

# SRHR ADVOCACY TOOLKIT FOR YOUNG PEOPLE



**This document is intended to assist MenEngage Youth Structures to design, develop and implement advocacy strategies in the area of Sexual and Reproductive Health and Rights**





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<b>SRHR</b>	Sexual and Reproductive Health and Rights
<b>MEA</b>	MenEngage Africa
<b>IDUs</b>	Injecting Drug Users
<b>LGBTIQ</b>	Lesbian, Gay, Bisexual, Transgender, Intersex, Queer
<b>WHO</b>	World Health Organisation
<b>HIV</b>	Human Immunodeficiency Virus
<b>SDGs</b>	Sustainable Development Goals - The Sustainable Development Goals (SDGs), also known as the Global Goals, in 2015 a collection of 17 global goals set by the United Nations General Assembly were adopted by all United Nations Member States as a universal call to action to end poverty, protect the planet and ensure that all people enjoy peace and prosperity by 2030.
<b>MDGs</b>	Millennium Development Goals - a set of eight goals with specific targets and indicators that were agreed upon to help advance global development issues from 2000 to 2015.
<b>YSO</b>	Youth Support Organisation
<b>STI</b>	Sexually Transmitted Infection
<b>SMART</b>	Specific, Measurable, Achievable, Realistic and Timely
<b>CSO</b>	Civil Society Organisation
<b>Civil society</b>	Made up of citizens and organizations outside of government and business. NGOs (nongovernmental organizations) are part of civil society and are sometimes referred to also as the "third sector" (after government and commerce). Also considered to be part of civil society are civil society organizations (CSOs) and international non-governmental organizations (INGOs), community groups, labour unions, indigenous groups, charitable organizations, faith-based organizations, professional associations and foundations. <sup>3</sup>
<b>NGO</b>	Non-Governmental Organisation
<b>Gender</b>	While the term "sex" refers to biologically determined differences, gender refers to differences in social roles and relationships of and between groups of women and men and to the socially constructed characteristics of women and men. It varies from society to society and can be changed. While most people are born either male or female, they are taught appropriate norms and behaviours –, including how they should interact with others of the same or opposite sex within households, communities and workplaces. When individuals or groups do not "fit" established gender norms they often face stigma, discriminatory practices or social exclusion. It is important to be sensitive to different identities that do not necessarily fit into binary male or female sex categories. <sup>4</sup>

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# INTRODUCTION

This SRHR Advocacy Toolkit was developed to assist MenEngage Africa Youth Structures to design, develop and implement advocacy strategies focused on Sexual and Reproductive Health and Rights (SRHR). It is a collection of tools and information sourced from reputable and established organisations working in the fields of youth, advocacy and SRHR. It initially introduces the topics of sexual and reproductive health and advocacy and then provides worksheets, examples and case studies to illustrate how to develop an advocacy strategy. The toolkit is designed for organisations that work with men and boys for gender equality and the empowerment of women and girls but can be used by any group who are interested in SRHR advocacy. It is hoped that this toolkit will be particularly useful for MenEngage Africa partners who are committed to the task of creating gender equal societies on the continent.



# WHAT IS SRHR?

Some supportive definitions:

<b>Health</b>	The state of complete physical, mental and social wellbeing and not merely the absence of infirmity or disease.
<b>Rights or human rights</b>	Basic freedoms and protections that belong to everyone by virtue of being human. They are based on notions of equality, dignity and mutual respect.
<b>Sexuality</b>	The way people experience and express themselves as sexual beings from birth to death. It encompasses biological, erotic, physical, emotional, social and spiritual feelings, attraction and behaviour and gender identities. <sup>7</sup>
<b>Reproduction</b>	The production of offspring.

Therefore, sexual and reproductive health and rights are:

“

The complete physical, mental and social wellbeing in all matter related to a person's sexuality and reproductive system, and the freedoms and protections that are necessary to guarantee this state of wellbeing, which must be based on equality, dignity and mutual respect.

”

The World Health Organisation elaborates to say that sexual health "is not merely the absence of disease, dysfunction or infirmity. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence. For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled."<sup>8</sup>



Sexual and Reproductive Health and Rights (SRHR): this term encompasses the human right of all individuals to make decisions concerning their own sexuality and reproductive well-being, on condition these decisions do not infringe on the rights of others. It includes four components, each critical to the other: sexual health, reproductive health, sexual rights, and reproductive rights. According to the Maputo Plan of Action, which is premised on the ICPD Platform of Action, SRHR includes 'adolescent [SRH]; safe motherhood and newborn care; abortion care; family planning; prevention and management of sexually transmitted infections including HIV/AIDS; prevention and management of infertility; prevention and management of cancers of the reproductive system; addressing mid-life concerns of men and women; health and development; the reduction of [GBV]; interpersonal communication and counselling; and health education.'<sup>1</sup>



<sup>1</sup>African Union, *Maputo Plan of Action for the Operationalisation of the SRHR Continental Policy Framework 2007-2015* (Addis Ababa, Ethiopia: 2006), para 5.

## Sexual and Reproductive Health Rights

Leading human rights, and sexual health, organizations have developed the following working definition of sexual rights:

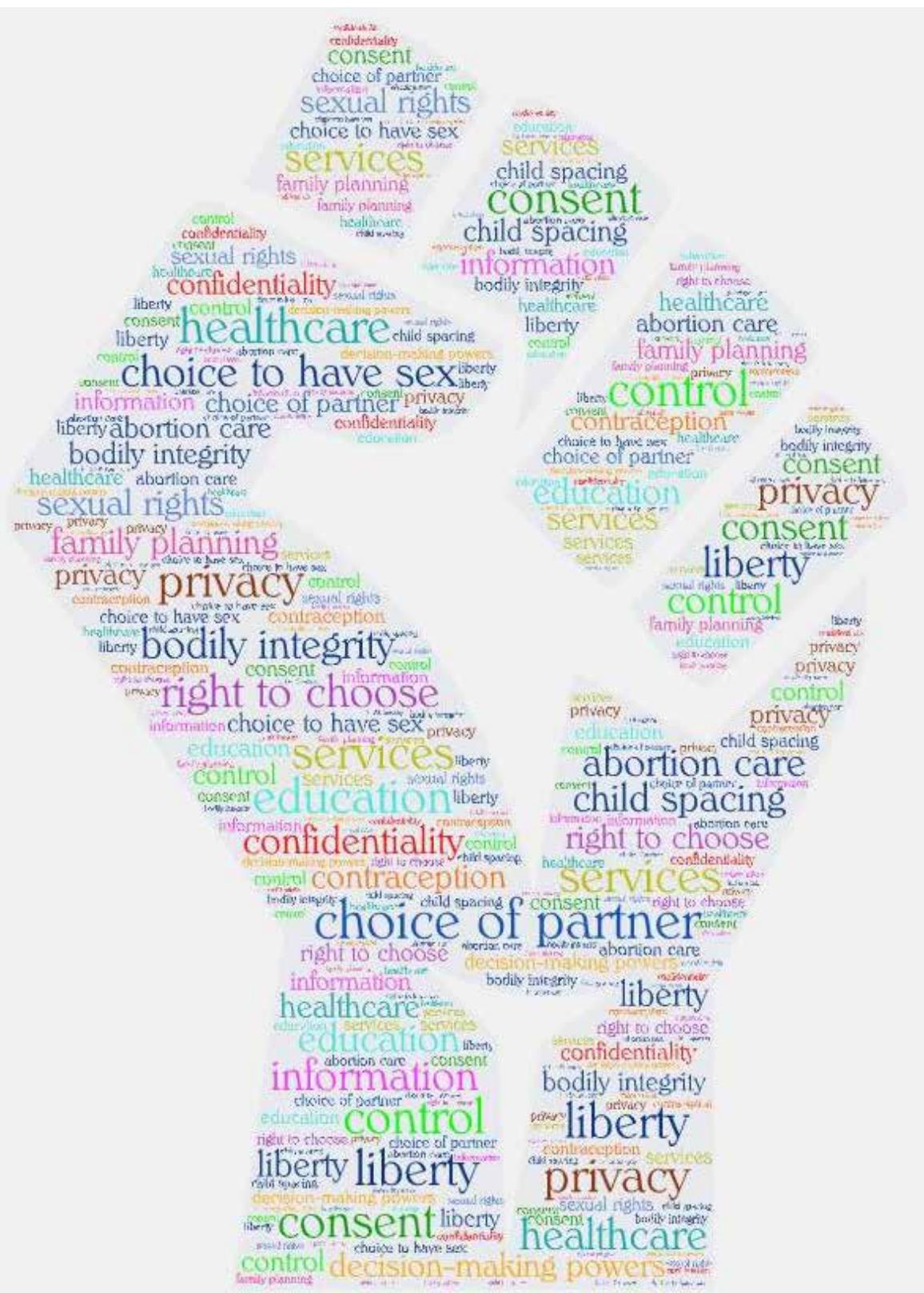
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Sexual rights embrace certain human rights that are already recognized in national laws, international human rights documents, and other consensus documents. They rest on the recognition that all individuals have the right—free of coercion, violence, and discrimination of any kind—to the highest attainable standard of sexual health; to pursue a satisfying, safe, and pleasurable sexual life; to have control and decision-making powers over (while respecting the rights of others) matters related to their sexuality, reproduction, sexual orientation, bodily integrity, choice of partner, and gender identity; and the right to the services, education, and information, including comprehensive sexuality education, necessary to do so.<sup>9</sup>

”

**Sexual and Reproductive Health Rights include, but are not limited to, the following:**

The right to health highest attainable standard of health (including sexual health)	The right to full expression of gender and sexual orientation without stigma, discrimination, prosecution, violence and violation	The right to choose whom we are in a relationship with, how we have sex, whether to have sex
The right to liberty (Liberty is the freedom to live your life in the way that you want, without interference from other people or the authorities)	The right to be free from torture and ill treatment or to cruel, inhumane or degrading treatment or punishment	The right to marry and to establish a family and enter into marriage with free and full consent of the intending spouses, and to equality in and at the dissolution of marriage
The right to equality and non-discrimination	The right to pursue a satisfying and pleasurable sexual life	The right to freedom of thought and expression
The right to health care and health protection	The right to be protected from harmful practices	The right to privacy and confidentiality
The right to be treated with respect and dignity	The right to information and education	The right to freedom from abuse, exploitation and discrimination
The right to decide freely whether and how to control fertility and other aspects of their sexual health the right to decide the number and spacing of one's children	The right to access services regardless of race, gender identity, sexual orientation, marital status, age, religious or political belief, ethnicity or disability	Article 14 of the African Women's Protocol guarantees women the rights to: control fertility; decide whether to have children; choose any method of contraception; and, ultimately, safe abortion. <sup>10</sup>
The right to recognition everywhere as a person before the law	The right to an effective remedy for violations of fundamental rights <sup>11</sup>	The right to protection from disease and violence



## Youth and SRHR in Africa

Youth can be defined as people between the ages of 15-24. In some contexts, young people are defined as those under the age of 35. For the purposes of this toolkit young people, or youth, refers to people between the ages of 15-35.

Africa is the only region in the world where the youth population is increasing. According to United Nations' statistics from 2015 Africa has the largest concentration of young people in the world: 226 million people aged 15-24, representing nearly 20% of Africa's population, making up one fifth of the world's youth population. If one includes all people aged below 35, this number increases to three quarters of Africa's population.<sup>12</sup>

For many adolescents and young people, this period of their lives is a time of enormous vibrancy, potential, discovery, aspiration, innovation and hope, but it can also be a challenging time for young people. While the development of sexual identity and sexual debut during this period can be associated with the risk of HIV and other sexually transmitted infections and unplanned pregnancies,<sup>13</sup> young people's capacity and autonomy to make decisions about their health and wellbeing is often ignored and suppressed. While significant progress has been made by many countries<sup>14</sup>, progress has been uneven and inequalities still persist.<sup>14</sup> In many societies, young people are often perceived as asexual beings and youth sexual expression is stigmatized due to conservative values that contradict scientific facts.<sup>15</sup>

Sexuality education, and access to sexual health and rights, remain a taboo in many countries across the continent and so while some progress is being made with respect to education on adolescent sexual and reproductive health, comprehensive sexuality education (CSE) is rarely taught in schools in low-income countries.<sup>16</sup> Young people are a marginalised group in themselves and thus marginalised groups within young people are even more vulnerable and likely to be neglected by SRH services.

According to Marie Stopes International:

‘Identifying and scaling up effective strategies to help young people make informed, healthy choices about their sexual and reproductive lives is critical. We know that too many young people have limited information about SRH and many others face discrimination when they do try to seek services. Alongside education, ensuring that young people have access to a comprehensive package of SRH services delivered in a supportive and respectful environment is key to empowering young people and preventing poor health’.<sup>17</sup>

...in extending access to services and information that enable the realisation of sexual and reproductive health and rights since the Cairo Programme of Action in 1994. The International Conference on Population and Development, which took place in Cairo in 1994, was a turning point for women and the world in that governments recognized that women and girls' need for reproductive health care, education and advancement are the key to sustainable development. (UNFPA, South Africa)

Moreover, recent political developments and conservative decisions made by the US government on sexual and reproductive health and rights are having a negative effect across the continent, in terms of access to funding for information and services for safe abortion. Education and advocacy around sexual and reproductive health and rights for young people are more urgent than ever, and the voices of networks and movements in the continent needs to be strengthened.



## Africa

In a global context, sub-Saharan Africa remains the region that is most affected by the HIV epidemic. While HIV incidence and HIV-related deaths have decreased in other populations in sub-Saharan Africa (SSA), HIV-related deaths among adolescents continue to rise.<sup>20</sup>

The region's current challenges in effectively realising sexual and reproductive health for its people include: unmet needs in access to contraception; high levels of maternal mortality and morbidity, including mortality and morbidity from unsafe abortion and lack of access to obstetric care; the persistence of pandemic levels of HIV; early and/or coerced marriages; harmful cultural practices such as female genital mutilation; sexual violence and exploitation; and endemic discrimination on the basis of age, marital status, sexual orientation, disability and other vectors of discrimination. Though unmet sexual and reproductive health and rights are experienced across the gender divide, it is women and girls who are at the receiving end of most deprivations.<sup>21</sup>

Systematic reviews from South Africa indicate that young people's most desirable characteristic for youth-friendly services are 'non-judgemental provider interaction' and confidentiality.<sup>22</sup> Advocates working in the field of SRHR for young people are encouraged to advocate for: confidentiality, respectful treatment, integrated services, culturally appropriate care, easy access to care, free or low cost services, reproductive and sexual health care, services for young men and promotion of parent-child communication, among many others.<sup>23</sup>

## MenEngage Africa

MenEngage Africa, part of the Global MenEngage Alliance, was formed in 2006 with the goal of working in partnership to promote the engagement of men and boys in achieving gender equality, preventing HIV, promoting human rights and reducing violence at all levels across the continent, including questioning the structural barriers to gender inequalities. MenEngage Africa country networks bring together partner organisations working on gender-based violence (GBV), sexual abuse and sexual exploitation, women's rights, youth and child rights and abuse, masculinities, HIV, fatherhood, sexual and reproductive health and rights (SRHR), maternal health, refugee and migrant rights, and other issues. They aim to undertake joint programming, research, and policy and advocacy activities. MenEngage country networks strive to have strong working relations with the local and national government, UN country offices, the women's and youth movements (who generally form part of the network), non-governmental agencies and grassroots organisations.

The African Regional Network has strengthened the membership and leadership of its Youth Chapter. The overall membership of the MenEngage Youth Advisory and Steering Committee consists of youth-led and youth-serving organisations/ individuals both at national and regional levels; organisations working with women and girls; and organisations conducting work in general with young people. Currently (2019), 58 youth-serving organisations belong to the MEA networks present in 21 countries. Please refer to [www.menengage.org](http://www.menengage.org) for more information.



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## Men and Boys and SRHR

Across Africa, as in many other parts of the world, sexual and reproductive health (SRH) is largely considered the sole responsibility of women, while men continue to neglect the SRH needs and responsibilities of themselves, their partners and their families. Objections to focusing on men's SRH needs are often raised, including the concern that this may jeopardise reproductive health services for women and that men already have too much power over decisions affecting women's fertility and sexual health. Nevertheless, increasing evidence exists that ignoring the sex education and sexual health needs of young men has negative and wider social and health consequences.<sup>25</sup>

Policies that protect and promote women's right to access and utilise sexual and reproductive health services are critical, and women's health must continue to be a priority for governments the world over. However, it is also important to recognise that exposing men and boys to SRH education (including gender equality education) and services will ultimately have widespread consequences for women and girls. There has been a global recognition for the need to engage men in sexual and reproductive health and rights (SRHR) since the mid-1990s<sup>iii</sup>, but little attention has been placed on the specific role of men and boys in SRHR, both to improve their own and their partners' SRHR as well as to reduce the burden on public health care systems.

