HIV Advocacy from the Ground Up
A Toolkit for Strengthening Local Responses

1

Understanding Advocacy
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Cover design rationale

The cover design is inspired by the visual of pegboard used to store and organise tools such as hammers, screwdrivers and spanners, making them readily accessible as and when it is needed. The cover is UV finished except for the evenly spaced circles which have been intentionally left untreated to resemble holes and simulate the tactile effect of a pegboard. The toolkit is divided into four books, each with a different colour to distinguish and guide the content.

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Foreword

The Asia Pacific Council of AIDS Service Organizations (APCASO) is a network of non-government organisations (NGOs) and community-based organisations (CBOs) that provides HIV/AIDS services within the Asia Pacific region.

APCASO has long worked to ensure that community-level advocacy is prioritised as a key element in the development of strategic responses to AIDS. Recognising that many national responses remain inadequate in the Asia Pacific, particularly in respect to communities most affected by HIV and AIDS, APCASO is focusing its efforts on capacity building and advocacy.

Its two main strategies are to increase the capacity of NGOs and CBOs to respond to HIV/AIDS, and to develop a coordinated regional response through capacity building and advocacy that include identification, discussion and dissemination of positions on urgent and critical issues.

In 2005, in collaboration with the Australian Federation of AIDS Organisations (AFAO) and the Australian Agency for International Development (AusAID), APCASO rolled out the Community Advocacy Initiative (CAI). The project is underpinned by three primary objectives:

1. Facilitate a process for NGOs and CBOs to identify their policy and/or advocacy aims.
2. Provide training on developing action plans on policy analysis and advocacy to enhance the role of NGOs and CBOs in the national response to HIV/AIDS.
3. Strengthen the role of APCASO to document and disseminate lessons learned to NGOs and CBOs and other key groups in the Asia Pacific region.

While almost all countries in Asia Pacific have in place national AIDS plans, the epidemic continues to outpace the response, even with 90% of countries worldwide reporting to have a multi-sectoral framework in place. Are these frameworks and the actions and policies developed with the full participation of the very people they are intended to help – those most affected by HIV and AIDS and the organisations that represent and assist them?

NGOs and CBOs usually work ‘on-the-ground’ with both HIV positive and affected persons and communities. These organisations have direct access to the experiences of their constituencies and firsthand knowledge on how policies affect programme initiatives and the lives of their clients. While NGOs and CBOs are conscious they hold valuable information and data that could better inform policy makers and be utilised to develop policies at the organisational level, they often lack the specific skills or experience to do so effectively. This toolkit, written by HIV and training experts for trainers, provides ways to teach effective advocacy skills to programme managers, programme staff and the community. Furthermore, this toolkit will assist in advocacy planning while giving a framework to increase the effectiveness of advocacy through planning, monitoring, evaluation and reporting.

Furthermore, it is crucial that people living with and affected by HIV/AIDS be involved in a meaningful way in the development of services and policies that directly have an effect on them. Participating in advocacy for their rights and helping to frame policies to improve the environment for more and better HIV interventions and AIDS services provides one of the best ways for this involvement. Borrowing from the early days of the now famous grassroots AIDS advocacy ‘movement’ called ACT UP (AIDS Coalition to Unleash Power) that popularised slogans such as Silence = Death and Action = Life, we wish to add Advocacy = Empowerment. Implementation of the activities taught by this toolkit should result in advocacy from the ground up in ways that will create far reaching changes to improve, among other things, the access that people living with HIV and AIDS and their loved ones have to a better life.

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Acknowledgements

When APCASO’s Coordinator at the time, Susan Chong, first thought of a capacity building project, her concerns were not limited to training on advocacy but also mentoring and networking. As a result of her efforts and the support of the Australian Federation of AIDS Organisations (AFAO), the Community Advocacy Initiative (CAI) took root in three key countries – China, Indonesia and Thailand, and has become the foundation for APCASO’s advocacy capacity building programme.

The APCASO Advocacy Toolkit, Advocacy from the Ground Up: A Toolkit for Strengthening Local Responses, is a collaborative effort. It has involved a diverse group of experts and activists, each of whom generously shared the experiences they have gained from working with community-based organisations who provide HIV services ‘on the ground’.

