

NETWORKING AND COALITION BUILDING FOR HEALTH ADVOCACY ADVANCING COUNTRY OWNERSHIP

Brief

Katherine West Slevin¹ and Cynthia Green² ¹ Consultant, ² Futures Group

Networks and coalitions can be effective in mobilizing political will, influencing policy and financing, and strengthening health programs (Jorgensen, 2012). By sharing resources and workload, networks and coalitions can take advantage of their members' capabilities and skills to plan and implement joint advocacy campaigns, present a unified front, and make collective demands to government (USAID | Health Policy Initiative, 2008).

This brief is designed to provide leaders of civil society organizations (CSOs) with guidance on working within networks and coalitions to advocate for improved family planning (FP), HIV care and treatment, and maternal health (MH) policies and programs by

- Developing relationships and alliances with other CSOs and relevant stakeholders
- Building new coalitions and networks
- Strengthening existing coalitions and networks

- Engaging in collective advocacy
- Launching advocacy campaigns

Advocating Through Networks and Coalitions

Develop relationships and alliances with other CSOs and relevant stakeholders

Forming supportive relationships that extend beyond short-term initiatives can facilitate your work, strengthen civil society, and lead toward the formation of lasting networks and coalitions. When developing relationships, look for like-minded groups and individuals those working on related issues and/or with similar philosophies.







STEP

Explore the landscape. Start by mapping out the organizations that are already working on your issue and the major stakeholders.

Talk with partners to identify potential groups and allies and review the websites of possible partners. If many groups are active, you could conduct a stakeholder analysis to determine the interests of various groups and gauge their potential impact on your issue.

Meet key stakeholders. Contact the groups you have identified, attend planned events, and set up informal meetings.



Join existing networks and coalitions. Introduce yourself and your organization to networks and coalitions that already

work in your area of interest. Ask what you might gain from participating in the coalition and discuss what you can offer them. By tapping into existing networks, you capitalize on previously mobilized groups of credible operators that can help to move your agenda forward, establish trust, and introduce you to other potential stakeholders.



Cultivate relationships with decisionmakers. Seek out opportunities to directly engage policymakers; this could come in the form

of organized meetings, individual lobby visits, or formal mechanisms to solicit civil society input. Help facilitate this type of engagement by building good working relationships with the people who advise the decisionmakers you want to influence. This could include staff members at the ministry of health (MOH) or ministry of finance (MOF) or other technical advisors. Reach out to them and, ideally, bring them on board with your advocacy plan.

Build new networks and coalitions

If the right network or coalition does not already exist, it may be necessary to establish a new one to organize individuals and groups around your cause. Members do not need to agree on every issue, but they should support the primary mission of your group (Jorgensen, 2012). The most successful networks and coalitions take shape organically, coming together to address a specific issue or cause, but often expand to work on a wider range of issues.



Brainstorm potential members and invite people to join. Who are the key stakeholders and organizations that

should be included? Are there influential people who can act as champions for your cause and/ or mobilize political support or resources? Approach potential coalition and network members and invite them to join. Some will not need any convincing. For others, you may need to demonstrate the benefits of working together and how the coalition or network will serve their goals.



Look for opportunities to bring together people from different sectors that do not normally work together. Allies do not have to agree with each other all of the time, or on every issue, to be able to work together. By bringing together a variety of stakeholder groups (e.g., government, civil society, private sector) and topic areas (e.g., HIV, MH, FP, finance) you can broaden support for

your issue, ensure your work is informed by a diverse range of perspectives, and leverage a greater number of resources and skills (Jorgensen, 2012; USAID | Health Policy Initiative, 2010). Start by engaging new groups around shared priorities, opening up opportunities for future collaboration on a wider range of issues. For instance, an HIV-related rights organization and an FP program may partner around ensuring access to contraception for women living with HIV.

Draw on existing models of collaboration. While each group is unique, there are numerous examples and models to help new networks and coalitions get started. Learning from others' experiences can help new groups avoid some common pitfalls while instituting tried and tested strategies for effective collaboration (see Case Study 1).



