quantitative — like the number of email addresses you get at a promotional stall. Some could be quite informal — like chats you had with people who attended a video screening.

At least some of your evidence should be linked to the planning you did at the start. If your campaign asks were SMART, then the M (measurable) bit should make evaluation a lot easier. So it could be whether the MP actually contacted the Secretary of State like you'd wanted.

When you get a chance as soon as possible after an action or event draw together this evidence, formal and informal and talk it over as a group, brainstorming the bits that went well and the evidence for the successes; the bits that didn't work so well and the changes for the future. You might find it useful to break this down into the inputs — or planning, the process (the action or tactic), and the output — or results. See the table below for an example of you might evaluate an activity.

The most important aspect of evaluation is that you learn from it, and that it feeds into your future campaign so it is constantly being strengthened. So the final stage should look at the future and the next steps for the campaign.

Advocacy Activity	What worked well	The evidence	The bits that didn't work so well	Changes for the future of the campaign
Meeting with an MP	<ul style="list-style-type: none"> Made all the points we wanted to make Got her agreement that the problem needed government action 	<ul style="list-style-type: none"> Managed to structure the discussion according to our plan Verbal agreement to follow up with PM's Office by letter 	<ul style="list-style-type: none"> Failed to gain her signature on our petition calling for specific action Forgot to bring campaign pack for her 	<ul style="list-style-type: none"> Needed to focus on getting public support from her Must follow up meeting with campaign pack and thank you letter



World AIDS day, Sierra Leone



World AIDS day, India



Section B: How to...

How to... Lobby²⁸

“It’s not what you know, it’s who you know”

A large part of successful advocacy depends on the relationships advocates develop with decision makers and a face-to-face meeting is a great way to start your advocacy activities. This might fill you with a sense of dread, but do not fear. With these top tips you will sail through, get your points across clearly and come away with a great sense of achievement.

Pre-meeting:

- Send a letter of invitation to the decision maker, detailing your advocacy goal and requesting a meeting with them. Follow the letter up with a phone call.

Preparation for meetings:

- Be focused: Choose your main objective and keep it in mind as you develop a simple message for the meeting.
 - What you want to achieve.
 - Why you want to achieve it, explain the dangers of doing nothing.

- How you propose to achieve your goal — 3–4 points.
- What action you want the decision maker to take.

Impress the decision maker with a short briefing paper you prepared earlier (true Blue Peter style!) to remind them of the points you made in the meeting.

During the meeting:

- Attitude — be confident and polite. Keep eye contact, if you can!
- Get to the point — use phrases such as “I believe” to show that you assume responsibility for your thoughts.
- Tell them who else supports your cause: e.g. other decision makers, other NGOs.
- Give the decision maker time to speak, it is important to know their opinions.
- Be flexible and listen to any suggestions or alternatives the decision maker may have.



Sierra Leone



Youth Week, Tanzania



"Saying no to sex" SPW peer educators acting out a drama



How to . . . Write a Briefing

A briefing paper clearly states the issues you are advocating for and gives your opinions on the action needed.

- If you don't know something tell them you don't know but that you will find out.
- If you're in a group allocate different roles (e.g. note-taker, observer, questioner).
- At the end of the meeting restate what you understand the decision maker has said they will do e.g. "Thank you very much for meeting with us today, we're very glad that you will be able to. . ."

After the meeting

- Follow up with a thank you letter restating what you understand he/she will do.
- Find out the outcome — did they do what they said they would? If not, why not?

Practice makes perfect: Role-play what you want to say at the meeting, prepare for possible responses and questions! And remember lobbying can happen anywhere.

Who is it for? **Journalists:** attached to a story to give them more knowledge.
MPs or decision makers: at the end of an event/meeting.
Anyone who needs to be educated about the issues.

What should it look like? Short and concise
 Snappy and catchy!

What to include in a Briefing Paper:

Background: what are the issues, what other policies, frameworks etc support the recommendations.

Evidence: give the facts and figures as well as case studies and examples which support your recommendations.

Your position: give a logical explanation of how the evidence leads to the recommendations. (Make sure you provide answers to potential questions or objections).