We thank Paul Causey and the late Zaitun (Toni) Mohamed Kasim for writing and refining the toolkit. Toni Kasim was also the lead trainer in the original workshops and we are highly appreciative of her thoughtful approach in their design and delivery. Her skills and knowledge in effectively working with community members and HIV/AIDS NGO staff ensured that these workshops were tailored to meet local contexts and that the programme reflected HIV/AIDS work ‘on the ground’. We thank all those whose previously published work were used as reference materials in the development of this toolkit, especially the International HIV/AIDS Alliance, Support for Analysis and Research in Africa (SARA) and the Policy Project of the Future Group (now known as the Constella Futures Health Policy Initiative).

We thank all focal point organisations, collaborators and participants in the advocacy workshops, particularly those in Indonesia and Thailand as initial testers and users, who helped us to further refine the Advocacy Toolkit. A special thank you goes out to the Thailand Non-government Coalition on AIDS (TNCA) and the Northern NGO Coalition on AIDS (NNCA), also of Thailand, and to GAYa NUSANTARA of Surabaya, Indonesia and the Indonesian Planned Parenthood Association of Yogyakarta.

The APCASO Advocacy Toolkit would not have been possible without the financial support by the Australian Agency for International Development (AusAID) provided through AFAO as part of the Australian HIV/AIDS Partnership Initiative. We are also grateful to Rico Gustav, the former Civil Society Liaison Assistant, UNAIDS Jakarta, for his immediate and ready support towards the workshop held in Indonesia and the advocacy network that was established afterwards.

We would like to thank Angela Kuga Thas and Gladys Malayang for their guidance in the earlier versions of the toolkit. Liow Moi Lee and Chuah Siew Eng gave their invaluable time proof-reading this publication. The APCASO publication coordinating team, Goh Soon Siew, Serena Chiting Chuang, Kirenjit Kaur and Rathi Ramanathan worked very hard to ensure the toolkit was published.

Last but not least, we would like to thank all of who will use, adapt and further build on this Advocacy Toolkit. We invite all of you to continue to share your experiences and knowledge with APCASO now and into the future.

Don Baxter
Regional Coordinator
APCASO

June 2008
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### Abbreviations/Acronyms

<table>
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<th>Abbreviation</th>
<th>Description</th>
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<tr>
<td>AIDS</td>
<td>Acquired Immunodeficiency Syndrome</td>
</tr>
<tr>
<td>ARV</td>
<td>Anti-retroviral</td>
</tr>
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<td>ASO</td>
<td>AIDS Service Organisation</td>
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<tr>
<td>CBOs</td>
<td>Community Based Organisations</td>
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<tr>
<td>GO</td>
<td>Governmental Organisation</td>
</tr>
<tr>
<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-governmental Organisation</td>
</tr>
<tr>
<td>IDU</td>
<td>Injecting Drug User</td>
</tr>
<tr>
<td>IEC</td>
<td>Information, Education and Communication</td>
</tr>
<tr>
<td>INGO</td>
<td>International Non-governmental Organisation</td>
</tr>
<tr>
<td>M&amp;E</td>
<td>Monitoring and Evaluation</td>
</tr>
<tr>
<td>MSM</td>
<td>Men who have sex with men</td>
</tr>
<tr>
<td>PLHIV</td>
<td>People Living with HIV</td>
</tr>
<tr>
<td>UNAIDS</td>
<td>Joint United Nations Programme on HIV/AIDS</td>
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How to use this toolkit

This toolkit was developed to provide a guide to a wide range of activities with resource and reference materials for the trainer. It is intended to broadly elaborate on the concept of advocacy and how it plays a key role in effective HIV interventions and AIDS services.

Wherever possible, the toolkit builds on actual experiences from the ground up and on work already being carried out by a number of NGOs and CBOs involved in HIV and AIDS programmes and services. That way trainers and participants can understand how advocacy differs from other activities but at the same time, how current activities actually contribute towards advocacy.

Hence, the toolkit is designed in such a way so as to help raise consciousness and to encourage organisations to specifically include advocacy planning, monitoring and evaluation into daily work routines and procedures.

The content of the toolkit is divided in such a way so as to allow flexibility to the trainer to design a workshop as defined by the needs of the participants concerned. Consequently, a trainer may choose to design anything from a two-day to a five-day workshop, or program managers might utilise individual exercises from the toolkit to be used for example during a staff meeting.