(Continued) Agree on a common purpose, set priorities, and clarify expectations. The initial group of members

should agree on a shared vision, decide on the group's priorities, and determine how they will work together. Clearly defining roles and membership guidelines from the outset can help to avoid misunderstandings and ensure the group functions smoothly. Who will manage the coalition? Who will procure the funds and other resources? Is there a need for formal roles such as treasurer, secretary, and/or president? How are individual members expected to contribute? It may be helpful to lead members through a series of exercises designed to agree on a common purpose, set collective priorities, and define roles.



Build strong leadership. Successful networks and coalitions require strong leadership. Diplomatic leaders who can bridge power structures and bring together stakeholders with diverse views around common issues are key actors in the continued success of any coalition. The most effective leaders are those committed to the issue and skilled in communication, facilitation, and consensus

building (International HIV/AIDS Alliance, 2007; CEDPA, 2000). Ideally, they should also be strategic and able to devote time to manage the group (International HIV/AIDS Alliance, 2007; CEDPA, 2000). Involve members in deciding what skills and qualities are needed to effectively lead the coalition and in selecting the group's leadership.

Establish operating systems. To ensure the group is able to function smoothly and in a transparent manner, members will need to establish some key operating systems. How will the coalition's leadership communicate with its members? How will decisions be made? What kind of monitoring systems are needed to track the group's activities and progress toward its goals?

Involve disadvantaged, vulnerable, and marginalized populations. This can help to build the skills of these often underrepresented groups while helping CSOs better understand their issues (USAID | Health Policy Initiative, 2010). Invite representatives from these groups to join in your coalitions, networks, and advocacy efforts and to participate in forums they may not otherwise have access to. Lastly, incorporate participatory methods into your meetings to encourage broad participation.

Case Study 1: The Global Forum on MSM & HIV

Established at the International AIDS Conference in 2006, the Global Forum on MSM & HIV (MSMGF) organized a diverse range of stakeholders from various sectors around a common cause—"equitable access to effective HIV prevention, care, treatment, and support services for gay men and other men who have sex with men (MSM)" (MSMGF, 2010). Members include gay men affected by the HIV epidemic, as well as HIV advocates and policy, health, human rights, and research experts (MSMGF, 2010). The MSMGF established a governance structure and is currently presided over by a collegially appointed, 20-member steering committee intended to reflect the composition and diversity of its members (Metheny, 2012). Among other activities, the forum supports networking opportunities— both in person and virtually—for advocates and other key stakeholders; implements capacity-building initiatives; publishes individual country information via their website; and disperses information to local HIV/AIDS and MSM advocates and networks through electronic digests, discussion forums, and traditional and social media initiatives (Metheny, 2012).

Strengthen existing networks and coalitions

To ensure your group continues to function properly, maintains momentum, and remains relevant and effective, you will need to invest some energy in ongoing capacity building. Specifically, explore and address barriers that prevent existing members from fully participating and new members from joining; partner with experienced groups to increase the skills of your individual members; and continuously seek out opportunities to connect with other CSOs.



Promote active participation. Communicate with members frequently about their experiences participating in the group. Explore what facilitates and hinders their participation. Are Internet and/or phone connections problematic? Do members fail to see the value of participating? Is the required time commitment too demanding? Choose the forum best suited to elicit honest feedback, such as a group discussion, anonymous survey, or one-on-one conversation. Once you have identified barriers to involvement, have the group discuss strategies to address them to ensure members are vested in the solutions. To recruit new members, increase

your visibility by working with a wider range of stakeholders, celebrating your successes, and having a presence at key meetings and events. Remember to continuously demonstrate how members' priorities intersect with those of the coalition to help them see the benefit of being involved and sustain their participation.



Continuously seek out opportunities to connect with other CSOs and coalitions. Do not stop networking once your coalition is established. Continue to increase your visibility and influence. Seek out new members, attend meetings and events outside your usual circles, and look for ways to expand opportunities for your coalition. This not only helps to expand your network but also

ensures the continued accountability and relevance of your group. Consider partnering with other networks or coalitions working on similar issues to share knowledge and resources or establish a mentoring relationship with a more established network (i.e., twinning). This kind of partnership can serve to build both groups' capacities while strengthening civil society as a whole.



Establish mentoring relationships with technical experts that may have more experience and resources. Seek

out technical experts based in government and the private sector to join your network and/or offer workshops or lectures to help build the knowledge and skills of your members.