Men can, and should, play a critical role in preventing unintended pregnancies and sexually transmitted infections including HIV, as well as play a supporting role in maternal and child health, while always respecting their partner's rights over her own body and SRH choices. In short, inadequately recognizing and

<sup>iii</sup>This recognition of the need to engage men and boys around SRHR most notably occurred at the International Conference on Population and Development (ICPD) and the 1995 Beijing Platform for Action.

addressing men's SRH needs as both individuals and partners negatively impacts women, men, and health systems. It is vitally important to reach young men with SRH services and education pertaining to SRHR and gender equality, so as to normalise men's involvement with SRHR services, discussions and awareness raising, as early as possible.

### **When engaging with boys and young men:**

- ▶ Start with what boys want, rather than what adults think they need. Boys should participate in developing education programmes, influencing the content, delivery, and setting of their sex education.
- ▶ Be honest about the potential barriers to using condoms and practising safe sex, including embarrassment, fear of failure, and loss of sensitivity. Develop an understanding around the anxieties of boys and young men.
- ▶ In discussions with young men about sex, we should include notions of pleasure and not just prevention, for many pleasurable activities are also safe ones.
- ▶ Make sexual health services more accessible to boys and men.<sup>26</sup>
- ▶ Always utilise a lens of gender equality, emphasising women's rights and push a gender norms transformation agenda.



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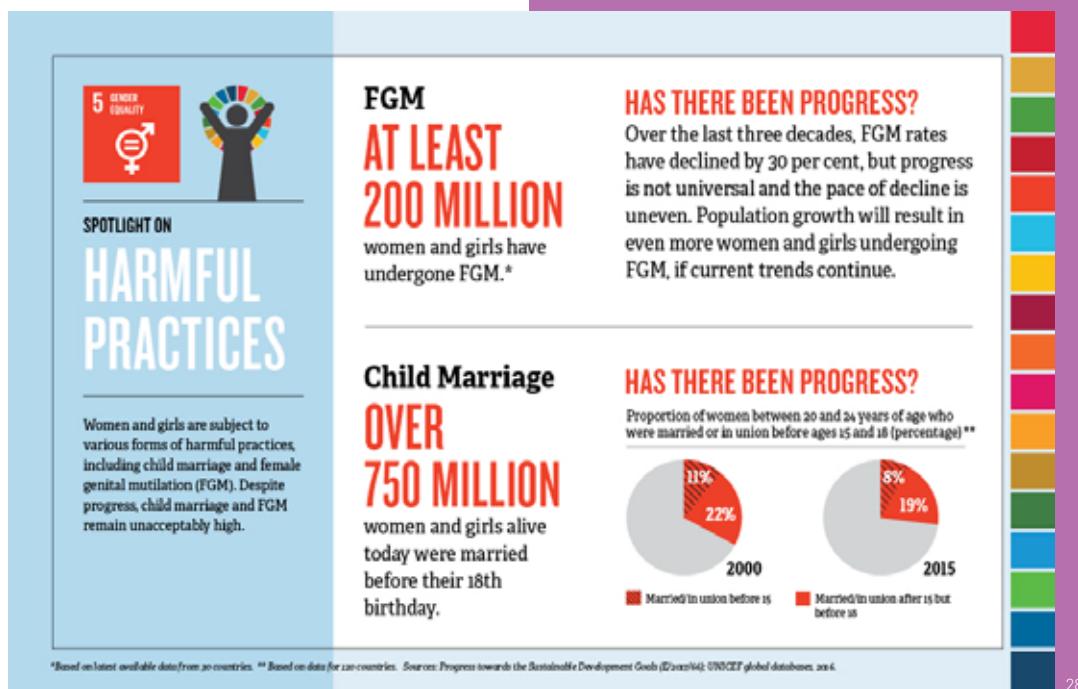
## Potential SRHR Advocacy Issues<sup>iv</sup>

The topic of sexual and reproductive health and rights is extremely broad involving a vast number of different issues. One can't really argue that a certain issue is more important than another, but rather an advocacy group needs to identify what is an important issue for them, depending on timing, context, location and opportunity.

Examples of topics include:

- ▶ Access to safe abortion
- ▶ Access to contraception – knowledge of contraception, side effects, options that are available, women's reproductive rights, emergency contraception
- ▶ Family Planning
- ▶ HIV & STI prevention, testing and treatment
- ▶ Sexuality education (gender equality, gender norms, gender fluidity, LGBTIQ rights)
- ▶ Unintended pregnancy
- ▶ Cancer prevention, screening and treatment
- ▶ Prenatal, ante-natal and obstetric care
- ▶ Gender Based Violence and Harmful practices: Female Genital Mutilation (FGM), Child Marriage, Wife Inheritance
- ▶ The decriminalisation of homosexuality, sex work, HIV transmission and abortion (where applicable).

<sup>iv</sup>This list is not exhaustive but is aimed at getting groups talking, thinking and reflecting on what issue is most pertinent to their context. This list is based on a discussion on SRHR Advocacy during a MenEngage Africa Policy Advocacy Capacity Building Workshop, Parktonian Hotel, 13 – 14 August 2015, with MenEngage members from Botswana, Kenya, Mozambique, Namibia, Tanzania, Swaziland, Uganda and Zambia.



# 3

## WHAT IS ADVOCACY?

**To advocate** (verb): To speak, plead or argue in favour of; to support or urge by argument; to recommend publicly.

**Advocate** (noun): A person that promotes/supports the interests of a group or individual.

There are numerous definitions of advocacy and varying contexts in which advocacy is utilised. For the purposes of this toolkit we will define advocacy as the act or process of arguing in favour of a cause, idea, group or policy. Advocacy can be described as a tool for 'putting a problem on the agenda, providing a solution to that problem and building support for acting on both the problem and the solution'<sup>29</sup>. In a digital and networked age, advocacy is not just about influencing public policy,

but also about influencing public opinion, and therefore 'one of its aims must be raising the public's consciousness about a particular issue'.<sup>30</sup>

An advocacy campaign can be broadly defined as a strategic course of action, involving communication, which is undertaken for a specific purpose or objective. It is about influencing people, decisions, policies, laws, budgets, practices, structures and systems, among many others, in order to bring about change. It can include work that focuses on one specific issue, campaigns that span a specific period or ongoing work that addresses a range of issues.<sup>31</sup>

Save the Children Fund, UK, states that 'advocacy is a social change process affecting attitudes, social relationships and power relations, which strengthens civil society...', and that to fulfil its aspirations advocacy requires the coordination of efforts, strategic thinking, information, communication, outreach and mobilisation.<sup>32</sup>



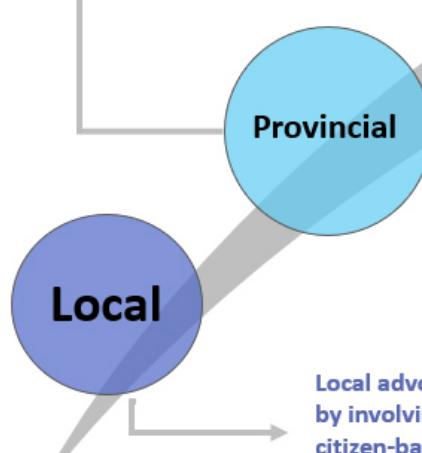
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## Advocacy at Different Levels

Advocacy can be conducted at international, national, regional or local levels. Within each of these levels, you target different people

This would be aimed at provincial/county policy processes and would target decision-makers for that jurisdiction.



**National**

**Regional**

**International**

Regional Advocacy in an African context would target regional bodies such as the African Union, East African Community, Southern African Development Community etc., in order to influence regional protocols to which numerous countries are signatories.

National advocacy takes place at a country-level, advocating for change that has the potential to affect the whole country, such as the introduction of a new law. These would involve, for example, national media campaigns, or work aimed at national policy processes.

Local advocacy often targets and is driven by the local community and tries to positively affect it directly, by involving local communities in the campaign and working together to ask for/demand change, i.e. citizen-based activism. Local grassroots advocacy can sometimes be the most effective form of advocacy.

International advocacy targets a worldwide audience and national policymakers who are involved in international processes and often wants to bring change in international agreements about a specific issue.



## Targets

Within each of these levels, you should target different people.

Advocacy Level		Examples of Potential Targets
International		National policymakers who are involved in international processes; international companies; international organizations; delegates at a UN meeting
Regional		Members of Regional Bodies. For more information on Regional Bodies in Africa please see <a href="https://www.uneca.org/oria/pages/regional-economic-communities">https://www.uneca.org/oria/pages/regional-economic-communities</a>
National		Members of Parliament and policymakers; special advisors to Ministers
Local		Community leaders, such as chiefs, religious leaders, heads of schools, mayors or municipal councillors. Local decision-makers often are more accessible and more willing to be engaged than decision-makers at other levels. This is because they are closer to the experiences of those at the grass roots, and they often are very invested in helping local communities through life's daily challenges. For many, local decision-makers provide a key bridge between the community and the national government, acting as a spokesperson for issues. This makes them a valuable secondary target to influence the decision-makers. <sup>35</sup>

Who are the opinion leaders in your community who have influence in areas of public debate? Are there any local religious leaders or business leaders who are well-connected to national government who you might select as a secondary target? Are there any civil society organizations that would be valuable secondary targets?<sup>36</sup>



## Opportunities for Advocacy

### The Sustainable Development Goals



The Sustainable Development Goals provide an excellent opportunity for SRHR advocacy. Replacing the Millennium Development Goals (MDGs), the Sustainable Development Goals (SDGs) include 17 goals for global cooperation through to 2030. The SDGs prioritise some of the biggest challenges facing adolescent girls and young women, including child marriage, gender-based violence and lack of access to sexual and reproductive health services. Unlike the MDGs that largely side-lined youth needs, the new agenda centres on and affirms the unique rights and needs of adolescent girls and young women. The SDGs seek 'to realize the human rights of all and to achieve gender equality and the empowerment of all women and girls'.<sup>38</sup>

According to Advocates for Youth,

‘The 2030 Agenda for Sustainable Development offers new global goals and renewed commitments from governments around the world to reduce maternal mortality; achieve universal access to sexual and reproductive health information, education, and services; ensure reproductive rights; and achieve gender equality as a matter of women’s and girls’ human rights’.<sup>39</sup>

### The SDGs and SRHR, a focus on access to safe abortion:<sup>40</sup>

To meet several of the new SDG goals, policymakers, advocates, and governments must prioritize advancing the right to sexual and reproductive health services, including access to safe, legal abortion for all women, adolescent girls and young women in particular. Worldwide, 47,000 women die of unsafe abortions each year, and millions more suffer serious, often permanent, injuries. Adolescent girls and young women are disproportionately affected. Due to the many barriers to safe abortion care, young women who decide to terminate a pregnancy often find no alternative than to resort to unsafe abortion, even in settings where abortion is legal. Social, economic, legal, and health-system barriers cause many young women to delay obtaining abortion care until later in pregnancy than adult women, and to delay seeking help for abortion-related complications. Of the approximately 22 million women who undergo unsafe abortions in the developing world each year, almost 50 percent are young women age 15–24.



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<sup>40</sup>(As outlined by Advocates for Youth, an organisation that partners with youth leaders, adult allies, and youth-serving organizations to advocate for policies and champion programs that recognize young people's rights to honest sexual health information; accessible, confidential, and affordable sexual health services; and the resources and opportunities necessary to create sexual health equity for all youth, <https://advocatesforyouth.org/resources/fact-sheets/advancing-the-sexual-and-reproductive-health-and-rights-of-adolescent-girls-and-young-women/>).

Unsafe abortion is more common where adolescents and youth have an unmet need for contraception, where less effective contraceptive methods prevail, and in settings where abortion is criminalized. To reduce unintended pregnancy and unsafe abortion, **governments must act urgently to advance comprehensive sexuality education, youth-friendly sexual and reproductive health services, and less restrictive abortion laws and policies.**

## The Relevant SDGs:

**GOAL  
3**

*Ensure healthy lives and promote wellbeing for all at all ages*

**TARGET 3.1:** By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births.

The 2030 target calls for a two-thirds reduction in maternal mortality. A report by the United Nations Secretary-General in 2013 highlighted unsafe abortion as a 'leading cause of maternal deaths' and cautioned that 'it is likely that the numbers of unsafe abortion will continue to increase unless women's access to safe abortion and contraception—and support to empower women (including their freedom to decide whether and when to have a child)—are put in place and further strengthened.'

**TARGET 3.7:** By 2030, ensure universal access to sexual and reproductive healthcare services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes.

Access to safe, legal abortion has been recognized by the global community as an essential intervention in a package of comprehensive sexual and reproductive health services that should be available to all women regardless of age, ethnicity, gender identity, geographic location, marital status, race, religion, socio-economic status or migration status. Youth friendly sexual and reproductive healthcare services, including SRHR information and education, must account for the unique physical and emotional health needs of adolescent girls and young women, as well as adolescent boys and young men, and address barriers to their ability to access care.

**GOAL  
5**

*Achieve gender equality and empower all women and girls*

**TARGET 5.6:** Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences.

Achieving gender equality includes enacting laws and policies that allow access to safe and legal abortion, thereby recognizing women's autonomy and capacity to make informed and independent decisions about their sexuality and reproduction.

### **Recommendations for Policymakers and advocates for access to safe abortion services, as outlined by Advocates for Youth:**

- ▶ Ensure adolescent girls and young women have access to effective contraception and safe, legal abortion care. Women who are poor, young, or in other vulnerable circumstances are at high risk for unsafe abortion, yet this is entirely preventable through access to contraception and safe abortion care—both essential and cost-effective components of any strategy to reduce maternal mortality and achieve target 3.1.
- ▶ Improve national systems to record maternal deaths and identify their causes—including unsafe abortion—to improve measurement of progress toward target 3.1 and identify priority interventions.
- ▶ Provide universal access to youth friendly and non-judgmental sexual and reproductive health services, including abortion care. Services must respect the rights to confidentiality, privacy and informed consent. In addition, adolescent girls and young women are disproportionately affected by sexual violence; interventions to achieve target 5.6 must therefore include services to prevent violence and provide care to those affected, including access to emergency contraception and safe abortion.
- ▶ Mandate comprehensive sexuality education that is linked to integrated sexual and reproductive health services. Reaching all young people, particularly adolescent girls and young women, both in and out of school, with comprehensive sexuality education is key to preventing unwanted pregnancy, HIV and other STIs, and to meet target 3.7.
- ▶ Accelerate actions to repeal laws that make abortion a crime. In most countries, legalizing abortion is a precursor to planning for and delivering high-quality safe abortion services. It is no longer acceptable, politically or morally, for governments or international bodies to use arguments of culture or religion to avoid creating a supportive policy and legal framework for safe abortion that would lead to the elimination of a major cause of maternal death and injury. To fulfill the 2030 agenda, governments and civil society must accelerate actions to repeal laws that criminalize women who seek abortion or who in other ways exercise their sexual and reproductive rights.<sup>41</sup>

## **Climate Change and the need for Family Planning**

Since the adoption of the Sustainable Development Goals there has been a greater appreciation of the connections between interrelated development challenges. This increased awareness provides national family planning advocates with an added and timely opportunity to highlight the positive impact of family planning, not only in relation to health (SDG3) and gender (SDG5),

but also climate action (SDG13). It is likely that many development sectors will begin to argue why their work is of particular cross-sectoral importance, and should be given weight in national development processes, including climate change adaptation plans, and when responding to the SDGs. The sexual and reproductive health sector must not be left behind in this regard, as cross-sectoral partnerships are an additional opportunity to reduce the unmet need for family planning.<sup>42</sup>

For example, the Sahel region (including parts of Chad, Burkina Faso, Eritrea, the Gambia, Guinea-Bissau, Mali, Mauritania, Niger, Senegal and Sudan) has a fertility rate of five. The Sahel is "among the most chronically vulnerable regions in the world due to many factors, including poverty, population growth, and the variable climate".<sup>43</sup> This arid region is particularly vulnerable to climate change, having suffered numerous severe droughts and low rainfall, which has in turn led to declining agricultural production, and related knock-on effects on food security. This combination of climate change, unmet family planning need, population growth, political instability and food insecurity has the potential to manifest in a catastrophic humanitarian disaster. Investing in family planning must be one of the elements of a package of actions to enhance resilience in the region.<sup>44</sup>



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# The Process of Designing an Advocacy Strategy

## Overviews

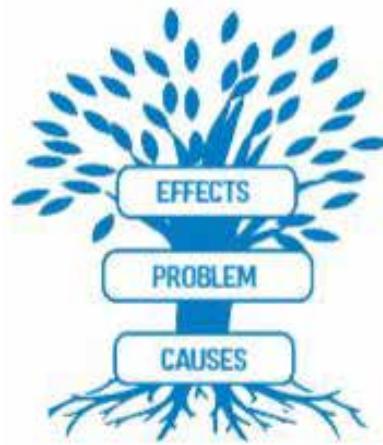
Each of these steps is broken down further over the next few pages



## Step 1

### Identify the core issue

The first and most important step in designing an advocacy campaign is identifying what the core issue is that you want to address and what its roots and underlying causes are. Root causes are the basic reasons behind the problem or issue you are dealing with. Root cause identification makes further efforts more focused, instead of wasting resources on trying to address the symptoms of the problem. It is an essential part of finding the right solution and helps to identify the right responses.