Perhaps the most important aspect in using this toolkit is for the trainer to maximise the learning of participants by drawing on participants’ own experiences in judging what will be the core content for the intended workshop. Trainers will want to adapt the material to reflect the realities of HIV and AIDS work and services in their own area, and the differences in local private, government and religious sectors.

The toolkit will guide trainers and participants on advocacy and in mobilising community members, civil society, people living with HIV and AIDS, and other stakeholders in advocating for resources and services in their community.

The handouts contained in the toolkit were carefully selected to provide useful materials for trainers and participants. It is hoped that the examples used cover what is in the text and facilitate understanding and learning. Trainers are encouraged to supplement handouts with locally produced materials whenever possible to ensure the material has relevancy for the participants.

The toolkit has been tested in three workshops in different countries and presented in two languages in addition to English. It is currently being translated into Indonesian, Thai and Mandarin.¹

The Toolkit is divided into four books

They are as follows:
A. Understanding advocacy
B. Integrating advocacy into your organisation
C. Building networks for advocacy
D. Advocacy action tools

A. Understanding advocacy

Beginning with the question, “Why advocacy?” this book introduces the basics of advocacy, what it is and is not. Participants will gain a working definition and be able to relate it to their own local situation. Participants will also be able to arrive at an advocacy goal and understand the forms of advocacy and the elements that it comprise.

¹ CAI workshops have been presented in Indonesia, Thailand and Malaysia at the time of publication. Contact APCASO for more details and for access to the translated materials.
B. Integrating advocacy into your organisation

This book begins by identifying the advocacy work that an organisation may already be carrying out. Using the 8-step framework, advocacy methodology and planning is explored in depth.

A critical aspect of achieving success in advocacy work is identifying, understanding, measuring and reporting the impact of advocacy actions. The next part of the book explains the cycle of learning inherent in doing monitoring and evaluation at the ground level, and is preceded by a quick and fun exercise to review the stages of advocacy while introducing the need for and timing of both monitoring and evaluation in the planning process. The section ends with an assessment questionnaire which assist participants in creating a plan of action to integrate, or better integrate, advocacy into daily work. The book also contains an important chapter on gender and advocacy which includes ways to review methodology, actions, materials and networking so as to ensure that gender issues are incorporated in all that we do.

C. Building networks for advocacy

The overall aim of this book is to examine how networks can strengthen the impact of activities carried out by community-based organisations. The book further explains how through following eight key steps, networks can be sustained. The last part of the book focuses on common issues that emerge in building networks and strategies in overcoming these strategies.

D. Advocacy action tools

This book contains ten action tools that comprise best practices that will help the user develop understanding and specific skills in the area of advocacy. The actions tools have been designed for development of specific skills that are needed in implementing the different forms of advocacy. It gives basic explanations of the most common activities, what to do and what not to do, in implementing the activity, tips, examples and samples of the activity where appropriate. Each tool can be used for trainings and reference but the facilitator can select for practice a few of the most commonly used forms (such as face-to-face meetings and writing a press release) and others we have already come to see as necessary to have. The Advocacy Action Tools are on the following subjects:

1. Taking a seat at the table: Working inside the system
2. Affecting legislation and public policies
3. Lobbying or face-to-face meetings
4. Preparing a position paper and briefing notes
5. Writing and delivering a presentation
6. Understanding media advocacy
7. Writing and using a press release
8. Learning how to use media advocacy tools
9. Engaging the media
10. Using the internet for advocacy work

Additional information for trainers

The topics in the toolkit were originally designed to be used in a sequential manner; for that reason, trainers in particulars are encouraged to read all four books of the toolkit to best understand the conceptual design.

This will help trainers understand the interrelatedness of the topics and activities as they can then choose which to use for the intended workshop. It will also help maintain continuity that will enhance the participants’ understanding of the complexities of advocacy and policy development.

Caution is given to trainers to not focus solely on organisational needs but also to carefully understand the training needs of participants. Through the experiences of the CAI project, a workshop on advocacy will have its own objectives that may differ from those of the organisers, but all of these need to be considered
vis-à-vis the skills, talents and training needs of participants. Therefore, a clearly defined set of selection criteria for both objectives and for participants is needed. Finally, it is important to remember that the building of skills takes time; one workshop will not be sufficient to ensure that skills are properly imparted. Therefore, given the large number of advocacy skills-building exercises in this toolkit, a series of workshops and trainings should be considered. Outside resources could also be tapped, especially if expertise is identified within different organisations and individuals in the community, and mechanisms can be put in place to regularly facilitate the sharing of learning.