Engage in collective advocacy

Successful networks and coalitions can be highly effective advocates because of their collective influence and ability to harness a wide range of talents. Networks and coalitions should follow a systematic process to identify a specific change in a policy, program, or health budget and advocate for this change. If possible, work on an achievable short-term goal to gain experience and build confidence before tackling more complex challenges.



Select a feasible target for change. Initially, the group should review various desired policy, program, and budget changes

and then select an issue or action that has a reasonable chance of success. For example, persuading health officials to make a change in health service delivery norms or advocating for the inclusion of FP budgeting may be easier to achieve than gaining approval for a new national law.



Develop an advocacy plan. Based on your advocacy strategy, your advocacy plan identifies specific goals and objectives, priority audiences, carefully designed messages, activities including interpersonal and mass media outreach, measurable outcomes, and a timeline for accomplishing them. Be sure to develop objectives that are SMART (Specific, Measurable, Achievable,

Realistic, and Timebound) and choose activities that match available expertise and resources. Use a range of strategies for communicating your message(s) to your target audience(s). Excellent avenues for communicating your message and mobilizing support could include one-on-one meetings with decisionmakers and/or their staff; dialogues, meetings, and events; and the media (see Case Study 2).



(Continued)

Develop an advocacy plan. Based on your advocacy strategy, your advocacy plan identifies specific goals

and objectives, priority audiences, carefully designed messages, activities including interpersonal and mass media outreach, measurable outcomes, and a timeline for accomplishing them. Be sure to develop objectives that are SMART (Specific, Measurable, Achievable, Realistic, and Timebound) and choose activities that match available expertise and resources. Use a range of strategies for communicating your message(s) to your target audience(s). Excellent avenues for communicating your message and mobilizing support could include oneon-one meetings with decisionmakers and/or their staff; dialogues, meetings, and events; and the media (see Case Study 2).



Track your progress. Your advocacy plan should include a monitoring and evaluation (M&E) plan that specifies the indicators you will use to track progress and assess whether you have met your objectives. As your advocacy campaign unfolds, maintain a clear written account of your work and activities. You may need to adjust your approach based on new developments and

opportunities. While setting up an M&E system can seem like a daunting task, there are several resources to help you get started.

Raise funds for your advocacy work. Arguably, the greatest challenge in undertaking advocacy is finding the funding to support the work. This just means you may need to get creative about fundraising. Contact local philanthropists and business leaders. Consider selling products or organizing fundraisers to raise money for your advocacy activities. Build a list of prospective foundations and grants, develop your "ask" (i.e., a specific request, including a budget), use your networks to expand your contacts and knowledge of funding opportunities, and use your mentoring relationships to expand your organization's grant-writing and fundraising skills. Research funding collaboratives (i.e., when donors pool funds to award grants around a shared interest) and funding initiatives managed by international nongovernmental organizations that may provide small advocacy grants to local CSOs. The greater size and visibility of networks and coalitions can make it easier for them to gain recognition and mobilize resources so use this to your advantage.

Case Study 2: Maternal health advocates push for improved working conditions for midwives in Tanzania

With the help of affected communities, the White Ribbon Alliance for Safe Motherhood in Tanzania (WRATZ) launched a countrywide advocacy campaign to draw attention to the poor working conditions of midwives. The alliance began by drafting key messages and agreeing on its approach. From there, the group conducted a series of community dialogues to develop consensus around its demands and build community support. WRATZ then used established relationships with members of Parliament and social and traditional media to work on creating an enabling environment and rallying public support for changes to maternal health policies and practices (Limbu, 2012).

Launch an advocacy campaign

The aim of advocacy is to influence decisionmakers. Focus on persuading decisionmakers at multiple levels and use the diversity of your network or coalition to do so (Russell and Levitt-Dayal, 2003). You should first develop key messages and materials specifically tailored to the relevant decisionmakers at all levels and then identify the most appropriate spokespeople to deliver them. You can then put your advocacy plan into action.



Develop key messages and materials. Key messages summarize what you want to say about a problem and what needs to be done about it. In short, they are what you want people to remember and react to. Develop materials (e.g., talking points, background documents, frequently asked questions, take action documents) that clearly convey your messages. These are not only important for communicating externally but in making sure your staff and spokespeople are well-versed in your key messages and use them to communicate about your issue. Involve coalition members in the development of new materials, and share your materials widely among

members (Russell and Levitt-Dayal, 2003). Remember to be diplomatic in your communication (particularly when speaking out on sensitive issues), and use evidence and compelling stories from reliable sources to back up your arguments (USAID | Health Policy Initiative, 2010).