*Keep in mind that as you go through these processes it might become apparent that you need to conduct some **research** to accurately complete the tasks. You might source information already gathered from other experts. However, also keep in mind that if you need to conduct extensive research, it's possible that your group is not best placed to conduct the advocacy and should perhaps support another organisation to do so.*



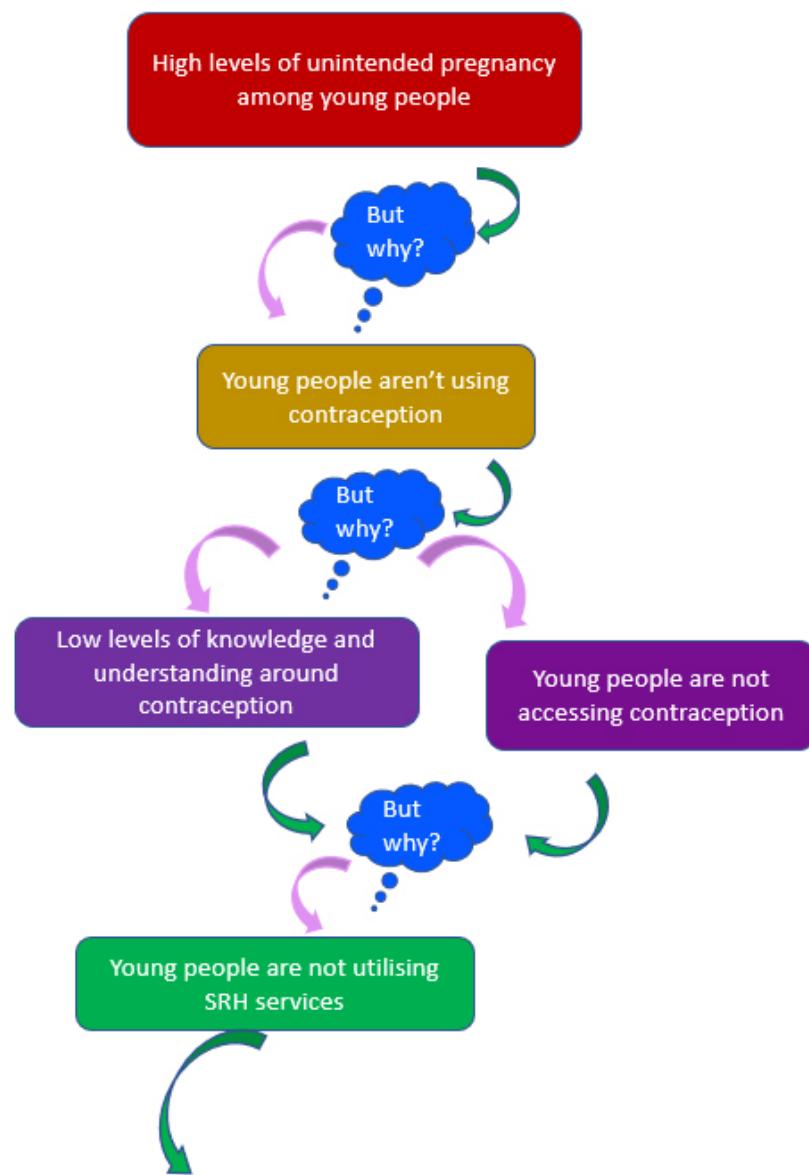
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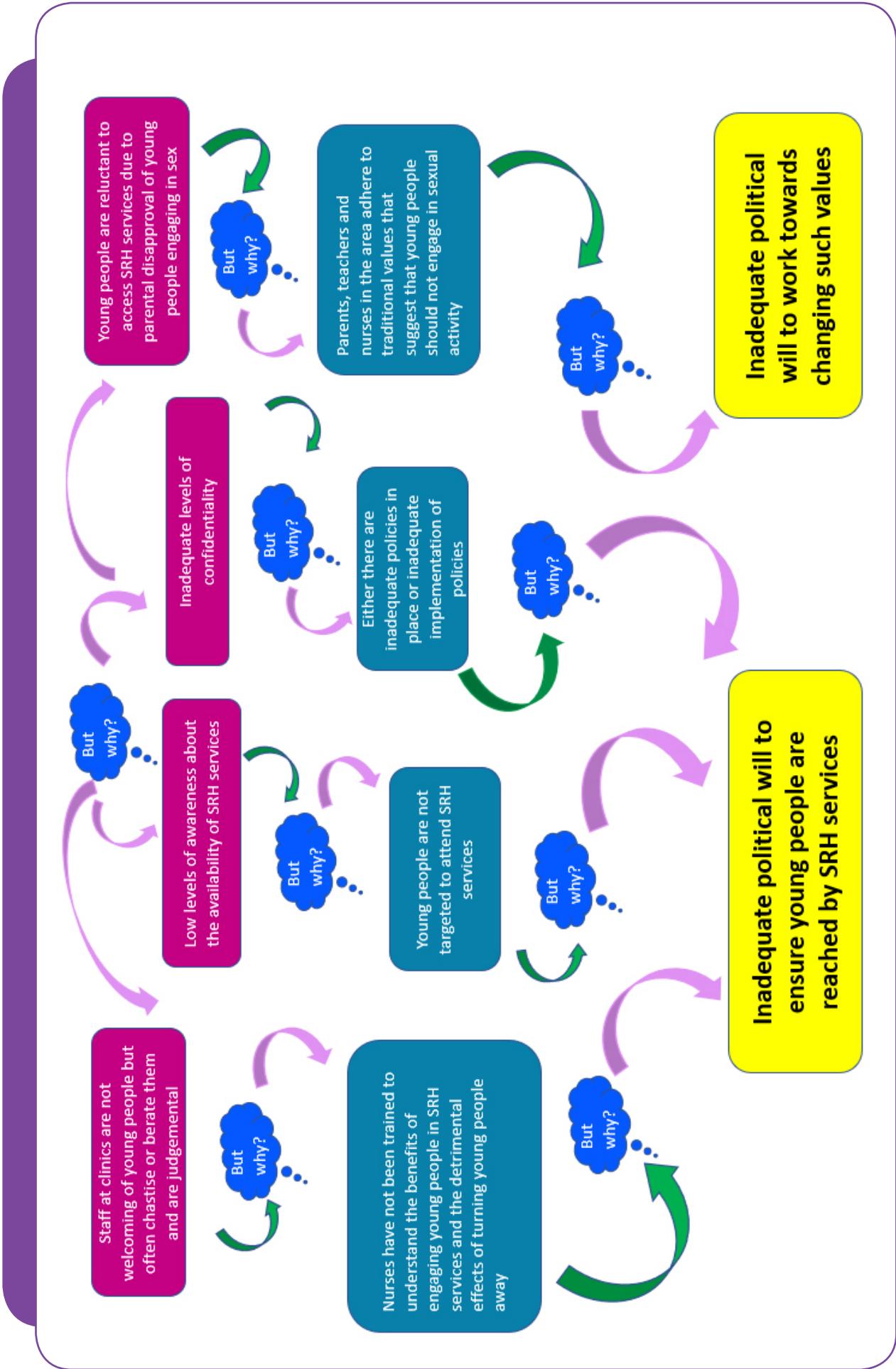
There are a few techniques advocacy groups can employ to identify the core issue they should focus on.

### 1) The “But why?” technique

The ‘But why?’ technique examines a problem by asking questions to find out what caused it. Each time an answer is given, a follow-up ‘But why?’ is asked. Many causes and solutions may apply to a problem. The ‘But why?’ analysis highlights the different causes of the problem and the different paths you may take to solve it.

**For example**, in your area you might be aware that there are high rates of unintended pregnancy among young people.... So you ask yourself, “But why?”... (The following illustration of the “But why?” process is purely hypothetical and is not based on any real situation).

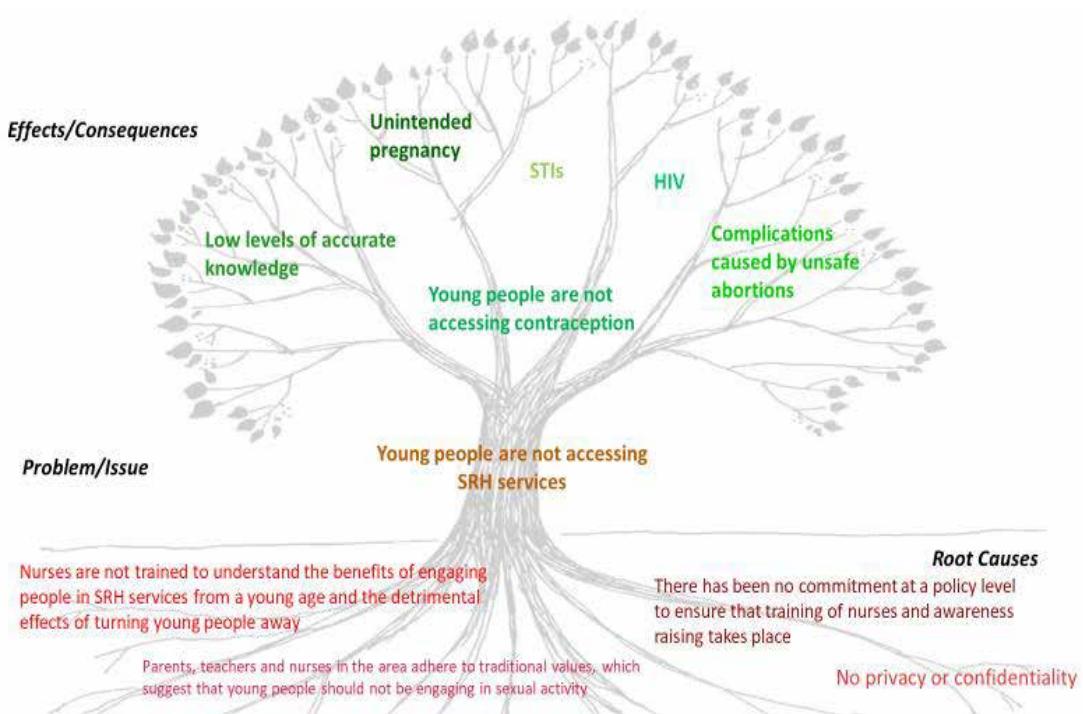




## 2) Problem Tree Analysis

Designing a Problem Tree allows you to break down a problem and explore it, revealing potential entry points for advocacy. To create a Problem Tree, the advocacy group should all work together in a brainstorming format, utilising flipchart paper, sticky notes and pens. The group should discuss a number of issues or problems they are keen to tackle and then decide on one to begin the problem tree. They should place the problem in the middle, as the "trunk" and then develop a list of consequences as "leaves" and causes as the "roots" using the sticky notes, thus being able to move them around. Discussion may reveal that causes are actually consequences and vice versa. Causes and consequences must be linked directly to the problem on the trunk. There must not be any link between branches and roots other than through the tree trunk. This process can be repeated for other problems in order for the group to fully explore all the issues and develop a deeper understanding of each.<sup>47</sup>

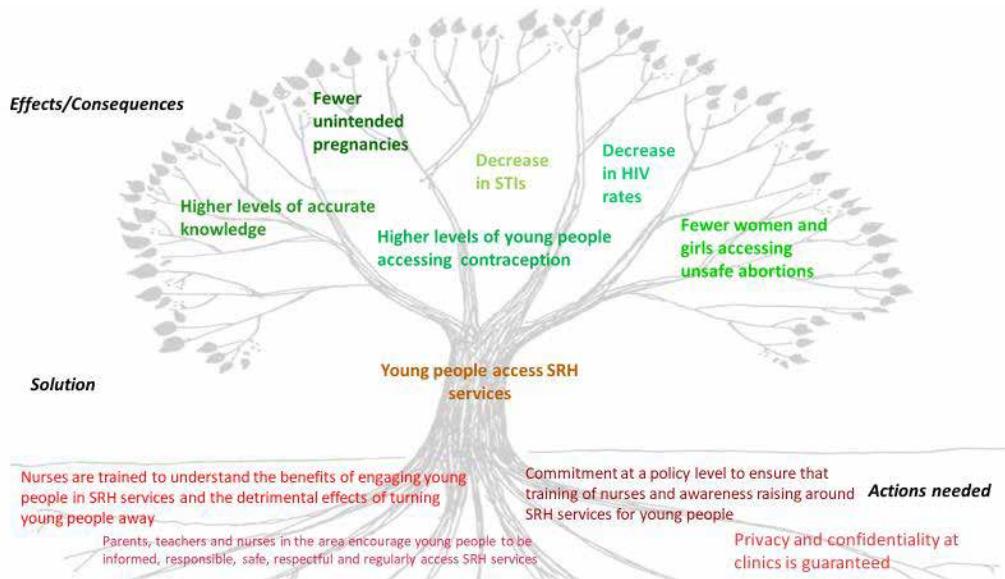
### Problem Tree Example



(This is an example to illustrate a hypothetical problem tree and is not based on any real situation).

In order to then identify what type of actions you need to take, turn the problem tree into a solution tree by turning the causes, problem and effects into positive statements that include words like increase, decrease or improve.<sup>48</sup>

## Solutions Tree Example



### 3) Visioning

A 'visioning' exercise can also be useful. Basically, you need to answer a few important questions in order to determine what your vision is for what you want to achieve, such as:

- ▶ What do we want our area to be like?
- ▶ What specific features would act as indicators for our ideal society?
- ▶ What needs to be changed for this to be achieved?
- ▶ What are the obstacles that stop this happening?

Using the previous example, you might answer these questions as follows:

What do we want our area to be like?	A place where young people feel informed and supported to access SRH services.
What specific features would act as indicators for our ideal society?	# of young people accessing SRH services. # of young people reporting a positive experience when accessing SRH services. # of young people who return to routinely access SRH services (contraception, screening, testing etc).
What needs to be changed for this to be achieved?	Clinics need to be welcoming to young people and non-judgemental. Communities need to support young people to access SRH services. Responsible behaviour such as accessing SRH services needs to be normalised.

What are the obstacles that stop this happening?	There is little awareness of the benefits of young people accessing SRH services. Many governments and institutions, such as churches, continue to police young people (especially women) and their sexuality, while simultaneously failing to protect them. There is inadequate political will to ensure that SRH services are accessed by young people.
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The required change is now more specific, and you can select the practical strategic issue that keeps your ideal world from being a reality here and now. Depending on the scale and aspirations of your organisation, you can select a SMART (Specific, Measurable, Attainable, Relevant and Timely) path to improve people's lives, in accordance with your vision, by solving the issue identified.

## 4) Criteria Evaluation

Issue Selection is a process of weighing your expertise, capacity and experience against the issue complexity. In other words, you need to make sure that the issue you face can be solved with resources that you would be able to mobilise. Additionally, you need to ensure that the path for a solution does exist and there are practical opportunities/possibilities to make the changes needed. Finally, there is a need to evaluate related risks to make sure they are manageable.<sup>49</sup> This can be especially important if your advocacy group is struggling to agree on one issue to focus on. This is not uncommon given that in many countries young key populations face a number of barriers in accessing SRHR services which make daily living very difficult. In a context like that, each issue seems to be the most pressing and deserving of immediate intervention. One practical way of dealing with this may be to agree on three issues that the team feel most strongly about and then deciding on the top issue based on which will require the least resources and shortest time to undertake. Policy advocacy can easily become resource-intense and demanding time-wise, so it is always advisable to start with an issue that is not likely to require a lot of resources and time.<sup>50</sup>

You can use this list of criteria to help you explore these questions. Rate each criterion according to the scores for high, medium and low. Repeat the process with each advocacy issue you are chosen to put on a shortlist and then compare the scores to more easily decide which issue seems to be best to focus on.