A look back at history

Civil society groups have engaged in advocacy to press for a range of policy objectives, including better access to health care and more cheaply priced drugs.


General tips for trainers

The trainer is someone who through participatory techniques facilitates more effective learning. The role of the trainer is to:

• Encourage the trainees to actively participate in the discussions.
• Establish a safe learning environment for learning to happen.
• Pose critical questions.
• Build the capacities of participants.

As a trainer, you do not have to know everything there is to know about advocacy but it is important to know where information can be found. As an advocacy trainer, your role is to also give hope and encouragement throughout the training, and this can easily be done through case studies of successful advocacies, facilitating participants’ sharing of experiences, etc.

Ensuring a smooth and successful training session involves many things, including:

1. Give brief introductions at the start of each session about how it is linked to the last session and where it fits with the rest of the training. This technique is called framing.
2. Keep the sessions lively while still being sensitive to the needs of the participants, such as ensuring enough breaks, or being aware of topics that might be very sensitive or explosive, or require some participants to remain anonymous about their particular identities. At all times, be prepared to change the agenda and the process if required.
3. Remember to allocate enough time for the training or the particular section – the larger the group, the more processing time will be needed. If more time is needed for a particular section, always ask the group for permission to alter the agenda.
4. Involve everyone. Be aware of participants who are too quiet. Help provide space and safety for their active inclusion without forcing them to do something that feels too difficult.
5. Openly and honestly manage tensions within the group without being dragged into the conflict itself.
6. At the end of sessions, give or facilitate a brief summary of key findings and conclusions before moving on to the next session.

Try to use activities that are fun and that demonstrate the topics in upcoming sessions. There are various activities that can be found in a range of popular communication books that can be adapted (please refer to the Resources – Publication listed at the end of this book).

Note on advocacy for trainer
The range of skills required to do effective advocacy work is broad and it is best to tailor the training to focus on the needs of the participants where skills are concerned, as it will directly relate to their immediate work. These skills can be roughly divided into two types:
- Skills we need to affect change – i.e. professional skills we need in order to do our advocacy (public speaking, presentation, writing press releases, negotiation skills, etc.)
- Skills we need for our own organisational development and internal strength building (networking, negotiation, conflict management and resolution, documentation, etc.)

You may not know all the skills your participants may need before they arrive at the workshop, and it would be impossible to anticipate and provide information for all the skills needed in this toolkit. Depending on how familiar your participants are with the issues related to advocacy, they may or may not be able to anticipate what their needs might be.

Nevertheless, you may want to ask the participants prior to the training what skills they have acquired, what skills they might want to build on, so that you may want to organise a follow-up training which focuses primarily on skills building.

However, certain forms of advocacy should be familiar to everyone, such as taking a seat at the table, writing a press release or media advisory, face-to-face meetings and talking to the media.

A note on using the advocacy action tools
Skills are built over a period of time and experience accounts for a large part of how well we can do something. In other words, the participants are not going to become experts instantly. But they will at least have a familiarity as to what is required to do it well. Some tips on effective skills building sessions:
1. Make sure you include ample exercises to get the participants involved.
   - Be creative about how you do this. You may want to consider the following:
     - Role plays.
     - Video taping presentations and playing them back to the participants.
     - Involving people who are not actually part of the training like having participants actually ring journalists to arrange for an appointment (pre-warn a few of your journalist friends, though!)
2. Getting outside resource people to share their experiences is a very useful strategy. Involving them not only gives participants a chance to ask someone who has had first-hand experience but may also build links between the participants and the resource people for future work. You can also have resource persons on a panel to give feedback on a press release the group has worked on, for example.
3. Provide useful links and contacts lists which the participants can build on when they are back in their organisations. Use any existing media guides or lists that may be available in the area from news outlets, trade organisations or groups like UNAIDS.

Five key elements of effective communication
No matter whether advocacy work is a large part of what your organisation does or is something you need to begin to do, there are skills you must develop to make your advocacy actions more effective. Successful advocacy depends on effective communication. Here are five things that, when always followed, will lead to effective communication:
1. Identify the issue.
2. Cite a personal connection or describe its local impact.
3. Use key facts to support your case.
4. Make a specific “ask”.
5. Say thank you and request follow-up.
1.1 Why Advocacy?
1.1 Understanding Advocacy

Why advocacy?