Choose your messengers and cultivate champions. Sometimes mobilizing political will is as simple as choosing the most effective messenger to bring your issue to your target audiences. If one of your coalition members has an established relationship with the MOH or MOF, recruit him/her to approach the ministry on the coalition's behalf. Likewise, task your faith-based members to approach local church leaders about supporting your agenda. Cultivate champions by seeking out policymakers, celebrities, and other influential people to champion your issue. The most effective champions are those with a vested interest who will passionately take up your issue and use their position and contacts to secure additional support.



Work with the media. Mass media can be an incredibly useful tool for advocates. While media is not required for every type of advocacy campaign, in certain situations it can help to bring attention to your issue, rally public support, and/or influence decisionmakers to take action (see Case Study 3). The first step in using the media as an advocacy tool is to build relationships with media representatives and engage them in your issue (Advocacy Partnership, 2011). Begin by compiling lists of key media outlets and journalists who cover your issue. Contact the journalists on your list and provide them with background information and story ideas.

Work with government. Investigate what formal mechanisms are in place or could be set up for civil society to engage with government entities like the MOH and provincial health departments. Attend meetings and events, advocate for your group to be invited to closed forums, and set up meetings with key decisionmakers and/or their advisors. Meet with the finance minister to ensure adequate allocations for FP, HIV, and MH programs.



Level the playing field for underrepresented communities by advocating for their direct inclusion in the policy process and helping to build trust between disadvantaged, vulnerable, and marginalized populations and government (Liendo, 2012). Advocate for representatives of these communities to serve on governing and policy decision bodies. Act as a bridge between disadvantaged, vulnerable, and marginalized populations and government by helping government to understand the needs, challenges, and reactions

of underrepresented populations and underrepresented communities to understand the constraints and processes of government. Provide the needed insight and contacts for these two groups to effectively communicate with one another and work toward greater understanding.

Case Study 3: Working through coalitions to successfully advocate for government action

In 2008, at the International AIDS Conference in Mexico City, ministers of health and education from throughout Latin America and the Caribbean took historic steps to expand comprehensive sexuality education programs for young people by signing the ministerial declaration, "Preventing through Education" (Alcalde, 2012). However, after the spectacle of the international conference, governments were slow to implement the promises outlined in the declaration. Faced with that inaction, the MesoAmerica coalition (Coalición mesoamericana para la educación integral en sexualidad)-a national network of diverse civil society networks-launched an advocacy campaign to pressure governments to put the declaration into practice (Alcalde, 2012). Primarily, the coalition developed scorecards to evaluate and report on if and how governments were making progress on implementing the ministerial declaration (Alcalde, 2012). By working with the media to publicize the scorecards and compare individual governments' progress with that of neighboring countries, the coalition was successful in winning budgets and policies that are advancing comprehensive sexuality education in the region (Alcalde, 2012).

Summary

To advocate effectively for improved FP, HIV, and MH policies and programs as well as better governance and financing of key health issues, CSOs can use networks and coalitions to coordinate efforts, combine skills and resources, and move the policy agenda forward. Begin by developing relationships and forming alliances. Join networks and coalitions that are already working on the issues you care about. If no relevant network or coalition exists, approach groups that have a vested interest in your issue about forming one. Then, continuously seek to improve your group. Set up systems to help your network or coalition (1) operate efficiently, (2) monitor and evaluate its activities, and (3) remain accountable. Establish partnerships and mentoring relationships with technical experts and other networks and coalitions to help build the skills and knowledge of your members. Finally, put your network or coalition to work. Share information and resources, develop key messages and materials, and use a variety of strategies to influence decisionmakers and advocate for improved FP, HIV, and MH policies and programs. By working collectively through networks and coalitions, CSOs can begin to strengthen their country's health systems and foster a greater degree of civil society engagement.

Key Resources

The resources listed below provide additional guidance on how CSOs can implement the tasks and actions outlined in this paper.