State your 'asks': SMART recommendations and actions that the decision maker can take.

Contact Details: give the name of your organisation and logo (if you're part of one), your mission and goals and a contact person with their email/contact details.





How to... Write a letter to a newspaper²⁹

Letter to the editor: Write a letter in direct response to an article published in the paper. This is a great way to get your message across to a large number of people. The more reputable the paper you are published in, the greater your impact, but don't forget, targeting your local media might be more effective if you are lobbying your local MP.

How to write a letter to the editor:

- Read other letters in the Editor's section of the paper; get a feel for the kind of things they print.
- Identify an article that links in to your campaign e.g. concern about the increasing rates of STIs, or unplanned pregnancies.

Use that article as a platform to voice your opinion; the best letters are those that show a strong reaction so don't be afraid to voice your opinions!

Content:

- 1 Make sure you include all your contact details.
- 2 Refer to the previously published letter, a news story or column, including headline and date of publication.
- 3 Focus on one or two key points, keeping it punchy (it will be edited). Use evidence and be witty!
- 4 Mention your organisation and gain others support; the more organisations that support your statement the greater impact your letter will have.
- 5 Don't make disagreements personal. Graciously offer the counter argument and try to advance the debate so that other readers might join in the discussion in subsequent letters.
- 6 Respond drawing from personal experiences. Make sure the piece contains your own voice.
- 7 Timing is critical; make sure that you respond the day you read the article.
- 8 Get others to proofread the piece for accuracy; if written on behalf of an organisation, get approval!
- 9 Email the letter, and then follow it up with a phone call to the Letters to the Editor department.
- 10 They will edit it, so call them to make sure that you get to see the final edit before it is printed.

How to... Write a letter to your MP

Writing a letter to your MP is a great way to get your message across. As a constituent your voice matters and your MP will write back to you. The more MPs hear about an issue from their constituents, the more likely they are to take action.

There is no set formula for writing to your MP and in fact the more original your letter is, the more likely it is that your MP will pay attention. A very simple structure will ensure that your letter is clear and concise. We suggest following this 3 step guide:

- Introduce yourself.
- Set out the problem and why it is important.
- Clearly state what action you want them to take and thank them in advance for this.

As with other forms of advocacy, being polite is very important! Writing your own letter in your own words is by far the most effective, but here's one we made earlier that you can use for inspiration. In fact, this letter has been read by the Secretary of State for International Development and DFID are formulating a response.



Zambia



..... MP
House of Commons
London
SW1 0AA

Your address

Date

Dear

As a young person in the UK I am particularly concerned that 60% all new HIV infections worldwide now occur amongst young people aged 15–24. Despite such high rates of infection, the majority of governments and decision makers across the world do not focus on Youth Sexual Reproductive Health and Rights (YSRH&R) in their development plans.

When conducting research into DFID's policies on young people's sexual health I was surprised to find very little. It appears that whilst young people currently fall under DFID's overall approach to SRH&R, there are no recent publications or specific documents on young people and Sexual and Reproductive Health and Rights.

I strongly believe that for DFID to reach their Millennium Development Goals (MDGs) the UK government needs to include a focus on youth in their development policies, there needs to be more research into young people's SRH&R and young people should be actively involved in decision-making and in the design and implementation of YSRH&R programmes. In order to reach the MDGs, the UK government and other donors must increase specific funding and research spending on young people.

As young people in the UK, we are often accused of being an apathetic generation — many young people feel that our government does not listen to us, does not care about our opinions; therefore there is little point in voicing them. However, I have faith in democracy, and I believe that one of the most effective ways to bring about change to millions of young people's lives is by making parliamentarians aware of the specific needs of young people. When it comes to sexual health education; lumping young people together with the rest of the population simply does not work — given that STIs are most common amongst 15–24 year olds I firmly believe that there should be a separate approach for this age group.

Please raise these issues in Parliament, I look forward to hearing from you.