Objectives of exercise

- To get participants to understand the need for advocacy.
- To understand advocacy is achievable.
- To understand how advocacy can address the root causes of a problem.
- To understand that there are several ways of doing advocacy.

Duration

Depending on activity and level of processing: 30-45 minutes.

Note to facilitator

You can use various activities to get participants to try their hand at doing some advocacy. Below are some suggested exercises that can be adapted based on your target audience.

Suggestion 1

Facilitator lays down some harsh and extreme expectations for follow-up action by the participants as their obligations post-workshop. The participants will likely object and attempt to have them changed.

Facilitator welcomes everyone to the training and then conveyed seriously something like the following:

As you will soon see, there is a lot to learn about advocacy, and we are going to need all the time we have to understand it and figure out how to include it in our work. So, we will need each of you to do some follow-up work after the training because we have used valuable resources to get all of you here. I have set down some follow-up action or work that will need to be carried out by each of you and the organisations you represent to ensure that you get to practise the knowledge and skills you will acquire from this training. Instructions are as follows:

1. Each organisation will develop an advocacy action plan and fully implement all activities within 12 months from the training date.
2. Since all of you here are coming for a training on advocacy, you and your organisation will ensure that at least three advocacy actions are successful during the 12 months of your advocacy action plan implementation.
3. If your organisation does not have sufficient resources to carry out your advocacy action plan, you will write and submit to donor agencies as many proposals as needed to get the necessary funding within the 12-month period.
4. Your organisation will dedicate one full-time staff to carry out the advocacy action plan and report back in writing to APCASO every month on progress.
5. If your organisation needs to foster additional support in your advocacy from others, you have to develop your own work relationships, linkages and network without the help of APCASO or AFAO.

Are there any questions or comments about these expectations that you have to fulfil after the workshop?

By the second or third expectation, the participants should be getting fairly restless. By the end of the list, they should be shocked and maybe enraged, and so busy talking among themselves that they don’t even hear Expectation No. 5. Let this happen.

When the facilitator is hit by questions and complaints (get the participants to open up and take you on if needed), stop the talking and say something like: “OK, I don’t know why you don’t like these expectations for follow-up action but you can break up into five groups [maybe count off 1, 2, 3, 4, 5] with each group taking the number of the expectation that matches your group number. Decide what you want changed – and why. You have ten minutes.”

After 10 minutes of group work (and stop them at 10 minutes), have each group give their ideas. Ask questions to see if they have really thought through the issue, that is, the expected follow-up action assigned to their group. With the
entire group, arrive at a set of realistic follow-up actions that can be discussed and taken up at the participant’s own organisations.

When you have finished, say: “Congratulations, you have just participated in an advocacy action.”

**Suggestion 2**
Show a video of a successful effort in advocacy or newspaper clippings on successful advocacy strategies for participants to read. It is important to choose news from countries/contexts that are similar to the participants’ own contexts. Use *Processing Questions* listed at the end of this chapter.

**Suggestion 3**
Do a problem tree analysis for a particular scenario (e.g. an HIV-positive child being prevented by school authorities to attend school).

Draw a tree on the board (with roots and branches) and write one of the case study issues on the central trunk. Write onto the chart the cause of this problem, going deeper and deeper back to the root cause. Examine also the impact of the problem, and again looking for several layers of causes.

Participants are asked to prioritise the causes and effects in a hierarchy – some effects are immediate effects and some effects are long-term, distant, or general: specific issues are detailed towards the middle and broader, more generalised issues at the branches and roots (see Figure 1).

The leaves and roots may also be grouped in parallel sets, so you have one set of roots and cause-effect following one aspect of the root problem and another set of roots giving detail about another aspect of the problem. Think about where your organisation’s work fits into the problem tree – are we addressing the practical needs (which addresses the top part of the tree) or are we also addressing the structural needs? Use *Processing Questions* at the end of the chapter.
Understanding Advocacy

1. Why Advocacy?

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**Figure 1: Example of problem-tree analysis**

**Steps we can take to reduce impact:**
- Organise and establish support groups.
- Provide alternative employment.
- Provide funds to support private classes or classes held at home.
- Arrange for volunteer teachers who can teach at home.