Advance Family Planning. 2010. *Advocacy Resource Pack*. Baltimore, MD: Johns Hopkins Bloomberg School of Public Health. Available at http://www.advancefamilyplanning. net/resource/afp-tools. **Description**: For CSOs looking to develop focused FP advocacy objectives and policy asks, this resource pack provides a practical advocacy decision-making tool.

Advocacy Partnership. 2011. TB/ MDR-TB Advocacy Toolkit. Leamington Spa: Advocacy Partnership. Available at http://www.advocacypartnership. org/resources.php.

Description: While originally developed for tuberculosis (TB) advocates, this toolkit offers advocacy-oriented CSOs tools and guidance that can be easily adapted to any issue area. The toolkit provides direction on how to effectively set goals and objectives; create an advocacy strategy and plan; work with the media and government; build coalitions and alliances; develop key messages; monitor advocacy; and mobilize resources and funding.

CARE. 2001. Advocacy Tools and Guidelines: Promoting Policy Change. Atlanta: CARE. Available at http:// www.care.org/getinvolved/advocacy/ tools.asp.

Description: This series outlines essential advocacy skills, including how to form strategic relationships, monitor and evaluate advocacy initiatives, communicate effectively, use the media, develop an advocacy strategy and plan, and analyze policy. This series is primarily designed for CSOs looking to build their capacity to engage in advocacy.

Centre for Development and Population Activities. 2000. Social Mobilization for Reproductive Health: A Trainer's Manual. Washington, DC: CEDPA. Available at http:// www.unfpa.org.sy/pubfiles/tG_49_ nQw8N_7P.pdf.

Description: Best suited for new CSOs, coalitions, or networks, this manual provides exercises for agreeing on a common purpose and developing a collective plan of action, key messages, and an M&E plan.

De Toma, C. n.d. Advocacy Toolkit: Guidance on how to advocate for a more enabling environment for civil society in your context. Brussels: Open Forum for CSO Development Effectiveness. Available at http://www.csoeffectiveness.org/IMG/pdf/120110of-advocacy_toolkit-en-web-2.pdf. Description: This comprehensive toolkit provides a range of tools, including those for conducting a stakeholder analysis, building alliances, developing key messages, and forming SMART advocacy objectives. The toolkit also provides templates for developing an M&E framework, selecting advocacy indicators, identifying your advocacy targets, and drafting an advocacy plan. This toolkit is best suited for CSOs looking to develop or strengthen an advocacy campaign.

Foundation Center and European Foundation Centre. 2005. *Advocacy Funding: The Philanthropy of Changing Minds*. Available at http://www. grantcraft.org/?pageid=1307. Description: While aimed at grantmakers, this guide provides CSOs looking to approach traditional foundations with some useful insight into how to build a case, work with funders, and address challenges for funding advocacy initiatives. The guide is available for free download after you register on the GrantCraft site.

The Fundraising Authority. 2011. *A Beginner's Guide to Fundraising*. Available at http://www. thefundraisingauthority.com/ fundraising-basics/. **Description**: This web series provides CSOs at all levels with useful fundraising tips. Sections include how to develop your ask, write a fundraising plan, organize a fundraising event, and build your fundraising network.

Health Alliance International. *The NGO Code of Conduct for Health Systems Strengthening*. Seattle: Health Alliance International. Available at: http:// ngocodeofconduct.org/. **Description**: This document serves as a code of conduct for nongovernmental organizations and service delivery organizations engaged in health.

The Health Communication Unit at the Centre for Health Promotion, University of Toronto. 2000. *Media Advocacy Workbook*. Toronto: The Banting Institute, University of Toronto. Available at http:// www.thcu.ca/infoandresources/ publications/ma workbook v104.pdf. **Description**: This workbook provides some useful tips on developing a media advocacy campaign, identifying your audience, drafting key messages, and using your messages to effectively communicate with your audience. The workbook will prove most useful for CSOs with limited communication resources.

Johns Hopkins Bloomberg School of Public Health (JHU). 2013. *The Maternal and Child Health Leadership Skills Development Series*. Baltimore: JHU. Available at http://www.jhsph. edu/research/centers-and-institutes/ womens-and-childrens-health-policycenter/MCHLDS/modules.html. **Description:** Organized into six online modules, this series helps CSO and coalition leaders develop the skills they need to effectively manage teams.