Criteria	High-10	Med-5	Low-0
<b>Focus.</b> Are you clear on what you want to change? If your advocacy issue is not specific, it will be harder to develop a strong strategy or plan.			
<b>Relevance.</b> How many people does this issue affect? If a large proportion of your community/country is affected then it is likely to be an important issue.			
<b>Ability to relate to the situation.</b> If the issue does not affect you directly, then are you able to partner with people who it does affect? This way, your work will have far more legitimacy.			
<b>Expertise.</b> Are you the right group for this piece of advocacy? Is it your area of expertise? Will you be perceived as credible experts?			
<b>Risks.</b> Are there a high number of risks involved in advocating around this issue? (e.g. alienating partner organisations, security and safety risks, losing donor support etc.) High risk=low, medium risk=medium, low risk=high.			
<b>Level of public support for your issue.</b> If there is a lot of traction around an issue and a lot of public support, your chances of success will be high. If not, perhaps rather wait until public support for this issue starts to			
<b>Potential for success.</b> If it is very unlikely that you will success (low) then perhaps this is not the right time to focus on this issue.			
<b>Access.</b> Do you have any access to decision-makers? Do you have access to sources of influence, such as the media, religious leaders, community leaders etc?			
<b>Commitment.</b> How passionate are you about this topic? This might be the most important question.			
<b>Financial resources.</b> Will this be an expensive undertaking? What resources are available to you or what resources do you think you can mobilise?			
<b>Capacity.</b> Do you have the right complement of staff/volunteers etc to accomplish this work? Do your staff/volunteers have the time and expertise to do the work?			
<b>Time required.</b> Less than 6 months=high, 6-18 months=medium, longer than 2 years=low			
<b>Level of effort required.</b> How involved will this work be? Will it dominate most of your time and focus? (high levels of effort = low, not so much effort = medium, hardly any effort = high)			
If one of your topics scores highly on other questions but low on these two questions, do not discard it entirely, but rather put it on the backburner. There are some causes that due to their nature are going to take years to accomplish and huge amounts of effort, but that does not mean they are not worth pursuing, if you are truly passionate. However, when first starting out it is best to choose something that will not span years of time or require mammoth levels of effort. Rather reserve those issues until you are more experienced and confident.			
<b>Your score:</b>			



### 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.

**If your score is over 85:** it sounds like you are in an excellent position to pursue this advocacy topic and start working on a more precise and refined advocacy strategy and plan.

**If your score is between 85 and 50:** it sounds like, while this might be an important issue, perhaps the environment is just not yet conducive to an advocacy campaign on it, or perhaps your organisation is not ideally placed to lead the advocacy campaign. You could consider trying to find a partner to lead, which you offer support; or you could monitor the situation until the environment seems more conducive.

**If your score is below 55:** it sounds like a campaign on this issue has little chance of success. Definitely choose something else.

## Step 2 Identify Goals and Objectives

## Defining your Goal

### Definition of “Goal”:

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

Every strong advocacy initiative needs to know its goals and how it will achieve them. Now that you've chosen your advocacy issue, put together an advocacy goal framework. It is best to only choose one goal. It is strategic to choose one that is feasible to achieve and will have the most impact on your target beneficiaries.<sup>51</sup>

A well-defined goal should have various components.

Answer the following questions in order to ensure your goal is clear and detailed.

1. What is the change you want to achieve?	
2. Who are the decisionmakers who have the power to bring about this change?	
3. What are the specifications of your desired change?	
For example:	Time frame to achieve the goal
	Basic elements or principles it should include
	Geographic scope
	Population or populations it targets

**Example Goal:** Our local Headmaster will change school policy so as to allow condoms to be available, on high school premises, to all high school students within our town, by June 2020.

You cannot do effective advocacy without having a perfectly clear goal, as the goal is the main guide for all of the project activities. Therefore, the definition of the goal is one of the most important steps of advocacy strategies, since the more detailed the goal, the more realistic the expectations.

*(Let Girls Lead Guide to Girl-Centered Advocacy)*

## Identify your Objectives



**What is an “objective”?**  
The milestones you seek to achieve along the way to help you to reach your goal.

Objectives are the smaller steps that must be completed in order to reach your overall goal. You will know that you are on target to achieve your goal if you are meeting your objectives. They should be clear and focused, and they should include the change you want to see, who will make the change and when it will be achieved. It is best to limit how many objectives you have. Don't spread yourself too thin by committing yourself to objectives that are not manageable (either by you or by your partners). When you are developing your objectives you may find it useful to

refer to the causes on your problem tree.

**Your objectives should be SMART (Specific, Measurable, Achievable, Realistic and Timely).<sup>52</sup>**



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## Step 3

### Examining external forces

## Identifying allies, targets and opponents

The better you understand the external forces that influence your strategic issue, the more likely your advocacy effort will reach the desired result as you will be equipped and forearmed to tackle potential challenges that arise.<sup>54</sup>

### Advocacy campaign stakeholders are usually divided into a number of groups:

Allies	Targets
<p>People who share your aims and can/are willing to help put pressure on the decision-makers.</p> <p>They can be individuals, organizations, groups, corporations, or any other entity that's capable of making a difference.</p> <p>In most cases, effective policy advocacy works through advocacy networks or alliances.</p> <p>Ensure you consider everyone's strengths when developing your advocacy plan and the role of your allies. Assess each party's depth of support, what they (and you) risk by coming together, what they bring to the effort and how much effort will it take to reach them and maintain their presence in the coalition.<sup>55</sup></p>	<p>Decision-makers; people who have the power to make necessary changes to further your cause; or people who have influence over the decision-makers.</p> <p>Targets are commonly legislators, policymakers and other political figures, but they can be anyone in power or in a decision-making role, depending on the scope of your advocacy.<sup>56</sup></p> <p>Targets should be separated into two groups:</p> <p><b>Primary targets</b> are decision makers with the power to directly influence the change you are seeking, and your advocacy expected result, like the village chief, community leaders, the mayor, University Head, Members of Parliament, other policymakers, etc...</p> <p><b>Secondary targets</b> are individuals or groups that can influence the primary decision makers, like community groups, the advisor to the MP, schools, women's groups, media representatives. They are important because they can provide avenues to reach the primary audience that may not be directly available to you.<sup>57</sup></p>
Constituents	Opponents
<p>The people you work with and for; the people who are expected to benefit from your advocacy.</p>	<p>People who are opposed to what you want to achieve and will try to block the changes you want to see.</p> <p>It's important to consider all possible objections from the beginning, so your organization can plan your campaign accordingly and counter any conflicts that might arise.</p>
Influencers	

**Now it's time to explore who are your potential allies, influencers, targets and opponents are.**

Things to consider:

- ▶ Which individuals have the power to help you to achieve your objectives? Finding out who holds this power is the key to successful advocacy.
- ▶ How easily can you influence them?
- ▶ Do you or anyone you know have any existing connections to a decision maker who could help you?
- ▶ What is their position towards your cause?<sup>58</sup>

You can't reach everyone. Try to focus on a small handful whom you feel you have a high chance of being able to influence.



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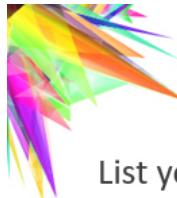
“

Remember that people influence people. We don't actually influence an institution— we influence people in that institution who are powerful and willing enough to change its policies.

*(ACT!2015 Advocacy Strategy Toolkit)*

”

**Make a list of all your potential targets, allies, opponents, influencers and constituents. Remember to divide targets into primary and secondary:**



## External Forces

List your constituents here:.....

**Allies**


**Opponents**


**Influencers**


**Targets**




## Step 4

### How will you influence your targets?

## Coalition Building

One of the next important steps is coalition building. In most cases, effective policy advocacy works through advocacy networks or alliances. These are groups of organisations and individuals working together to achieve changes in policy, positions or programming.<sup>60</sup> There are various cross-cutting issues that intersect with SRHR, such as gender-based violence, child rights, women's rights etc. Be aware of potential partners working in these areas.

You have identified potential allies. Allocate who will be in charge of reaching out to them and keep track of all your communication and progress. Once those organisations agree to be your partner, consider the following options to ensure a smooth relationship.

- ▶ Establish a steering group to guide and monitor implementation of the advocacy roadmap that you develop as a result of this toolkit.
- ▶ Establish a clear decision-making process that enables each network member to provide input.
- ▶ Rotate responsibilities as much as possible (rather than letting the weight fall all on one person).
- ▶ For specific tasks and activities, it might be a good idea to form subgroups that report back to the larger network.
- ▶ When conflicts arise, it is important to deal with them directly and openly (with a mediator).
- ▶ Establish a clear and regular system for communication. What method do people prefer: Skype, emails, face-to-face, newsletter-style updates, Google docs?
- ▶ Identify opportunities for training, learning, sharing and celebrating to increase motivation.<sup>61</sup>

Within your own advocacy team you will potentially need a team leader, authorities in advocacy campaigns, specialists in the subject matter of your campaign, communications managers and administrative help, among others. As grassroots advocacy relies so heavily on empowering supporters, when launching a grassroots advocacy campaign, perhaps most important on that list is a motivational and organized leader.



### What makes a great team?

- Clear purpose, with common understanding
- everyone valued and treated equally
- defined roles and responsibilities that are fair
- collaboration and shared leadership
- open, clear and ongoing communication
- effective decision-making
- space to address conflict and resolve issues
- diversity, respect and tolerance
- creativity, innovation and learning from mistakes
- regular self-assessment
- positive atmosphere
- opportunities to have fun!

*(Act!2015 Advocacy Strategy Toolkit)*

You might already have someone in-house that would be a great fit to lead your advocacy campaign. The advantage to hiring from within is the familiarity existing staff members have with your organization. You don't have to explain what your organization values or how you operate because they already know.

Whether you decide to recruit from within or without, look for these qualities in a strong campaign director:

- ▶ **Excellent communication skills.** Your supporters need encouragement, so you need someone who can motivate them to get out there and make a change.
- ▶ **Specialized experience.** Bringing on someone with practical experience leading an advocacy campaign will greatly decrease the amount of time you need to get oriented.
- ▶ **Existing connections.** To make sure your supporters will be heard by the right people, you need a leader who knows the best decision-makers to reach out to.

A strong leader will be able to take an advocacy campaign to completion.<sup>62</sup>

## Develop a Timeline

Consider what kind of timespan your advocacy is going to cover and develop a rough timeline of events, such as moments, events and key decisions you think your advocacy plan should centre around when you develop your advocacy activities. Consider the following points to help you develop your timeline (remember these are external events that you can use as opportunities or that might affect you. It's not a timeline of your activities; that will come later.)

- ▶ Have you been involved in any processes so far? If so, where did you have the most influence?
- ▶ From your network's experience, where can you have most influence moving forward?
- ▶ Is it clear to see how your network might be able to access or participate in this moment?
- ▶ As a network, decide to share opportunities and spread your collective energy.
- ▶ Advocacy landscapes are often changing and shifting, so you may need to revisit this timeline to update it with new information on a fortnightly or monthly basis.
- ▶ To enable you to respond to these emerging opportunities and moments, be sure to leave some space between the more obvious key moments so that you can react to opportunities as they arrive.
- ▶ Be realistic and don't overstretch your network by deciding to focus on too many moments.<sup>63</sup>

## Message Formulation

An advocacy message should communicate:

1. What you want to achieve
2. Why it is worth achieving, what the positive impact will be and therefore why others should want to achieve it too
3. How you propose to achieve it
4. What specific action you want the target audience to take, what are they being asked to do.<sup>65</sup>

It is important to start with developing one overarching message that captures what you want to achieve and why you want to achieve it. Then adapt the overall message to the relevant targets, paying attention to the issues that are of importance to them.<sup>65</sup>

Prioritise your targets and answer the following questions, in order to be able to develop messages tailored to each target: (The more you know about your audience, the more successful your advocacy intervention is likely to be. It will also help you identify and craft your key messages, increasing the likelihood that they will be easy-to-understand and effective.<sup>66</sup> Conduct research into your targets' position on issues if you need to).

\*Remember that targets must be specific.

What is the target's affiliation (e.g. government, political party, religious leader, private sector, community leader)?	What is their opinion/position on my issue (e.g. supportive, neutral or opposed? Informed or uninformed? Influential or not?)	How I will reach the target (e.g. through a secondary target, or by working with a partner who has direct access)? <sup>67</sup>
Primary Target 1 _____		
Primary Target 2 _____		
Primary Target 3 _____		
Secondary Target 1 _____		
Secondary Target 2 _____		
Secondary Target 3 _____		

You must now tailor messages for different target audiences. Find ways to link the interests of your targets with your advocacy issue. For example, please refer to the case study in the Media Advocacy section of this toolkit. It raises the point that while Planned Parenthood needed to ensure their funding was not cut, they knew it would be more effective to focus on the variety of services they offer, such as breast cancer services, that would be lost by the funding cuts. The organization strategically focused the conversation on breast cancer screening to remind the public that the organization provides an array of women's health services and steer the conversation away from abortion services, which is far more controversial. By tailoring their message to suit their audience, they were able to successfully garner huge levels of support and prevented their funding from being cut.<sup>68</sup>

## What makes a good message?

Think about the last time something really grabbed your attention, that made you want to find out more. What do you think it was that made you really take notice?

Generally, people respond to messages that:

- ▶ Link to an existing interest of theirs
- ▶ Appeals to the heart and head
- ▶ Provides an opportunity for action that doesn't involve extensive effort.<sup>69</sup>

In developing your message you can reflect on your problem tree to identify these three components of the message:

- ▶ What is the problem?
- ▶ What are the effects of the problem (and therefore the implications of doing nothing to address this problem)?
- ▶ What are your recommendations?<sup>70</sup>

### Successful messages are:

1. Simple
2. Solution focused
3. Contain practical and reasonable requests
4. Evidence based and contain real-life stories, statistics and facts
5. Appropriate for the particular audience in their language and content
6. Personal – show that you care and that they should too

(Plan International, An Advocacy Toolkit)

Which of these two do you think is more effective:

*“Girls in Africa are being forced to drop out of school because of their periods. In Rwanda, many girls miss up to 50 days of school or work every year due to difficulties in accessing sanitaryware. Missing school can often lead to girls having to drop out of school altogether. In some countries, like Malawi, sanitary pads can cost the equivalent of an entire day’s salary. In Kenya, two-thirds of women and girls can’t afford sanitary pads. Governments in African countries need to ensure that provisions are made to support girls to attend school during their periods by providing free sanitaryware to all adolescent girls. Please sign our petition”.*



*“Sanitaryware must be made available to schoolgirls in Africa so as to allow them to attend school during their period. This must be provided for free. Please sign our petition”.*

The first message is probably more effective because it begins with an emotional appeal which should encourage readers to pay attention to the rest of the message. The first is specific with regards to who must do what in order to bring about change. The effort required of the reader is minimal. It contains real-life stories and illustrates the effects of inaction.

It is preferable to ensure that you standardize your message, so that all of your advocates understand exactly what you’re working toward. This is especially important when it comes to an advocacy campaign, because your advocates will be communicating your message to other allies and agents of change and you want to make sure that everyone presents a unified front.

A unified front will ensure that there’s no confusion about how to help your cause and that you’ll never undermine the authority of your campaign by sending mixed messages.<sup>71</sup>

## Communication

Effective communication is the key to changing perceptions and achieving any social change. This is why advocacy communication is so critical.

Communication for advocacy is not the same as, for example, more general communication, such as newsletters or fundraising materials, or general information about your work. **What defines advocacy communication is that it focuses closely on influencing specific audiences and using specific messages in order to deliver change in policy or practice.**<sup>72</sup>

Advocacy communication should be driven by the purpose of the campaign: what must change and who needs to be reached so as to bring about change? Within the overall campaign strategy, the communication strategy defines how to capture the attention of the target audiences and convey a compelling campaign message.<sup>73</sup>

You have already mapped out your allies, opponents, influencers and targets. Each of these requires a different communication approach.

- ▶ ENGAGE with active allies
- ▶ PERSUADE influencers
- ▶ CONVINCE targets
- ▶ MONITOR opponents

Then consider the different modes of communication you might employ for different audiences.

### **For example, you may prepare:**

- ▶ A single page of bullet points for attracting the attention of busy decision-makers
- ▶ A vibrant, colour, A5 leaflet with bullet points and pictures for younger stakeholders
- ▶ A three-page executive summary or policy brief with more details for interested stakeholders and senior officials
- ▶ A twenty-page policy report capturing your key research findings, analysis and policy recommendations for officials, administrators, practitioners and sister organisations
- ▶ A one-page press release on an issue-significant day to attract the attention of news media (such as 4 September, World Sexual Health Day<sup>74</sup>)<sup>75</sup>.

Consider developing a communication action plan that can be shared among all your partners and campaigners.

## **Choosing Activities**

The next step is deciding which advocacy activities are best suited to your cause. There are so many to choose from. To start decide what kind of advocacy is required for your advocacy goal:

Confrontation/adversarial advocacy: This is when you tell a policymaker where they've gone wrong. Tactics used under this advocacy method include: strikes, marches, protests and petitions etc.