Yours sincerely,



Resources to help you Advocate

Useful Resources:

- **Advocates for Youth:** www.advocatesforyouth.org
- **AIDSPortal:** www.aidsportal.org
- **Chasing the Dream:** www.chasingdream.org
- **DFID website:** www.dfid.gov.uk
- **Interact Worldwide:** www.interactworldwide.org
- **International Planned Parenthood Federation (IPPF):** www.ippfwhr.org
- **Interagency Youth Working Group:** www.youthwg.org
- **Oxfam Generation Why:** www.oxfam.org.uk/generationwhy
- **Pressureworks:** www.pressureworks.org
- **STOP AIDS Campaign Website:** www.stopaidscampaign.org.uk
- **The Maputo Plan of Action is available to download here:** www.unfpa.org/publications/docs/maputo.pdf
- **UNAIDS:** www.unaids.org especially www.unaids.org/en/GetStarted/YoungPeople.asp
- **United Nations Population Fund (UNFPA):** www.unfpa.org
- **World Health Organisation:** Adolescent and Sexual Reproductive Health page: www.who.int/reproductive-health/adolescent
- **YouAct:** www.youact.org
- YouthNet
- **Youth Peer Education Network:** www.youthpeer.net
- **Family Health International:** Youth Reproductive Health project publications: www.fhi.org/en/Youth/YouthNet/Publications

Contacting Politicians:

You can find your MP, MSP, MEP or AM's address through the following sources:

MPS:

House of Commons, London, SW1A 0AA
Tel: 020 7219 3000 for their constituency address
email: www.writetothem.com
website: www.parliament.uk/directories/hciolists/alms.cfm

MEPs: Members of European Parliament

European Parliament UK Office,
2 Queen Anne's Gate, London, SW1H 9AA
Tel: 020 7227 4300
website: www.europarl.org.uk/uk_meps/MembersMain.htm

MSPs: Members of Scottish Parliament

The Scottish Parliament
Edinburgh, EH99 1SP
Tel: 0131 348 5817 for their constituency address
email: firstname.surname.msp@scottish.parliament.uk
website: www.scottish.parliament.uk/msp/index.htm
(click on biography)

AMs: Assembly Members of the National Assembly for Wales:

National Assembly for Wales,
Cardiff Bay, Cardiff, CF99 1NA
Tel: 029 20 825 111 for their constituency address
website: www.wales.gov.uk/who/constit_e.htm



World AIDS day event, Sierra Leone



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- 22 Taking Action, The UK's strategy for tackling HIV and AIDS in the developing world and Updating Taking Action, The UK's strategy for tackling HIV and AIDS in the developing world: a consultation document
- 23 Based on info from Tearfund International Learning Zone (TILZ) <http://tilz.tearfund.org/Publications/Footsteps+41-50/Footsteps+45/The+advocacy+cycle.htm>, The Policy Project Training Manual: <http://www.policyproject.com/pubs/AdvocacyManual.pdf> IPPF HIV/AIDS Advocacy Guide: http://www.ippfwhr.org/publications/download/monographs/HIV_Guide_e.pdf Save the Children: Advocacy Toolkit 2nd edition Jan 2007
- 24 DFID. Sexual and Reproductive Health and Rights: A Position Paper. 2004.
- 25 Save the Children: Advocacy Toolkit 2nd edition Jan 2007
- 26 A WHO-Multi-Country study on Women's Health and Domestic Violence against Women www.unicef.org/bangladesh/media_2802.htm
- 27 Based on an exercise from People and Planet "Building an Invincible Team" Workshop
- 28 Whole section on How to Lobby based on info from The Advocates for Youth Advocacy Toolkit My voice counts! Campaigns for Youth's Reproductive and Sexual Health, People and Planet "Building an Invincible Team" Workshop, AIDS Alliance. Advocacy in Action Toolkit, The Policy Project. Advocacy Manual: <http://www.policyproject.com/pubs/AdvocacyManual.pdf>, SARA Project. Ritu Sharma. An Introduction to Advocacy.
- 29 Info and advice from Rhon Reynolds, Senior Policy Officer and Deputy CEO at AHPN (African HIV Policy Network)

SPW is an international development charity. SPW recruits and trains young adults as volunteer professional peer educators to lead programmes that address the most urgent issues affecting the lives of youth and the communities they live in.

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