International HIV/AIDS Alliance. 2002. Advocacy in Action: A Toolkit to Support NGOs and CBOs Responding to HIV/AIDS. Brighton: International HIV/AIDS Alliance. Available at http://www.comminit.com/ node/312161.

Description: This toolkit offers activities for any group looking to engage in advocacy and develop their skills. Examples of activities include identifying your targets, allies, and resources; creating an action plan; writing a press release; carrying out a media interview; and working from inside the system.

International HIV/AIDS Alliance. 2006. *All Together Now: Community mobilization for HIV/AIDS*. Brighton: International HIV/AIDS Alliance. Available at http://www.aidsalliance. org/publicationsdetails.aspx?id=228 **Description:** This communityfriendly guide provides accessible tools for collaborative planning, implementation and monitoring of community mobilization and advocacy efforts. All Together Now is best suited for CSOs doing HIV/ AIDS community work.

International HIV/AIDS Alliance. 2006. Tools Together Now! 100 participatory tools to mobilise communities for HIV/AIDS. Brighton: International HIV/AIDS Alliance. Available at http://www.aidsalliance. org/includes/Publication/Tools_ Together_Now_2009.pdf. Description: The companion to All Together Now: Community mobilization for HIV/AIDS, this toolkit provides participatory tools for mobilizing communities and working in groups. While best suited for community-based CSOs working in the area of HIV/AIDS, the toolkit offers a range of exercises and tools for any group looking to incorporate participatory practices into their work.

International Planned Parenthood Federation (IPPF). 2010. *Handbook for Advocacy Planning*. New York: IPPF. Available at http://www.ippfwhr.org/ en/advocacy_planning_manual. **Description**: This handbook provides step-by-step guidance to CSOs working in the area of sexual and reproductive rights on how to design effective advocacy projects.

MacDonald, L., and R. Levine. 2008. *Learning While Doing: A 12-Step Program for Policy Change*. Washington, DC: Center for Global Development. Available at http://www.cgdev.org/ content/publications/detail/15417/. **Description**: This essay outlines a 12-step program for CSOs seeking guidance on how to start an advocacy initiative.

The MSM Initiative, amfAR. 2011. Fundraising Toolkit: A Resource for HIV-Related Community Based Projects Serving Gay, Bisexual, and Other Men who have Sex with Men (MSM) and Transgender Individuals in Low- and Middle-Income

Countries. New York: amfAR. Available at http://www.amfar.org/ content.aspx?id=10456.

Description: While designed for groups working on gay, bisexual, MSM, and transgender issues, this toolkit provides adaptable tips and templates for any CSO looking to fundraise in low- and middle-income countries. The toolkit includes a section on proposal writing, as well as information on various funding agencies and mechanisms.

Nash, R., A. Hudson, and C. Luttrell. 2006. *Mapping Political Context: A Toolkit for Civil Society Organizations*. London: Research and Policy in Development Programme; Overseas Development Institute. Available at http://www.odi.org.uk/resources/ docs/186.pdf.

Description: This toolkit provides practical advice to CSOs looking to conduct a stakeholder analysis.

Pact. 2004. The Advocacy Expert Series. Available at http://www. pactworld.org/cs/featured_ publications#advocacy. **Description:** This collection covers managing advocacy campaigns, building relationships with government, working with the media, and building and maintaining coalitions. This series is appropriate for both the experienced advocate and the newly initiated.

People's Voice Project and International Centre for Policy Studies. 2002. *Citizen Participation Handbook*. Kyiv: World Bank, Canadian Bureau for International Education, and Canadian International Development Agency. Available at http://siteresources. worldbank.org/INTBELARUS/ Resources/eng.pdf. **Description:** Best suited for CSOs looking to launch new coalitions, this handbook includes a detailed section on coalition building that includes practical steps to building a coalition, illustrative case studies, and common obstacles groups may face. The handbook also provides guidance on public outreach and materials development.

POLICY Project. 1999. Networking for Policy Change: An Advocacy Training Manual. Washington, DC: Futures Group, POLICY Project. Available at http://www.policyproject.com/pubs/ AdvocacyManual.cfm. **Description:** This training manual outlines the three building blocks of advocacy-the formation of networks, the identification of political opportunities, and the organization of campaigns-and provides tools for building skills in these areas. This manual is best suited for CSOs looking to increase staff capacity and/or launch advocacy initiatives.