Constructive advocacy: is when you tell a policymaker that you have an idea and want to work together. Tactics used include: meeting with policymakers, proposing strategies for change, conducting research and publicizing and building alliances with the policymakers.<sup>76</sup>

**Here is a list of advocacy activity options devised by The Alliance for Justice:**

- ▶ Educate Legislators: Provide information on issues.
- ▶ Educate the Public about the Legislative Process: Introduce communities and constituencies to the legislators whose represent them. When communities have the opportunity to meet legislators face to face and discuss the issues that affect their everyday lives, not only do legislators receive the tools they need to represent their communities, but those communities are empowered to invest more heavily in the outcomes of policy debates, giving them a stronger hand in their own future.
- ▶ Research: Produce relevant resources that reflect the real story of your community.
- ▶ Organise a rally: Mobilise for your cause.
- ▶ Public education: Educate the community on the issues.
- ▶ Educational conferences: Gather, network, share information and plan for the future.
- ▶ Litigation: Win in court for your cause or your community.
- ▶ Lobbying: Advocate for or against specific legislation.
- ▶ Meeting in a public space (e.g. town hall) to discuss the cause
- ▶ Signing online petitions.
- ▶ Writing legislators or posting at them on social media.
- ▶ Have volunteers call members of the community to raise awareness/door-to-door campaigns<sup>77 78</sup>

**Here is a list of Advocacy Activities, with examples:**

Advocacy Activities		
Strategy	Example	Financial and human resources required
<b>Get onto radio and/or television</b>	You can see an example of a discussion that has been broadcast on radio <a href="#">here</a> (Resource no. 7, see pg ?), in which several civil society organisations consider the issue of sexual violence in South Africa.	Speaking on a television or radio show is free in most cases. However, your organisation must select an eloquent person who can articulate themselves clearly and knows the subject well.
<b>Create a radio or television ad campaign or documentary</b>	<a href="#">This</a> (see Resource no. 8) is an example of a radio documentary. The documentary looks at the possible negative impact of South Africa's Traditional Courts Bill should it be passed. It is produced in one of South Africa's official languages, Setswana.	Producing television and radio documentaries or films is costly. You need to employ script writers, producers, directors, actors and a host of other film and media personnel.

<b>Write a news article to expose the issue</b>	An example of a news article that puts an issue in the public domain can be seen <a href="#">here</a> (see Resource no. 9). This article is written by the Media Relations Manager at Sonke. It looks at the issue of fatherhood in South Africa.	If there are people who possess good writing skills and a firm grasp of the issues of concern, they can write articles for newspapers and magazines, which usually won't incur any costs.
<b>Issue a press release</b>	A press release is a communication that is sent to news media and can then be picked up by newspapers, but sometimes television, and should also appear on an organisation's website. They provide information on a particular matter of concern. You can see a number of press releases on the MenEngage website <a href="#">here</a> (see Resource no. 10).	A press release should be written by someone with good writing skills. It bears no financial cost and allows the media to pay attention to important issues, which then alerts society at large.
<b>Invite the media to attend an event or profile a story</b>	The media is not always aware of important social and policy issues that are taking place. Therefore, you should invite the media to attend any marches, public talks or information sessions that you may be organising or have access to. Make an effort to develop relationships with journalists, producers and editors. Develop a database of media contacts.	If your organisation or advocacy network or alliance has funds or resources available, you can host an event to debate or discuss an issue and invite the media to attend.
<b>Use Facebook and Twitter</b>	Social media platforms can be used to draw attention to important issues as well as to directly communicate with key audiences. Visit the <a href="#">One Man Can</a> Facebook group for ideas (see Resource no 11).	If you have access to the internet, starting a campaign or group has no cost. You will need to identify someone to monitor and manage online activity and content.

<b>Call a meeting with relevant government departments or representatives</b>	<p>It is important to learn to work cooperatively with government whenever this is possible. Identify allies that will support your cause and advocate from within government. <a href="#">This</a> (see resource no. 12) article describes South Africa's Minister of Women, Children and People with Disabilities, Lulu Xingwana's public condemnation of women's exclusion from the public hearings on the Traditional Courts Bill. The fact that the minister was able to use her platform to gain attention on this issue was extremely beneficial.</p>	<p>Working with government requires constant interaction. Your organisation needs to elect a lead person who will attend meetings and other events where they will be required to provide assistance and input in developing policies.</p>
<b>Hold government or its representatives accountable by taking them to court</b>	<p>In March of 2009, Sonke filed a complaint at the Equality Court against Julius Malema for hate speech, unfair discrimination and harassment of women. You can read more on this in the case study '<a href="#">The Equality Courts as a Tool for Gender Transformation</a>' (see Resource no. 14).</p>	<p>Taking government to court is an advocacy strategy that must be considered very carefully. It is expensive because one has to pay legal fees and may disrupt relations between your organisation and government. Taking this approach requires a thorough risk assessment.</p>
<b>Write submissions (recommendations) responding to proposed legislation</b>	<p>Submissions are written, or oral, presentations detailing an organisation's views or opinions on a matter or piece of legislation under consideration by a governmental law-making body such as Parliament. You can find many examples of submissions made by Sonke within their prisons programme, <a href="#">here</a> on the right hand side of the webpage (see Resource no. 16).</p>	<p>Submissions can be written by people who possess good writing skills and a firm grasp of the issues of concern. If they are being presented orally, such persons should know the issues well and be able to articulate them clearly.</p>

<p><b>Distribute materials such as pamphlets, booklets or manuals providing relevant information</b></p>	<p>This strategy is particularly useful if you need to share important information with community members. <a href="#">Here</a> (see Resource no. 17) is an example of a booklet distributed by the Treatment Action Campaign, highlighting the need for improved health funding so that the ARV targets set out in South Africa's National Strategic Plan on HIV are met. The booklet provides a number of recommendations that can be made to health and HIV policy.</p>	<p>This strategy may require that you produce a wide range of resource materials. Your organisation must be prepared to develop the content of such materials and pay for design and layout as well as printing, distribution and possibly translation into other languages.</p>
<p><b>Attend public hearings</b></p>	<p>Government and their various affiliates are often required to hold public hearings when developing a new law or policy. Since these public hearings will influence the development of public policy, it is important to attend these meetings so as to monitor the development of legislation and prevent the passage of policies that could have a negative impact on society. <a href="#">Here</a> is an article describing how Sonke encouraged community members to attend public hearings on the Traditional Courts Bill through the use of radio (see Resource no. 18).</p>	<p>You need to select a person or people that are able to vocalise key issues and concerns articulately. They must be prepared to engage with government officials and other organisations and be able to work collaboratively.</p>
<p><b>Organise a demonstration or a sit-in</b></p>	<p>Mobilising the public can be effective in terms of placing pressure on government and policymakers. When doing so, always ensure that any members of the public who have been mobilised understand the issue and are truly supportive. <a href="#">Here</a> is an example of a demonstration organised to address GBV policy and budgeting in South Africa, along with <a href="#">photos</a>. In such situations, <a href="#">petitions</a> can also be effective (see Resource no. 19).</p>	<p>No financial resources should be required. However, members of the public may require reimbursement for any expenses they incur, such as transport costs. If a demonstration or sit-in lasts more than a few hours, the provision of food may be necessary. Staff would need to spend time organising such an event and mobilising community members and networks in order to ensure that it is a success. Organising such an event badly could cause more harm than good.</p>

<p><b>Participate in, and issue shadow reports at, key regional and UN meetings like the African Union (AU) Health Ministers Meetings, AU gatherings, CSW etc.</b></p>	<p>Many global events at which governments are given the opportunity to submit progress reports, also allow for civil society to submit shadow reports, in order to receive a balanced view of a country's progress on a specific issue. Here is an <a href="#">example</a> of a shadow report submitted to the UN Commission on the Status of Women (CSW) 2013. See <a href="#">here</a> for other activities Sonke became involved in at the 57th CSW (see Resource no. 20).</p>	<p>A significant amount of time and effort is needed to produce a comprehensive report of this nature. Staff time will be needed to conduct research and write up the findings. Financial resources will be necessary if you wish to have the report professionally designed and printed in order to make an impact. Such an undertaking however, is very valuable as any consequent work will have a very strong evidence base, lending much credibility to your campaigns.</p>
<p><b>Use national, regional and global accountability mechanisms</b></p>	<p>Explore the possibility of utilising accountability mechanisms such as national human rights institutions (for example, in South Africa: the Public Protector, the Human Rights Commission and the Commission For Gender Equality) and regional mechanisms like the African Commission on Human and People's Right (ACHPR), AU Special Rapporteur, SADC Tribunal, UN Universal Periodic Review, International Criminal Court etc. (Please refer to the section on regional bodies later on in the toolkit.)</p>	<p>Staff time will be necessary to research such accountability mechanisms and write submissions.</p>

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For other examples of advocacy activities and further details, please explore some of the resources that are listed in the Resources section of this toolkit.



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### Step 5

#### How will you measure your success?

Monitoring and evaluating your advocacy intervention is important for many reasons. It will help you:

- ▶ Measure the extent to which your advocacy activities are aligned to your goals
- ▶ Learn whether you need to adjust your advocacy strategy and/or activities
- ▶ Inform the planning of future advocacy interventions
- ▶ Account for the resources you used
- ▶ Demonstrate your results
- ▶ Develop evidence-based approaches to advocacy work that can be used for future projects

While monitoring and evaluation [M&E] are often grouped together, they are different activities. Put simply, monitoring is an on-going process of checking whether you are doing things the right way, evaluating is the exercise of checking whether you did or are doing the right things

In addition to setting advocacy objectives, it is important to focus right from the start on what outcomes you want to see for the following reasons:

- ▶ Outcomes reduce the danger of being too activity-focused, i.e. objectives can sometimes become a list of 'things we intend to do'. This can lead to an M+E process that only looks at 'whether we did the things we said we'd do'.



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- ▶ **If you are 'outcome-focused', you are much more likely to look at the impact of the activities, rather than the activities themselves.**

It is useful to compare actual outcomes against the anticipated outcomes – changes are not always predictable. Since large-scale change is rarely immediate and very difficult to achieve, you need to identify significant shorter-term achievements.<sup>81</sup>

### Some Common Advocacy Evaluation Methods:

Stakeholder Surveys or Interviews	Print, telephone, or online questioning that gathers advocacy stakeholder perspectives of feedback.
Case Studies	Detailed descriptions and analyses (often qualitative) of individual advocacy strategies and results.
Focus Groups	Facilitated discussions with advocacy stakeholders (usually about 8 to 10 per group) to obtain their reactions, opinions, or ideas.
Media Tracking	Counts of an issue's coverage in the print, broadcast, or electronic media.
Media Content or Framing Analysis	Analysing the way in which an issue was covered by the media.
Participant Observation	Evaluator participation in advocacy meetings or events to gain first-hand experience and data.
Policy Tracking	Monitoring of an issue or bill's progress in the policy process.
Public Polling	Interviews (usually by telephone) with a random sample of advocacy stakeholders to gather data on their knowledge, attitudes, or behaviours. <sup>83</sup>

It is therefore very useful to develop a set of indicators that you can use to track your progress. Indicators are a set of measures that you will use to judge whether or not you are on the way to meeting your advocacy goal. The more specific your indicator, the easier it will be to evaluate your achievements.

Make sure you also identify potential sources of evidence to use for monitoring indicators.<sup>84</sup> For a detailed explanation around the development of indicators, please refer to the *Let Girls Lead Guide to Girl-Centred Advocacy*, pp 174-179, <https://riseuptogether.org/advocacy-guide/>



## WORKSHEET

To summarise all the steps and to revisit your decisions, you can complete this worksheet:

STEPS	Questions to be answered	Details	Fill in your answers
STEP 1	What needs to change?	<p>Be very clear about exactly what it is that you are trying to change. When defining an issue or problem, be clear and precise about it. Answer the questions: Why is it a problem? For whom is it a problem? What are the root causes of the problem? Why do you find this important?</p> <p>(And do you need to conduct some broader research before you can answer these questions?)</p>	
STEP 2	What are your goals and objectives?	Goal: What do you hope to achieve in the long term?	
		Objectives: What specific change or outcome do you want to achieve in short term?	
STEP 3	Who can make the change happen?	Primary targets are decision makers with the power to directly influence the change you are seeking, and your advocacy expected result, like the village chief, community leaders, the mayor, University Head, Members of Parliament, other policymakers, etc...	
	Who are your secondary targets?	Secondary targets are individuals or groups that can influence the primary decision makers, like community groups, the advisor to the MP, schools, women's groups, media representatives...	

<b>STEP 4</b>	How should you influence each target? What approaches are you going to use?	Analyse each target and develop an approach for each. Is the target an ally that you can partner with, or someone who could be persuaded to join your cause or an opponent whom you need to challenge? So are you going to approach the target to work with you, or do you need to develop an argument to persuade them or do you need to develop counterarguments? Will your approach be friendly, persuasive or aggressive?	<b>Target 1 -</b>
	What actions are you going to take?	Examples of tools that advocacy campaigns can use include factsheets, detailed reports, the media, demonstrations, meetings, petitions, public events, social media	<b>Target 2-</b>
		Decide on a budget to help define your scope of activities	<b>Target 3-</b>
	What are your key messages?	Which message is going to inspire people around you to take action for your cause? When making your message, make sure it talks about the problem, the plan, the support and what you ask of your target audience.	
	Who should you partner with?	For successful and sustained advocacy, you will need the support of a number of individuals and organizations. To create support for your issue, it is important to be able to network, participate in coalitions, and influence as many individuals and organizations as possible to join in. Think about what kind of support you need. Think about others working on similar issues.	

	What are your potential challenges?	Identifying potential obstacles or risks, and potential solutions, will help you be prepared	
		What obstacles might you face?	
	How can you overcome these obstacles and risks?	How can you overcome these obstacles and risks?	
STEP 5	How will you monitor and evaluate your advocacy to prove it is working?  What indicators will you use? Define indicators for your goals, objectives and activities.	It is important to put in place a system to track whether your advocacy plan is running smoothly, that you are achieving your list of activities and sticking to your timeline.	
		Evaluation is when you stop and look in detail at your work to see if you are indeed achieving the goals and objectives you set yourself in Step 1. Keep your activities simple, sit with your team regularly to talk about what went well and what needs to improve, and make sure you document everything in writing, photos, or videos.	

### You can also go through this checklist, from AMSHeR:

Background	<ul style="list-style-type: none"> <li>Brief context &amp; situational analysis</li> <li>What's the problem? Why advocate on a policy? Human rights, commitments, accountability</li> </ul>
Aim	<ul style="list-style-type: none"> <li>Long term goal that you want to contribute towards e.g SDG 3 &amp; 5</li> </ul>
Objectives	<ul style="list-style-type: none"> <li>SMART specific Measurable Attainable Realistic Time-bound change objectives</li> <li>Do these contribute to the realization of your aims</li> </ul>
Targets	<ul style="list-style-type: none"> <li>Who has the power to make necessary changes?</li> <li>Who influences these people?</li> </ul>
Allies/Partners	<ul style="list-style-type: none"> <li>Who can you work with to build momentum and support?</li> <li>Who influences these people?</li> </ul>
Activities & Outputs	<ul style="list-style-type: none"> <li>Policy and research</li> <li>Advocacy/popular mobilization</li> <li>Engagement of key stakeholders</li> </ul>
Key Messages	<ul style="list-style-type: none"> <li>For each audience</li> </ul>
Timeline	<ul style="list-style-type: none"> <li>Moments/opportunities for influence. How to be prepared for these with evidence and advocacy needed?</li> </ul>
Roles & Responsibilities	<ul style="list-style-type: none"> <li>Who is charged to do what?</li> </ul>
Budget	<ul style="list-style-type: none"> <li>What activities cost?</li> <li>What gaps and capacities - How to fill them</li> </ul>
M&EAL	<ul style="list-style-type: none"> <li>Logframe</li> </ul>

## Sexual and Reproductive Health and Rights Advocacy: Promising Practices from MenEngage Africa Members in Kenya and Malawi

### MALAWI: Social Accountability Monitoring for SRHR Services in Malawi

#### Context: Sexual and Reproductive Health in Malawi

- ▶ The number of births per woman is high averaging 4.0 live children per woman of childbearing age, indicating that the population will continue to grow in the foreseeable future. 20% of Young women aged 15-19 who have ever had a child<sup>86</sup>
- ▶ Malawi Demographic and Health Survey (DHS 2015-2016) maternal mortality is still high at 439/100,000 live births, perinatal mortality at 35/100,000 live births, proportion of women initiating antenatal care during the first trimester is 24% and women who completed 4 or more antenatal care visits is 51%
- ▶ Proportion of assisted deliveries is high at 91% suggesting that the quality of care may be substandard in view of the high maternal and neonatal mortalities.
- ▶ Proportion of women and new born babies receiving postnatal care during the first 48 hours is 42% and 60%, respectively.
- ▶ The proportion of pregnancies among the 15-19 year olds is 29%.
- ▶ The unmet needs for family planning among the married are 19% and among the unmarried is at 40%. The proportion of pregnant women that are abused by their husbands is at 5%. Unmet need for family planning, among young women aged 15-19 is 25.2%<sup>87</sup>
- ▶ Only 32% for girls and 25% for boys of Adolescents aged 15-19 who were ever tested for HIV and received the results<sup>88</sup>
- ▶ About 83000 Estimated number of adolescents living with HIV aged 10-19<sup>89</sup>

#### What did the Project do?

With such disturbing statistics, this project was developed to monitor the provision of sexual and reproductive health and rights services in Malawi and how youth-friendly this service was. The project put in place a monitoring and feedback mechanism through which allowed users of service to report on any issues faced at the health service and a query is created and immediately sent to Headcity Administrators for immediate action.