**Leaves: Impact of the problem**
- death due to poverty
- health deteriorates
- poverty
- lack of income in adulthood
- survival
- no education
- quality of life
- vulnerable
- lonely
- depression
- no friends
- social isolation
- cannot protect themselves
- lack of coping skills

**Trunk: Main problem**
- HIV+ child not allowed in school

**Roots: Causes of the problem**
- no policy
- ignorance
- school does not know how to deal
- worried about other parents
- no awareness
- lack of proper information
- fear of the unknown

**Steps we can take to address root causes of the main problem:**
1. Meet with school board to raise awareness regarding HIV/AIDS.
2. Show good examples from other schools.
Suggestion 4
Forum theatre or role playing. Using the scenario in Suggestion 3, the facilitator could assign different roles to the participants – teachers, child, parents of HIV-positive child, non-governmental organisation (NGO), school board of directors, journalist, etc. The idea is that the parents and the NGO they approach must successfully get the child to school. The role of the facilitator is to orchestrate the forum theatre such that there is a concerted advocacy effort. This activity can be quite involving. Be sure to “de-role” the participants by thanking them for the acting they have done. Use processing questions below.

Processing Questions
Some useful processing questions include (need to be varied according to the nature of the case and methodology used):
1. What is the problem that is confronted by the community in the video/article?
2. Describe the ways in which they try to address their problems.
3. Can you think of other strategies they can adopt to address their problems?
4. What was the outcome of each of the strategies they adopted?
5. What would happen if they only continued to address the symptoms of the problem?
6. What actions did they use to create change at a systemic level, or at a structural level? Do you think these actions are important? If so, why?

5 In the 1960s, Brazilian theatre director Augusto Boal developed the concept of forum theatre to help demonstrate to ordinary people that they have both the power and skills to make needed changes in the world. See also: http://www.chfa.uni.edu/comstudy/organisations/SAVEForum/theatre.htm
1.2
Understand HIV Response in Your Country
HIV Advocacy from the Ground Up
A Toolkit for Strengthening Local Responses

1.2
Understanding Advocacy
2. Understand HIV Response in Your Country

Understand HIV response in your country

The diversity of the Asia-Pacific region is mirrored in the variety of ways that each country has responded to HIV over the course of the pandemic. Although often limited in scope, almost from the beginning, advocacy efforts, community mobilisation, and volunteer-based support were driven by those who were infected and affected – usually family members, friends and neighbours. These men and women often did not realise that they were advocating for themselves and their loved ones.

Before embarking on advocacy, it is important to look at the typical response in your country, discuss what the response might consist of and note who usually is responsible for it. Please use the following broad areas to assess the response.

1. Surveillance of the epidemic: determining who is at risk and why, who is infected and how they became infected, and the dynamics and behaviours that impact both prevention and care delivery.
2. Prevention: reducing the transmission of HIV, which includes VCT (voluntary counselling and testing), condom and lubricant distribution, education and efforts to heighten public awareness.
3. Treatment, care and support for people living with HIV/AIDS: a broad and crucial area that includes access to health care, ARV, treatment and prophylaxis (prevention of onset) of opportunistic infections, counselling, home/clinic/hospital care and palliative (late-stage) care.
4. Research on HIV/AIDS and its impacts: work vital to providing up-to-date information about the positive and negative impacts of medications, behaviour-modification interventions, cultural factors and other matters and how they affect the positive and affected people.
5. Human rights of people living with HIV/AIDS: basically, this encompasses all of the work done to fight stigmatisation and discrimination.
6. Government coordination and planning: this includes national AIDS planning as well as community-based coordination and funding efforts.
7. Policy development: putting into the “systems” all of the above that are necessary to make change happen through governing principles, rules, regulations and laws.

Each response is usually multi-sectoral; that is, it happens at different levels of society, from the local (such as patient groups and affected networks, community-based organisations, hospitals and clinics, school and businesses) to the national (such as human rights institutions, national ministries and national AIDS coordinating councils), regional (such as APCASO) and international (such as the UN, International Federation of the Red Cross and Red Crescent Societies, international NGOs and universities) organisations.

Exercise: Charting the response in your area

The Handout 1: HIV/AIDS Response Chart can first be completed individually and then discussed in groups. For completeness and accuracy, you may want to check your observations with those of some of the responding parties in your area. This information should be updated every time a new response activity or service is discovered. It will also be the basis upon which you can build a referral database, if you do not already have one. The chart is a good test of your own knowledge of the services and activities in your area, too.