POLICY Project and Maternal & Neonatal Health Program. 2003. *Networking for Policy Change: An Advocacy Training Manual, Maternal Health Supplement*. Washington, DC: Futures Group, POLICY Project. Available at http://www. policyproject.com/pubs/manuals/ MH_FULL.pdf.

Description: This training manual provides guidance to maternal health advocates and CSOs on identifying target audiences, forming and implementing an advocacy plan, developing key messages, and implementing M&E. Robinson, E.T., D. Baron, L.L. Heise, J. Moffett, and S.V. Harlan. 2010. *The Communications Handbook for Clinical Trials*. Durham: Family Health International. Available at http:// www.fhi360.org/en/RH/Pubs/ booksReports/comm_handbook. htm.

Description: This handbook provides adaptable tools and templates for advocates looking to work with the media and communicate effectively about their issue. Highlights include a sample communications plan; advice on how to develop key messages and materials; sample press releases, letters to the editor, and messaging documents; and a worksheet for creating compelling messages.

Russell, N., and M. Levitt-Dayal. 2003. *Igniting Change! Accelerating Collective Action for Reproductive Health and Safe Motherhood*. Washington, DC: ENABLE Project and Maternal & Neonatal Health Program. Available at http://www.jhpiego.org/sw/ node/409.

Description: Igniting Change! provides readers with some important principles for and guidance on coalition building, collective advocacy, and M&E, as well as examples of how various CSOs have implemented their model. The guide is best suited for CSOs looking to initiate or strengthen reproductive health or maternal health advocacy efforts.

Shannon A. 1998. Advocating for Adolescent Reproductive Health in Sub-Saharan Africa. Washington, DC: Advocates for Youth. Available at http://www.advocatesforyouth.org/ publications/378?task=view. Description: This guide provides a good overview of adolescent reproductive health advocacy, including setting goals and objectives, building networks, gaining the support of gatekeepers, and implementing M&E. While intended for use by CSOs in sub-Saharan Africa involved in adolescent reproductive health, the guide provides useful tips for any CSO operating in a low-resource setting.

Treatment Action Campaign (TAC). 2009. Organising in Our Lives. Cape Town: TAC. Available at http://www. tac.org.za/publications/organizingour-lives.

Description: Developed for TAC branches, this handbook provides useful and accessible advice that can be adapted for any CSO engaging in advocacy and coalition building.

United Nations Children's Fund. 2010. Advocacy Toolkit: A guide to influencing decisions that improve children's lives. New York: UNICEF. Available at http://www.unicef.org/evaluation/ files/Advocacy_Toolkit.pdf. Description: The Advocacy Toolkit provides CSOs with a stepwise approach to developing and implementing an advocacy strategy and M&E plan and building alliances and coalitions.

United Nations Children's Fund (UNICEF). 2010. Monitoring and Evaluating Advocacy: Companion to the Advocacy Toolkit. New York: UNICEF. Available at http://www.unicef.org/ evaluation/files/Advocacy_Toolkit_ Companion.pdf. Description: This M&E companion to UNICEF's Advocacy Toolkit provides step-by-step guidance on monitoring and evaluating advocacy initiatives and provides 17 data collection tools. The M&E Toolkit offers practical guidance for both the experienced and newly initiated M&E manager.

White Ribbon Alliance for Safe Motherhood. 2003. Building a Global Movement: The White Ribbon Alliance for Safe Motherhood 1999–2003. Washington, DC: White Ribbon Alliance for Safe Motherhood. Available at http://www.cedpa.org/ content/publication/detail/736.html. **Description:** Building a Global Movement describes the four functional phases that typify the way most successful networks develop over time. The publication provides useful lessons for coalitions just starting out and those looking to pool resources and collectively raise funds.

Work Group for Community Health and Development, University of Kansas. n.d. *The Community Toolbox*. Available at http://ctb.ku.edu/en/ tablecontents/index.aspx.

Description: This online toolbox provides a wealth of information for both CSOs and individual advocates working in any topic area. Sections include implementing advocacy; getting your issue on the public agenda; developing a strategic plan, organizational structures, and training systems; using tools for effective leadership and facilitation; carrying out media advocacy; getting grants and managing resources; and planning for long-term institutionalization.