The app was design to capture all the information about the complaint such as obstacle presented, issue, the content of the instruction to correction, etc. and once a solution is found, the query is closed, but not erased from the system. The functioning of the system works as both a mechanism for immediate response and as a way to document the issues that youth struggle with.

With the implementation of the initiative, young people are able to access SRHR services in a more youth friendly space. The immediate pressure and accountability put on medical staff by the initiative was key for the increase in access of youth to SRH services. The project also increased access to medical supplies as complaints are handled with immediacy by the Headcity administrators. The increased awareness provided an opportunity for the Headcity Administrators and other government official to see the need to improve SRH services and to ensure that access. This situation led to PEPs, medication available for different STIs, pregnancy tests, among other medical inputs regarding SRH going bad in the facilities

### With which stakeholders?

The project was implemented as a local advocacy. Different local actors were involved in the advocacy pathway. Considering the project focused more on getting youthful feedback, the project therefore developed a theory of change that focused on working with young people who access healthcare settings for services, youth champions who are drivers of the mobile app and who man the kiosks set up in healthcare facilities and Headcity administrators. With an empowered young people, who are aware of their rights and the need to make services more youth friendly and through the use of digital technology, young people can easily complain about the difficulties they face in accessing SRH services. The mobile apps provided a platform where service users are able to directly report to Headcity administrators who will then work with the healthcare administrators to resolve the issue.

- ▶ Headcity Administrators – Are in charge of generating the instruction to correct the issue documented. Headcity Administrators were previously sensitized on the importance of SRH and their role in the effective provision of services.
- ▶ Youth Champions – Promoters of SRH in the facility. They are in charge of the reports made to them on the issues of access to SRH in medical facilities. They are also in charge of documenting the query on the app in case that there are persons that don't have a mobile phone with data readily available.
- ▶ Kiosk – Office located on the health facility that is available to issue reports on the SRH service provision.
- ▶ Mobile App Users – Youth that look to access SRH services. They are in charge of the registering of cases in which they face challenges in the provision of services. In case of not having access to a mobile phone with data, they report their issues in the kiosk located on the medical facility or to the Youth Champion.



## What impact since the project started?

Through the use of technology, the project guaranteed that young people are being listened to and that service providers are accountable to young people. The app also guaranteed that the issues are resolved with urgency. One of the major impact and success of this app is that:

1. The app has now been presented to State offices as a mechanism design to improve their services, and as a way to develop an information management system. To this end, the app is helping the government and service providers to add value to their services while ensuring that through citizen led monitoring, young people are being listened to.
2. Immediacy – The fact that the issues are reported and addressed in an immediate matter increases the satisfaction of young people accessing SRHR services, while generating immediate accountability measures. It also guarantees the use of the medical inputs available for young people that were not being accessed.
3. Use of technology – The use of technological tools allows for immediate documentation of an issue, as the app is connected to the medical facilities server, while providing a safe-space for users to report. The design of the app also encourages the Headcity Administrator to issue an instruction to correct immediately, while allowing for all the queries to be documented –including its solution—in order to obtain data on the service delivery.
4. Context-specific development – One of the success factors of the initiative was its constant change in order to be context-specific. More details on the various changes made during the implementation would be available farther in the development of the initiative

### What recommendations moving forward?

- ▶ There is a need to promote engagement activities with Youth Bearers. One of the issues with young staff involved in the initiative is their retention. Activities such as engagement meetings, travels for experience exchange, and other capacity building activities are key to assure the commitment with the initiative.
- ▶ Young people should be motivated to continually report
- ▶ The capacity of young people should be built so they can easily identify and report when services are unfriendly.
- ▶ Through this project, it is not possible to extend to ensure that other areas of hospital management and service delivery is monitored and reported. Such will be beneficially to pregnant women, thereby increasing obstetric care amongst others.
- ▶ If partnership is sought with telecom companies to reduce the case of data and to ensure that young people are able to monitor and report the quality of service received



## KENYA: Chakuna Initiative, Nairobi, Kenya

### Context: Sexual and Reproductive Health in Kenya

- ▶ Of the approximately 1.6 million Kenyans living with HIV in 2013, about 16 percent were children and adolescents (0-19 years).<sup>49, 50</sup> About half of adolescents (15-19 years) had ever been tested and only a quarter of those knew their HIV status (24%)<sup>90</sup>
- ▶ About half of adolescents (15-19 years) had ever been tested and only a quarter of those knew their HIV status (24%). Among sexually active HIV positive adolescents, only a quarter reported using condoms at their first sexual intercourse. In a study conducted in 2011 in Rift Valley and Coast regions among HIV positive adolescents (15-19 years), 76 percent of boys and girls intended to have children in future, two-thirds of HIV positive girls had already begun childbearing or were pregnant, while 27 percent of boys had impregnated someone. In addition, 75 percent of pregnancies among HIV positive girls were reported as unintended. Moreover, 64 percent of girls and 48 percent of boys were out of school.<sup>91</sup>
- ▶ Married adolescents experience sexual intercourse more frequently compared with girls who are not married, with very limited condom use despite a higher risk of HIV. Evidence suggests that the age gap between married adolescents and their partners tends to be large, while marriage to peers is often a coping mechanism usually in the context of an unintended pregnancy.<sup>92</sup> Partly due to limited education, married adolescents have less access to SRH information and services, while power imbalance within relationships increases their odds to intimate partner violence.<sup>93</sup>
- ▶ Each year, almost two-thirds of the estimated 345,000 pregnancies among adolescent women aged 15–19 in Kenya are unintended. The vast majority (86%) of these unintended pregnancies occur among adolescents who have an unmet need for modern contraception.<sup>94</sup>
- ▶ an estimated 665,000 young women aged 15–19 in Kenya are married or sexually active and want to avoid becoming pregnant in the next two years. More than half of this group—357,000 adolescents—have an unmet need for modern contraception because they either use no contraceptive method or use traditional methods.<sup>95</sup>

### What did the project Do?

Chanuka initiative sought to educate young people through formal and non-formal methods and in school and out of school on issues related to their sexual and reproductive health rights. The main objectives of the initiative were to

- ▶ Increase the level of awareness on SRHR issues
- ▶ Reduce and prevent cases of abuses
- ▶ Improve uptake of Sexual reproductive health services within the local medical facilities.

In order to achieve these objectives, the initiative visited schools and institutions of higher learning to promote sexual and reproductive health awareness. The idea was to create safe spaces in which young people are free to talk about their issues without interference. The initiative also involved engaging out-of-school youth in community social halls within the city of Nairobi. Sports was used as a unifying factor to mobilize youth to engage in the initiative. Through these activities, safe spaces and networks among youth were created and encouraged, as well as messages regarding SRHR are passed. In the implementation of the project, the following was taken into consideration

1. Selection of the location – The selection of the schools and spaces where the meetings are held take advantage of previous initiatives. They are already well-known spaces that have been identified as favourable for the development of the initiative.
2. Sport activities planning – Sports act as a means to create, strengthen and develop ties among youth. Their goal is also to support the creation of a safe space where youth can talk about their issues relating SRHR, possible solutions, and options of action that don't take too many resources. The planning and development of sports activities are carried mainly by the youth groups, while the organizations act as a supporting agent for logistic tasks.
3. Expert counsellors' tents – Tent are set up where an arrange of different experts –including doctors and lawyers—are located in order to be consulted during the activities. Counsellors are contacted through the organizations and their constructed alliances.



## With which stakeholders?

The focus of this project is on community mobilisation and through the use of information, education and communication approaches. The theory of change focused on young people as the main drivers of the initiative. For every discussion that is held, young people are at the core of delivering the content of the discussion sessions. They plan an important role in development and implementing sporting activities during which messages on SRHR are passed.

The initiative also worked with expert counsellors who come from different fields. These counsellors include lawyers, doctors and teachers and they planned an important role in advising and guiding youth in topics related to SRH.

The success of this initiative can also be attributed to the participation of religions and traditional leaders. The initiative worked with religious and traditional leaders in the development of the activities, serving as a support agent that facilitates logistics of the initiative. Religious and traditional leaders not only facilitate spaces such as rooms to carry out the meetings, they also take active part in them.

Schools and Higher Education Institutions – Schools and Higher Education Institutions are facilitators for the development of the initiative. They are the first contact in the initiative, often facilitate logistic tasks and are vital agents in the spread of messages regarding the promotion of SRH.



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## What impact since the project started?

The implementation of the Chanuka Initiative has led to a great change for the youth in Nairobi. Before the initiative was implemented, youth didn't have information regarding SRHR; nor trust-worthy information, nor where to go in case they need to access any kind of services for exercising their rights and granting their health. Young people in Nairobi didn't know where to go if they had any problem or needing any counselling regarding the topic.

Since the implementation of the initiative, the flow of information has greatly improved. Now young people now know where to get information regarding SRHR and where to access related services. Due to this initiative, young people are also able to access information and counselling during the meetings and sports activities, since the initiative includes the set-up of tents where these experts are available. The presence of the expert counsellors proves especially when discussing topics such as abortion, that still is highly taboo and controversial in Kenya.

### Some of the high impact success of the project includes:

1. Ownership of the initiative from part of the youth – Active involvement of youth in the implementation of the initiative is a key success factor. Youth organize the first meetings carried out, organize forums and activities. The content of meetings is defined and build by the youth, while the organizations act as facilitators for logistics. The active involvement of youth also encourages the development of ideas, activities and strategies that don't consume a lot of money.
2. Involvement of religious institutions and traditional leaders – The involvement of religious institutions and traditional leaders is a key factor of success for the initiative. They are invited from the start to talk openly about controversial topics that aches SRHR of the youth. The controversial topics include abortion, gender-based violence, child marriages, among others.
3. The early involvement of religious institutions and traditional leaders facilitates their engagement with youth's interest regarding SRHR and increases the probabilities to obtain their support. It also makes work easier, since they obtain the support from all the stakeholders, build networks with them, legitimize SRHR claims and educate religious and traditional leaders on the importance of sexual and reproductive rights.
4. Replication of the initiative – The fact that youth passes on the messages shared in the meetings is key. The replication of the initiative –that are not only low cost, but youth built and oriented—among diverse youth populations and communities facilitate the flow of information. It also allows for more documentation on Kenya's youth issues regarding SRHR and on the ways solutions to these issues are constructed.
5. Cross-sectorial partnership formation – The initiative has proved to be a great tool to create and strengthen cross-sectorial partnerships. These partnerships are key to organize high-impact events that can mobilize different people from different parts of the country. Partnerships also strengthen the organization's network and capacity to tackle issues regarding SRHR in Kenya, and to offer a more diverse arrange of services.
6. Cross-sectorial partnerships have allowed to make visible the need to strengthen health systems and to make them friendly for young people. Partnerships have also encouraged the commitment of the government with the development of SRHR in Nairobi.

7. The implementation of the initiative also raised awareness of the situation of girl in local areas. It helped make visible the drop of girls from school –especially in rural areas—and the need for economic empowerment. The need for economic empowerment of girls and women have been discussed hand-in-hand with SRHR.
8. Finally, the creation of free and safe spaces for the youth helped to generate a more peaceful coexistence among people in the community.

## What recommendations moving forward?

- ▶ Lobby the government to press for sexual education in schools – Implementation of the initiative needs to be accompanied by a holistic lobby strategy that integrates sexual education in the curriculum development for schools.
- ▶ Integrate legal and medical service provision on the development of the initiative – Assistance on both medical and legal services are vital to link youth with best practices regarding SRHR. This, as the integration of these services facilitates access to medical services regarding SRHR, as well as first legal aid for topics that are needed.
- ▶ Strengthen the strategies for youth's active involvement in the initiative – Active participation of the youth in the leading activities of the initiative are key for its success. As such, it is a need to integrate activities that promote active participation from the youth and that encourage highly mobile populations to stay committed with the initiative.
- ▶ Include strategies to increase active youth representation in decision making spaces – The initiative should integrate activities that develop the possibilities to promote active representation of the youth in decision making spaces. This includes training with the youth involved in the initiative, as well as endorsing youth representation in decision making institutions.
- ▶ Cross-sector partnerships are vital for sharing important information regarding SRHR and to consolidate a strong network for advocacy. Cross-sector partnerships also allow to manage issues that cannot be directly addressed by a single organization and to promote coalitions to exercise civil society pressure.



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# FOCUSING ON DIFFERENT FORMS OF ADVOCACY

As has already been outlined, there are various forms of advocacy activities that you could potentially undertake. Let us explore two forms of advocacy more closely, media advocacy and policy advocacy.

## Media Advocacy

‘Media advocacy shifts the focus from the personal to the social, from the individual to the political, from the behaviour or practice to the policy or environment. While traditional media approaches try to fill the ‘knowledge gap,’ media advocacy addresses the ‘power gap.’ Improvements in health status are believed to come about primarily from gaining more power over the policy environment rather than simply gaining more knowledge about health behaviours’.<sup>99</sup>

Media advocacy is the strategic use of newsmaking through TV, radio, newspapers and social media to promote public debate, and generate community support for changes in community norms and policies. Members of the general public are the ultimate decision-makers and opinion leaders in our society. Community attitudes, beliefs, norms, and practices are shaped by the dialogues that take place within families and the social networks we experience in our everyday lives.

### Layers of strategy

The layers of strategy framework helps advocates (a) define the problem, the solution, and the party who has the power to make the changes in systems or structures that will improve health outcomes; (b) identify how to reach them with media; (c) determine what to say to them; and (d) ascertain how to attract journalists' attention.

#### Overall strategy

The overall strategy articulates the need for change at a structural level in light of the limitations of personal

behaviour change. The focus on structural change is rooted in the basic public health principle that creating change at the population level will have a greater impact

than promoting change one person at a time. In developing an overall strategy, advocates must define the problem they seek to solve, name a specific solution they believe will help address the problem, and identify which individual or body has the power to create the change they seek.

### Media strategy

The media strategy defines how, or whether, mass media, social media, or personal communication or some combination is best to further the overall strategy. In media advocacy the media (in all its modern shapes and sizes) is merely a tool for bringing attention to the need for change, not an end unto itself, and therefore advocates must determine if and how the media will advance their advocacy goals. If advocates can influence the target in other ways, there may not be a need to engage the news media. If the media can be an effective vehicle for putting the issue on decision makers' agendas, developing a solid media strategy means thinking through which modes of communication and which news outlets will be most effective. Do the targets get their information from the local newspaper? Do they pay attention to online and social media sources? Do they listen to the radio? In today's information environment, it is likely a combination of all of these.

### Message strategy

The message strategy includes the message, the messenger, and the audience: what will be said, who will say it, and to whom (as identified in the overall strategy). Messages generally answer three questions: What is the problem? What is the solution? And why does it matter? How the message is framed can influence how the targets understand the problem and whether they recognise the solution as legitimate.

### Access strategy

The access strategy is about gaining access to journalists, bloggers, and others who have access to the desired audience (i.e. people in positions of power to create change). This strategy includes determining when and how to seek media attention and prepare spokespersons to deliver the message. An effective access strategy takes into consideration when media attention can have an impact. Ultimately advocacy can take time and advocates may need to revise and redirect even the most thorough media advocacy plan. By working through the layers of strategy, and revisiting their goals and objectives, media advocates can track their progress and reroute themselves when needed.<sup>100</sup>

## CASE STUDY: social media and the layers of strategy

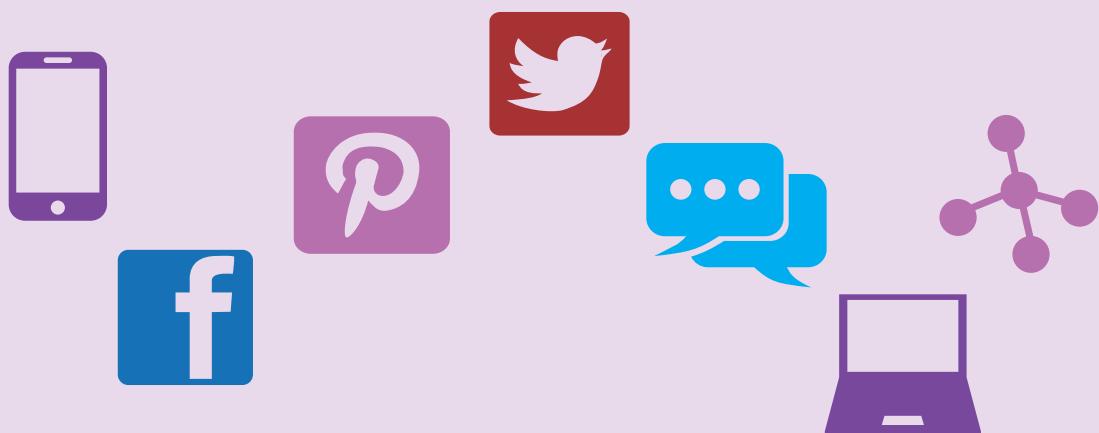
In February 2012, the **Susan G. Komen for the Cure Foundation** announced a decision to discontinue breast cancer screening funding to Planned Parenthood Affiliates of America owing to the foundation's policy not to contribute to organizations under congressional investigation. Planned Parenthood was under investigation at the time due to the fact that it offered abortion-related services.

Planned Parenthood tried to engage directly with the Komen Foundation to protest the funding cuts, and when it received no response, they decided to take their message directly to Facebook.

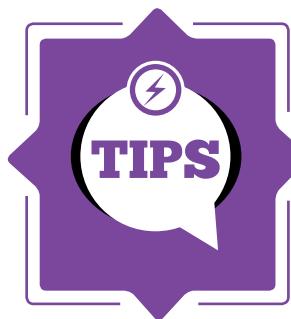
Planned Parenthood's message strategy focused on the specific breast cancer services that would be lost by the funding cuts. The organization strategically focused the conversation on breast cancer screening to remind the public that the organization provides an array of women's health services, not just abortion (which is significantly more controversial than breast cancer services). This message strategy probably helped Planned Parenthood gain widespread support, including from people who may not support abortion rights.

The Komen Foundation reversed its decision three days later. In those three days, the number of 'likes' on Planned Parenthood's Facebook page shot up by 10,000, and the organization raised \$3 million (more than three times the amount that the Komen Foundation had threatened to cut).<sup>101</sup>

Social media allows a message to be delivered in real time; thus, the organization could rally support quickly. Facebook (and other social networking sites) are controlled by their user base, so Planned Parenthood did not have to depend on newsroom editors to decide if they wanted to pick up the story. Ultimately, the momentum of the Planned Parenthood campaign in itself became a news story in key national outlets such as the New York Times, which helped Planned Parenthood put pressure on Komen to change its decision.<sup>102</sup><sup>vi</sup>



<sup>vi</sup> Other examples of successful campaigns include South Africa's #FeesMustFall movement, <https://www.csvr.org.za/pdf/An-analysis-of-the-FeesMustFall-Movement-at-South-African-universities.pdf> and the #StrawFree movement, <https://>



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## Tips for Media Advocacy

### ***Authentic voices***

Authentic voices are spokespeople who can provide a unique perspective on the problem and the need for a solution based on their personal or professional life experience. They might have suffered from the problem directly or they might have other direct experience with the issue. Not every spokesperson has to say exactly the same thing, but they have to mean the same thing. Campaigns will rely on different authentic voices depending on the setting, audience, or immediate goal.

### Media bites

Journalists face serious time and space constraints in their stories, and social media has condensed text even further, sometimes down to 140 characters. No matter how complicated the issue, only a few sentences from the most compelling spokespeople are likely to appear in any given news story. The challenge is for advocates to create concise statements—media bites—to increase the chance that their most important points are repeated.

The following are characteristics that make media bites effective:

- ▶ **Succinct, straightforward statement about the problem:** 'Young people have the right to lead healthy lives. They should have access to the tools they need to protect their health - including access to condoms, contraception, and the full array of reproductive health care services'. (Advocates for Youth).<sup>104</sup>
- ▶ **An analogy that brings a picture to mind:** 'HIV is just washing over this country like a tidal wave, and we're trying to give people swimming lessons'. (Illustrating how ineffective current HIV response might be)
- ▶ **Something that evokes strong, shared values.** In South Africa, the term 'ubuntu' is often used in this context.
- ▶ **A statement that makes the magnitude of a problem more visible:** 'It's like two jumbo airliners crashing every day with no survivors' (a quote from tobacco advocates illustrating the number of deaths from cigarettes every day).

Media bites communicate the core message but may be tailored to respond to a specific hard question or be shortened to emphasize one key point.



## Avoiding elephant triggers

If someone tells you "Don't think of an elephant" ... you will probably think of an elephant. In the same vein, do not undermine your cause by invoking the opposition's argument when delivering your message. When advocates use terms such as 'not,' 'despite,' etc in their media bites, they are probably reminding their audience of their opposition's stance. This is called an 'elephant trigger'. For example, advocates for SRH services shouldn't say things like 'We're not trying to encourage young people to have sex...'. This ends up bringing your opponents' argument to the front of the listener's mind.

## Social math

Every day we are bombarded with news stories involving very large numbers. Media advocates use 'social math' to translate statistics and other data so they become interesting to the journalist, meaningful to the audience, and helpful in advancing public policy. The best social math surprises people and provokes an emotional response. Social math examples can be a powerful tool because striking comparisons stay with people. For example, breaking down a number by time. Divide an amount over the course of one year, a day, an hour, or a minute. For example, you could say 'The number of babies born to teen mothers (aged 15 to 19) peaked in 1991 at 70,322. By 1998, the teen birth rate decreased to 53.2 per 1,000, down to 58,141.' But it would be better to say: 'Every 8 minutes a baby is born to a teen.' And, it would be even better to link the data to core values and a policy solution: 'Every 8 minutes a baby is born to a teen. This is completely avoidable if.....', thus the advocates include the specific policy they seek.

# Common Media Opportunity Pitfalls

Seasoned advocacy veterans, AlcoholPolicyMD.com, offers this list of common media opportunity pitfalls:

## Column inches envy

All too often, staff or volunteers within an organization, or in allied organizations, resent the success of a spokesperson who is called upon time and again to speak for the cause. While it may be inevitable that the media will continue to turn to the most informed and most persuasive, resist the pressure to subdue an effective voice simply because others are envious.

## Wrong spokesperson

Your best spokesperson may or may not be you or the executive director of the organisation. You need to choose the right spokesperson for the right situation.



### **Wordiness/jargon/mouthfuls**

You're trying to persuade a general audience, not impress a group of experts. Don't ramble. Stay with one or two clear points at a time. Speak simple, plain English (or the language of the show). Use short, recognizable words. Challenge falsehood tactfully.

### **Being Unprepared**

Needs no explanation

### **Being Overprepared**

If your words and mannerisms sound memorized or rehearsed, they lose much of their punch. Your arguments and main points should be thoroughly and comfortably worked out in advance, but not rigid formulas committed to memory.

### **Bullying, lecturing**

Don't lecture or appear to speak down to your host or adversary. It makes the audience feel that you're lecturing or attacking them, and that is no way to win friends and influence people.

### Mistaking cuteness and cleverness for wit and humour

Wit and humour are wonderful weapons to disarm a sceptical host or hostile adversary, but not every would-be humourist is good at it. Don't reach for humour, unless unbiased friends or colleagues confirm that you're good at it. Otherwise, be serious and straight. It's safer.<sup>108</sup>

## Policy Advocacy

**Policy advocacy** is a specific type or form of advocacy, of which there are many. It is the process of taking action, using a series of strategies, to influence **the creation and development of public policy**. It makes use of multiple targeted actions directed at changing policies, positions or programmes. Specifically, policy advocacy seeks to:

- ▶ Establish new policies;
- ▶ Improve on existing policies and/or;
- ▶ Challenge pieces of legislation that impact negatively on particular individuals or groups.

Policy advocacy looks specifically at **public policy**, which is **a set of laws (or other types of legislation) taken by government, or other governing bodies that have a local, national, regional or international reach**. In summary, policy advocacy is directed at shaping public policy.

### Why use policy advocacy?

There are numerous reasons why policy advocacy is an effective way to bring about change in society. For a start, laws and policies are implemented across large jurisdictions and therefore affect large numbers of people, sometimes the populations of entire countries or regions. Policy advocacy targets **policy and decision makers; the people who are mandated to develop, implement and evaluate policy**. By alerting them to policy gaps and shortfalls, organisations are able to influence the content of policies, which in turn allows for shifts to take place around social norms and practices.

In addition to this, policy advocacy:

- ▶ Takes the work we do to scale - meaning that it can reach large numbers of people;
- ▶ Gives people leverage to demand their rights because they are protected by law;
- ▶ Commits government to implementing the strategies contained in policy or legislation, to fund and support civil society, and adopt best practices as developed by civil society.



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## Working with men and boys in the area of policy advocacy

Policies affect lives and determine the opportunities and resources men and women can enjoy. With specific reference to working with men and boys, policy interventions have been shown to bring about positive changes to men's gender-related attitudes and behaviours. Policy initiatives have the potential to lead to larger-scale changes in men's behaviours and attitudes relating to gender and health and to challenge social norms and institutional cultures that continue to perpetuate inequalities and violence.<sup>110</sup> In order to achieve this and be most effective, policies should be gender transformative<sup>vii</sup> and gender synchronised<sup>viii</sup> so as to ensure they do not reinforce negative societal values and norms.<sup>111</sup> It is nevertheless important to remember that policies and laws alone cannot effect long-term and sustained change. While they are an integral first step, they must be followed up by effective implementation.

<sup>vii</sup> 'Gender transformative' refers to action that seeks to promote equitable relationships; challenge male gender norms; transform traditionally accepted norms associated with being a man or a woman; and change gender relations. Adapted from Gupta GR, Whelan D, Allendorf K. *Integrating gender into HIV/AIDS programmes: review paper for expert consultation*. Geneva: WHO, 2003, [http://www.who.int/gender/hiv\\_aids/en/Integrating%5B258KB%5D.pdf](http://www.who.int/gender/hiv_aids/en/Integrating%5B258KB%5D.pdf) (accessed January 2012).

<sup>viii</sup> 'Gender-synchronised approaches are the intentional intersection of gender transformative efforts reaching both men and boys and women and girls of all sexual orientations and gender identities. They engage people in challenging harmful and restrictive constructions of masculinity and femininity that drive gender-related vulnerabilities and inequalities and hinder health and well-being.' Margaret E. Greene and Andrew Levack, *Synchronizing Gender Strategies, A Cooperative Model for Improving Reproductive Health and Transforming Gender Relations*, 2010, For the Interagency Gender Working Group (IGWG), [http://www.engenderhealth.org/files/pubs/gender/synchronizing\\_gender\\_strategies.pdf](http://www.engenderhealth.org/files/pubs/gender/synchronizing_gender_strategies.pdf)

## 7 Steps to Effective Policy Advocacy

Although these steps are presented sequentially, in most cases, some of these processes occur simultaneously. In addition, organisations may need to revisit particular steps, while others are ongoing in nature. Therefore, this step-by-step guide is an outline that may be consulted when conducting or planning policy advocacy strategies. Also keep in mind that continual work should take place to monitor the implementation of laws and policies.

### STEP 1

#### IDENTIFY THE PROBLEM

Start by identifying the problem or issue at hand. It may emerge that the problem lies with policy. In order to identify what the problems or issues are, advocates should:

- ▶ Conduct formative research: this includes doing a policy scan or analysis which involves reading the policy, critiquing it and identifying gaps;
- ▶ Understand the accountability landscape: which organisations are working on similar issues and what national, regional or global accountability architecture exists, such as national human rights institutions, regional bodies, UN special rapporteurs, the Universal Periodic Review etc.
- ▶ Carry out community consultation: engage with the affected community to see if you have left out anything in your analysis of the policy and to gain a better understanding of their experiences. Community consultation should be an ongoing process;
- ▶ Strategise: your organisation needs to determine the course of action that it will take based on the

formative research, accountability landscape and community consultation.

### STEP 2

#### ASSESS ORGANISATION PRIORITIES, RESOURCES AND RISKS

Once you have identified an issue, you must determine whether or not your organisation has the financial and human resources needed to carry out policy advocacy. It is also necessary to determine if there are any risks to your organisation that would result from engaging in policy advocacy.

### STEP 3

#### ENGAGE THE COMMUNITY

Mobilise the community so that they become active citizens. This may include:

- ▶ Conducting training sessions;
- ▶ Carrying out rights literacy initiatives and awareness raising campaigns, which could include the distribution of materials such as pamphlets, booklets or manuals providing relevant information;
- ▶ Mobilising the community for any direct action activities such as pickets, protests or marches that may be necessary.

### STEP 4

#### ENGAGE CIVIL SOCIETY

Build advocacy networks and alliances with relevant civil society organisations. You need to identify relevant partners who have an interest in the issue or who can contribute expertise or resources to the policy advocacy activities. You can either join existing coalitions who do, or plan to, conduct policy advocacy to address the issue; or you can form a new alliance. It is important to identify the roles and responsibilities of those within the alliance structure to avoid conflict and to ensure that the alliance operates effectively and optimally. Make sure you partner with organisations, or people, who share your stance and views, who are committed to the alliance's objectives and to fulfilling their roles and duties in the alliance. However, be aware of the 3 Bs:

- ▶ BE aware of the pitfalls of alliance building: reaching a consensus within a large group can sometimes be difficult and time consuming. You may have to take on more responsibility than you had originally envisaged;
- ▶ BE conscious of the power you may have in an alliance. Ensure you do not abuse this power;
- ▶ BE humble, learn to listen and do not impose your views or priorities on others.

### STEP 5

#### ENGAGE GOVERNMENT

Policy advocacy usually seeks to engage various sectors of the government which include public servants, policy makers, elected officials and legislators as well as ministers. Organisations must build relationships with key government personnel such as policy makers and policy implementing staff. In building these relationships, organisations should engage with officials by making recommendations (submissions) to parliament or state departments tasked with conducting research on a particular issue or area of law or policy in order to develop a new law, or to amend an existing law or policy. The recommendations must be justified with reasons. You should also participate, as far as the public is allowed, in observing parliamentary processes relevant to the statute or policy issue.

Furthermore, be aware of who is an ally, opponent or who is indifferent to your position so that you can devise targeted strategies to engage with them on different levels and to influence them to support your position.

### STEP 6

#### ENGAGE THE MEDIA

The media can be used as a resource to advance policy advocacy, to gain community support and influence policy-makers. Your organisation should identify which media sources to approach in order to deliver key messages to the public. This can include the writing of articles and press releases for the print

media; using social media to write organisational opinion pieces; or using the radio or television for interviews or debates, which can facilitate public dialogue on the issue. Try to involve community members where possible.

## STEP 7

### MEASURE THE EFFECTS (MONITOR, EVALUATE AND HOLD ACCOUNTABLE)

Throughout the policy advocacy process, you must be aware of the impact of your activities on people on the ground as well as at the highest levels of government. By doing so, you will be able to identify the areas that require more targeted efforts, new strategies altogether or those who need to be held accountable.

For example, if not enough people are aware of an issue, you may need to increase media coverage to reach a wider audience, or you may need to strengthen your support base by inviting more civil society organisations to join your cause. You may even consider instituting legal proceedings against the government through a court of law if your policy advocacy activities are unsuccessful and the policy is, for example, violating the fundamental human rights of a marginalised group of people. Also make sure to monitor the implementation of policies and laws. Without effective implementation, the best policies and laws in the world will be meaningless.



## Worksheet Guide for Policy Advocacy

As an added tool, this worksheet can be consulted as you devise your policy advocacy initiatives.