References

Advocacy Partnership. 2011. TB/ MDR-TB Advocacy Toolkit. Leamington Spa: Advocacy Partnership. Available at http://www.advocacypartnership. org/resources.php.

Alcalde, M.A. 2012. "Governance and civil society participation." Presented at the Advancing Country Ownership: Civil Society's Role in Sustaining Global Investments Consultation, Washington, DC, September 11–12, 2012.

Centre for Development and Population Activities. 2000. Social Mobilization for Reproductive Health: A Trainer's Manual. Washington, DC: CEDPA. Available at http:// www.unfpa.org.sy/pubfiles/tG_49_ nQw8N_7P.pdf.

Global Forum on MSM & HIV (MSMGF). 2010. The 2010 Annual Report of the Global Forum on MSM & HIV (MSMGF). Oakland: Global Forum on MSM & HIV. Retrieved February 11, 2013, from http:// www.msmgf.org/index.cfm/id/11/ aid/3274.

International HIV/AIDS Alliance and Frontiers Prevention Project. 2007. Network Capacity Analysis: A Toolkit for Assessing and Building Capacities for High Quality Responses to HIV. Brighton: International HIV/ AIDS Alliance. Available at http:// www.aidstar-two.org/Tools-Database. cfm?action=download&id=324. Jorgensen, A., K. Hardee, E. Rottach, A. Sunseri, M. Kinghorn, and A. Bhuyan. 2012. *Capacity Development Framework and Approach for Health Policy, Governance, and Social Participation.* Washington, DC: Futures Group, Health Policy Project.

Liendo, G. 2012. "How do we support engagement for country ownership?" Paper presented at the *Advancing Country Ownership: Civil Society's Role in Sustaining Global Investments Consultation*, Washington, DC, September 11–12, 2012.

Limbu, M. 2012. "Opportunities for Strengthening Country Ownership in Maternal Health: The Role of Civil Society." Presented at the Advancing Country Ownership: Civil Society's Role in Sustaining Global Investments Consultation, Washington, DC, September 11–12, 2012.

Metheny, N. 2012. "Policy Implications for the role of civil society in country ownership:

Men who have Sex with Men (MSM)." Presented at the Advancing Country Ownership: Civil Society's Role in Sustaining Global Investments Consultation, Washington, DC, September 11–12, 2012. Russell, N., and M. Levitt-Dayal. 2003. *Igniting Change! Accelerating Collective Action for Reproductive Health and Safe Motherhood*. Washington, DC: ENABLE Project and Maternal & Neonatal Health Program. Available at http://www.jhpiego.org/sw/ node/409.

USAID | Health Policy Initiative, Task Order 1. 2008. Coming Together. Washington, DC: Futures Group, USAID | Health Policy Initiative, Task Order 1. Available at http://www.healthpolicyinitiative. com/Publications/ Documents/591_1_TZ_PLHIV_ Networks_8_26_08_FINAL.pdf

USAID | Health Policy Initiative, Task Order 1. 2010. The Art of Moving from Policy to Action: Lessons Learned from the USAID | Health Policy Initiative (2005–2010). Washington, DC: Futures Group, USAID | Health Policy Initiative, Task Order 1.

Suggested Citation

West Slevin, K., and C. Green. 2013. "Networking and Coalition Building for Health Advocacy: Advancing Country Ownership." Washington, DC: Health Policy Project, Futures Group.

Contact Us

Health Policy Project One Thomas Circle NW, Suite 200 Washington, DC 20005

> www.healthpolicyproject.com policyinfo@futuresgroup.com

The Health Policy Project is a five-year cooperative agreement funded by the U.S. Agency for International Development under Agreement No. AID-OAA-A-10-00067, beginning September 30, 2010. It is implemented by Futures Group, in collaboration with CEDPA (CEDPA is now a part of Plan International USA), Futures Institute, Partners in Population and Development, Africa Regional Office (PPD ARO), Population Reference Bureau (PRB), RTI International, and the White Ribbon Alliance for Safe Motherhood (WRA).

The information provided in this document is not official U.S. Government information and does not necessarily represent the views or positions of the U.S. Agency for International Development.