STEPS YOU CAN TAKE	QUESTIONS TO ASK YOURSELF	YOUR NOTES
<b>Identify the problem</b>	<ul style="list-style-type: none"> <li>▶ What is the issue you are trying to highlight?</li> <li>▶ What research can be collected to be used as evidence?</li> <li>▶ How does the research reveal a policy gap or area that needs to be amended or removed?</li> <li>▶ What are the key steps in developing and supporting policy implementation?</li> </ul>	
<b>Assess organisation priorities, resources and risks</b>	<ul style="list-style-type: none"> <li>▶ Are you considering any activities that could pose risks of violence or other forms of harm?</li> <li>▶ Have you identified unacceptable risks in advance?</li> <li>▶ Does your organisation have the time and resources to drive the policy advocacy initiative?</li> </ul>	
<b>Engage community</b>	<ul style="list-style-type: none"> <li>▶ What are the community's needs and concerns?</li> <li>▶ How can they be assisted to articulate these needs and concerns and/or mobilise effectively?</li> </ul>	
<b>Engage civil society</b>	<ul style="list-style-type: none"> <li>▶ Which organisations have the same views and are willing to partner?</li> <li>▶ What expertise or resources can other organisations provide that can strengthen the policy advocacy?</li> <li>▶ How will roles and responsibilities be shared and divided?</li> </ul>	

<b>Engage government</b>	<ul style="list-style-type: none"> <li>▶ Which government departments, institutions or policy makers support or oppose the policy?</li> <li>▶ Which ministries or departments are affected by the policy?</li> <li>▶ Which relationships need to be developed?</li> <li>▶ What existing relationships can be utilised or strengthened?</li> </ul>	
<b>Engage the media</b>	<ul style="list-style-type: none"> <li>▶ What message are you trying to send?</li> <li>▶ Who is your target audience?</li> <li>▶ What is the best media source, or combination of sources, to use to promote your messaging?</li> </ul>	
<b>Measure effects (monitor, evaluate and hold accountable)</b>	<ul style="list-style-type: none"> <li>▶ Has there been an impact at grassroots and government levels? Is implementation taking place?</li> <li>▶ In what ways can your policy advocacy strategy be improved?</li> <li>▶ Gather evidence to hold government accountable, if implementation is poor and commitments are not being met.</li> </ul>	

In collaboration with MenEngage Africa partners and with the support of the United Nations Development Programme (UNDP), the United Nations Population Fund (UNFPA), the UN Trust Fund to End Violence Against Women administered by UN Women, and the Swedish International Development Cooperation Agency (SIDA), Sonke has developed a number of policy reports, and an SRHR Policy Scorecard, that evaluate the level of engagement of men and boys in policies dealing with HIV and AIDS; sexual and reproductive health rights (SRHR); gender-based violence (GBV); parenting and LGBTI rights. These policy reports were designed to be used as advocacy and programming tools to strengthen a focus on engaging men for gender equality within national laws and policies. The key audiences are national and regional civil society, policymakers and decision-makers. Please refer to the Resources section for a link to these reports.

## Making use of the Policy Reports and SRHR Scorecard

Below are some advocacy initiatives that can be undertaken, which relate specifically to these policy reports. For example, organisations could:

- ▶ **Call a meeting with government or its representatives:** As mentioned in the previous section, your organisation or advocacy alliance can invite members of government to a discussion meeting where you can look at the findings of the policy reports and propose ways of shaping future legislation so that it engages with men and boys and promotes gender equality.
- ▶ **Write submissions:** You can utilise the recommendations listed in the policy reports as the basis for submissions, offering examples of ways to include more progressive and proactive language on men and boys.
- ▶ **Actively take part in policy development processes:** Attend meetings, send delegates and representatives of your organisation and/or alliances in order to push for the recommendations highlighted in the policy reports. These can then form part of new policies or strategic plans.
- ▶ **Conduct your own policy scans:** Use the framework of analysis utilised within the policy reports to guide your own analyses of new draft policy and legislation, so as to be able to influence such policy to include language on the proactive engagement of men and boys.
- ▶ **Write articles and issue press releases:** On the basis of the findings in the policy reports, you could write articles that highlight some of the gaps in existing legislation, especially those concerning male involvement within the key areas identified in the policy reports.

- **Appear on the news or radio to foster debate:** The gaps and issues raised in the policy reports can form the basis for broader discussions thereby igniting a national conversation and placing issues in the public discourse.
- **Engage with the community:** Given that the policy reports only focus on policy, it would be beneficial to engage with diverse communities to see how men and boys are impacted by being left out of key health and gender policies, while also capturing the experiences of women and girls.

## Scorecard on Sexual and Reproductive Health and Rights (SRHR) policies in Africa

### Engaging men and boys in the promotion of SRHR

**Why engage men and boys in the promotion of sexual and reproductive health and rights?**

Across Africa, as in many parts of the world, sexual and reproductive health and rights (SRHR) is largely considered women's, while men are seen as SRH providers and their partners and parents. And while sexual and reproductive health services are critical, men's health must continue to be a priority for governments the world over. However, despite a global recognition for the need to engage men in sexual and reproductive health and rights (SRHR) since the mid-1990s, little attention has been placed on the specific role of men and boys in SRHR, both to improve their own and their partners' SRHR as well as to reduce the burden on public health care systems. Where attention has been given to the needs of men and boys, it has generally been assumed that their sexual and reproductive health could be addressed by simply adding extra services onto existing ones traditionally tailored to women, which results in limited utilisation of these services by men. This exacerbates gender inequality, leads to poor health outcomes, and disproportionately excludes nearly half of the population. This half of the population—men—can and should play a critical role in preventing unintended pregnancies and sexually transmitted infections including HIV as well as play a supporting role in maternal and child health. In short, inadequately recognizing and addressing men's SRH needs as both individual and partners negatively impacts women, men, and health systems.

Encouragingly, research shows that men



and boys—of all sexual orientations—want to be involved in sexual and reproductive health and rights, both for themselves as well as to play a more supportive role to their partners. Additional research also shows that working with men and boys is integral to addressing gender inequalities, strengthening human rights and to improving the health and wellbeing of both men and women. Research is still needed, however, to better understand the best ways of reaching men for SRH services, particularly for their own SRH needs. Nevertheless, what is clear is that men, both heterosexual and otherwise, need to be enabled to proactively take care of their own health, as well as learn to support their partners in accessing SRH services, while always respecting their partner's rights over her own body and SRH choices. A multi-pronged approach, including supportive policies, is needed to successfully improve male engagement, where men are addressed as clients, supportive partners, and advocates of positive change.

**Engaging men as supportive partners, clients and advocates for positive change**

While continuing to ensure women have access to SRH and their needs are met, if men are not engaged as supportive partners, clients of SRH services and advocates for positive change, the result is limited in terms of successful and gender equal SRH that can benefit both women and men.

This document is the result of a policy review and is intended to inform the 2018 African Union Conference on Population and Development (AUCPD) and the 2018 Beijing Platform for Action.

MenEngage Africa is a member of the MenEngage Global Network, which includes MenEngage Asia, MenEngage Europe, MenEngage Latin America, and MenEngage Middle East.

## Advocacy resources

1. Culture and Creativity, The Advocacy Course Lecture Series, <https://www.culturepartnership.eu/en/publishing/advocacy-course/what-is-advocacy>
2. Salsa, Online Advocacy Software, <https://www.salsalabs.com/online-advocacy-software#> (not for free)

## SRHR Resources

1. *Curriculum on Reproductive Sexual Health and Civic Participation for Out Of School Young People*, Restless Development, India April 2013, p. 118, <https://restlessdevelopment.org/file/res-india-curriculum-outofschoolyouth-2013-pdf>

## Advocacy and Youth Resources

1. *Power, Rights and Participation*, A practical guide to power, rights and participation in the context of the post-2015 process. The aim is for strengthened advocacy skills particularly in relation to governance in the post-2015 context. Young people will be empowered to influence the implementation of the Sustainable Development Goals at their national level in the years to come. Released by ActionAid, British Youth Council, Plan UK and Restless Development, March 2015. <https://restlessdevelopment.org/file/power-rights-and-participation-pdf>
2. *Global Agreements, Grassroots Advocacy: Youth and Governance in a Post 2015 World*. Created by Restless Development and Plan UK, this toolkit explains why and how young people can be involved in governance and accountability processes and supports young people to build an advocacy plan so that they can influence the post-2015 development process. It has been created to be used in conjunction with a report by Overseas Development Institute, Restless Development and Plan UK called 'Partners for Change. Youth and Governance in a Post-2015 World' (September 2014), <https://restlessdevelopment.org/file/global-agreements-grassroots-advocacy-toolkit-pdf>
3. *An Advocacy Toolkit*, Youth Advocacy Toolkit: The Education We Want, 2014. This advocacy toolkit, produced by Plan International in partnership with A World at School and the Youth Advocacy Group of the Global Education First Initiative, has been developed for young people, by young people. Packed full of ideas, tools and inspiring stories, the resource helps children and youth to effectively advocate for their right to an education, [https://issuu.com/planinternational/docs/english\\_toolkitlores](https://issuu.com/planinternational/docs/english_toolkitlores)
4. *Let Girls Lead, LGL Guide to Girl-Centered Advocacy*, Rise Up, An award-winning intensive curriculum that engages girls and their allies in strategic advocacy to improve girls' lives around the world, <https://riseuptogether.org/advocacy-guide/>
5. *Advocating for Change for Adolescents*, A Practical Toolkit for Young People to Advocate for Improved Adolescent Health and Well-being, Women Deliver, <https://womendeliver.org/publications/advocating-change-adolescents/>

## SRHR and Advocacy Resources

1. *An Advocate's Guide: Monitoring Universal Access to Sexual and Reproductive Health and Rights in the Context of the Sustainable Development Goals*, Arrow: Championing women's sexual and reproductive rights, <https://arrow.org.my/publication/an-advocates-guide-monitoring-universal-access-to-sexual-and-reproductive-health-and-rights-in-the-context-of-the-sustainable-development-goals/>

## SRHR and Youth Resources

2. You Act, European Youth Network on Sexual and Reproductive Rights, <http://youact.org/what-we-do/>
3. Delivering sexual and reproductive health services to young people: Key lessons from Marie Stopes International's programmes, <https://mariestopess.org/media/2117/delivering-sexual-and-reproductive-health-services-to-young-people.pdf>
4. *Youth Changing The River's Flow, RIGHT the Gender Story! Gender Transformation Training: A Facilitator's Guide*, SAFAIDS 2016, Changing the River's Flow: A gender transformative programme for young people to reduce HIV, GBV, teen pregnancies and barriers to accessing sexual and reproductive health and rights among young people (10–24 years) in Zimbabwe, <https://genderjustice.org.za/publication/youth-changing-rivers-flow-facilitators-guide/>
5. *One Youth Can: Facilitator's Guide and Participants' Workbook*, Sonke Gender Justice, 2016, intended to be a resource for those working with youth on issues of citizenship, human rights, gender, health, sexuality and violence. The activities encourage all youth to take action to help prevent domestic and sexual violence, reduce the spread and impact of HIV and AIDS, and promote gender equality, <https://genderjustice.org.za/publication/one-youth-can-facilitators-guide/> & <https://genderjustice.org.za/publication/one-youth-can-participants-workbook/>

## SRHR, Youth and Advocacy

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<sup>79</sup> Nibogora B., Shemiah N., AMSHeR (African Men for Sexual Health and Rights) (2018), A Policy Advocacy Guide on Sexual and Reproductive Health and Rights (SRHR) for Young Key Populations (YKP), p. 53, <http://www.childrenandaids.org/sites/default/files/2018-11/A%20policy%20advocacy%20guide%20on%20sexual%20and%20reproductive%20health%20and%20rights%20for%20young%20key%20populations.pdf>

<sup>80</sup> ACT!2015 Advocacy Strategy Toolkit. A practical toolkit for young people who are passionate about advancing HIV and sexual and reproductive health and rights through national advocacy in the post-2015 agenda. Restless Development with input from the PACT and UNAIDS in collaboration with UNAIDS, March 2014, p. 32, <https://restlessdevelopment.org/resources-tools>

<sup>81</sup> Nibogora B., Shemiah N., AMSHeR (African Men for Sexual Health and Rights) (2018), A Policy Advocacy Guide on Sexual and Reproductive Health and Rights (SRHR) for Young Key Populations (YKP), p. 31, <http://www.childrenandaids.org/sites/default/files/2018-11/A%20policy%20advocacy%20guide%20on%20sexual%20and%20reproductive%20health%20and%20rights%20for%20young%20key%20populations.pdf>

<sup>82</sup> 2010. Indicator 34. Guttmacher Institute (2014). Demystifying Data: A Guide to Using Evidence to Improve Young People's Sexual Health and Rights. <http://www.guttmacher.org/pubs/demyst-data-cp.html#dd-en>

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<sup>84</sup> 2010-2014. Data refer to most recent year available. UNICEF global databases, 2014, based on DHS, MICS and other nation

<sup>85</sup> 2014. UNAIDS 2014 estimates

<sup>86</sup> National AIDS Control Council and National AIDS and STI Control Programme (2014), Kenya HIV Estimates

<sup>87</sup> Obare, F, Anke van der Kwaak, and Birungi, H. Factors associated with unintended pregnancy, poor birth outcomes and post-partum contraceptive use among HIV-positive female adolescents in Kenya. *BMC Women's Health* 2012, 12:34 doi:10.1186/1472-6874-12-34 (2012)

<sup>88</sup> Mumah J, Kabiru CW, Izugbara C, and Mukura C "Coping with unintended pregnancies: Narratives from adolescents in Nairobi's slums" STEP UP Research Report Nairobi: African Population and Health Research Center. (2014)

<sup>89</sup> Mathur, S. et al, Too Young to Wed: The Lives, Rights and Health of Young Married Girls. International Center for Research on Women (2003) 57. United Nations Education Fund, Early Marriage: A Harmful Traditional Practice – A Statistical Exploration (2005)

<sup>90</sup> <https://www.guttmacher.org/news-release/2019/kenya-reproductive-health-services-fall-short-adolescents-needs>

<sup>91</sup> <https://www.guttmacher.org/news-release/2019/kenya-reproductive-health-services-fall-short-adolescents-needs>

<sup>92</sup> Photo by Kato James, Uganda, 2018, Courtesy of Photoshare, [www.photoshare.org](http://www.photoshare.org)

<sup>93</sup> Photo by Kato James, Uganda, 2018, Courtesy of Photoshare, [www.photoshare.com](http://www.photoshare.com).

<sup>94</sup> Photo by Kristen Zozulin/ Frank H. Netter MD School of Medicine at Quinnipiac University, 2017, Courtesy of Photoshare, [www.photoshare.org](http://www.photoshare.org). Students at a youth empowerment camp in Nanyuki, Kenya, learn the correct way to apply, remove, and dispose of condoms.

<sup>95</sup> L. Wallack, *Journal of Public Health Policy*, 1994 Winter; 15(4):420-36, 'Media advocacy: a strategy for empowering people and communities', <https://www.ncbi.nlm.nih.gov/pubmed/7883943>

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<sup>97</sup> Lori Dorfman and Ingrid Daffner Krasnow, 'Public Health and Media Advocacy', Annual Review of Public Health, Vol. 35:293-306 (Volume publication date March 2014), First published online as a Review in Advance on December 11, 2013, <https://www.annualreviews.org/doi/full/10.1146/annurev-publhealth-032013-182503>

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<sup>99</sup> Photo by Population Services International, 1995, Courtesy of Photoshare, [www.photoshare.org](http://www.photoshare.org), A radio show in Botswana provides a forum for youth to ask and hear about sex-related matters.

<sup>100</sup> Advocates for Youth, Contraceptive Access, <https://advocatesforyouth.org/issue/contraceptive-access/>

<sup>101</sup> Photo supplied by Sonke Gender Justice.

<sup>102</sup> AlcoholPolicyMD.com, Take Action, Checklist: Common Media Opportunity Pitfalls, [http://www.alcoholpolicymd.com/take\\_action/checklist\\_2.htm](http://www.alcoholpolicymd.com/take_action/checklist_2.htm)

<sup>103</sup> Photo by Robert Karam, 2008, Courtesy of Photoshare, [www.photoshare.org](http://www.photoshare.org), Children in Tanzania listen to an HIV/AIDS radio program as part of the STRADCOM (Strategic Radio Communication for Development) project.

<sup>104</sup> AlcoholPolicyMD.com, Take Action, Checklist: Common Media Opportunity Pitfalls, [http://www.alcoholpolicymd.com/take\\_action/checklist\\_2.htm](http://www.alcoholpolicymd.com/take_action/checklist_2.htm)

<sup>105</sup> Photo by Alex Sorto on Unsplash, [www.unsplash.com](http://www.unsplash.com)

<sup>106</sup> Gary Barker et al. 'What men have to do with it: Public Policies to Promote Gender Equality', Men and Gender Equality Policy Project, coordinated by the International Center for Research on Women and Instituto Promundo, pp. 8-9; 'Policy Approaches To Involving Men And Boys In Achieving Gender Equality And Health Equity', prepared by Sonke Gender Justice Network for the Department of Gender, Women and Health, World Health Organisation, (June 2010), p. 10.

<sup>107</sup> 'Policy Approaches To Involving Men And Boys In Achieving Gender Equality And Health Equity', op cit, p.12.

<sup>108</sup> Photo by Eye for Ebony on Unsplash, [www.unsplash.com](http://www.unsplash.com)