Referral information is an important tool for you to have on hand at all times. For example, PLHIVs who have just lost their jobs or faced other forms of discrimination (e.g., at health centers), might call you for information about their rights and need referral to relevant NGOs that will take up their concerns. It is important that it be accurate and up to date.

1 Adapted from APN+ and APCASO. Valued Voices. GIPA Toolkit: A Manual for the Greater Involvement of People Living with HIV/AIDS. APN+ and APCASO. Kuala Lumpur. 2005.
Instructions for completing the chart:
1. Complete the chart to the best of your own knowledge.
2. Try to name the organisation conducting the activity. If you do not know an organisation’s name but do know that there is activity in that area, simple put a check mark (✓) in the box. In the case of government organisations, name the ministry and/or department, if known.
3. After you are finished, discuss your results with a group of others who have also done the exercise. (Note: a facilitator may want to review the charts and prepare the responses in advance. Whatever the case, be sure to prepare a large wall chart to record the responses for all to see.)
4. Write up the final version and circulate it first throughout your organisation to obtain feedback from as many people as possible. You may be surprised at the amount of information your own members have.
5. Finally, verify all information to the extent that time allows. This may involve contacting each responding party to verify that the services and activities are still being provided, learn about changes or new activities and verify the contact information (names, phone numbers, email address), location and hours of operation-information that you will need for making referrals.
## Handout 1: HIV/AIDS response chart

<table>
<thead>
<tr>
<th></th>
<th>Gov’t.</th>
<th>Networks/PLWHA</th>
<th>CBO/NGO</th>
<th>INGO/UN</th>
<th>Hospital/clinics</th>
<th>University</th>
<th>Private sector</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surveillance of the epidemic</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prevention</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Treatment, care and support</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Research on HIV/AIDS and its impact</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Human rights of people living with HIV/AIDS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Government coordination/planning</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Policy development</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
1.3 Introduction to Advocacy
Introduction to Advocacy

Objectives of exercise
- To explore the various activities conducted by organisations to identify whether what they are already doing may constitute advocacy.
- To be able to discern between what is advocacy and what is not.
- To explore the differences between advocacy work and other types of community interventions.

Duration
- Input from facilitator/resource person: 10 minutes
- Group exercise: 20 minutes
- Processing the activity: 30 minutes

Note to facilitator
The following can be explained to the participants:
Why are we doing a training about advocacy? As it looks a lot like other things we do, it’s easy to think that advocacy is just a new name for everything our organisations already do. But the truth is that even the people who are doing it don’t always know that they are – and organisations that could benefit greatly by incorporating advocacy into their work need to understand it better so that it can become a tool that lives up to its great potential.

You just did some advocacy – as well as some other kinds of actions – in the warm-up exercise a few minutes ago. You may not have recognised it as advocacy, though. What makes advocacy so hard to identify among all the other actions our organisations take is that advocacy refers to actions that are intended to bring about other actions.

At its most basic, advocacy refers to the various kinds of actions we take to influence other people – usually people in positions of power who can change things like the laws and policies that affect and even control our lives and the quality of our lives – to make the changes our ultimate goal.

Exercise: Identifying advocacy activities

Break up into small groups based on organisation; in other words, join up with the other people from your organisation who are at the training. If you’re the only one, try to join a group whose organisation does similar work.
- Choose one person from your group to present
- First, write your organisation’s mission at the top of the paper given to you.
- Take 30 minutes to write on separate sheets of paper all the activities being carried out at your organisation in the past year. Do not filter or censor – just list them.
- In your groups, cluster the activities according to categories that you think they would fall under. Decide on activities that you have done in the past year that you think were advocacy. Write them down.

Note to facilitator: The facilitator offers comments on whether the actions reported are actually advocacy or some other form of NGO activity that seems like advocacy, but really is something else – like networking or the activity most commonly mistaken for advocacy, community mobilisation. Conversely, there may be activities that are in fact advocacy but have been mistakenly categorised as something else like training, for example.

Refer to Handout 2 at the end of the chapter.
Another way of looking at the advocacy work we do

There are three different types of advocacy that we probably do in our daily work:

- Policy advocacy: to influence policy and regulations directly.
- Public advocacy: to influence behaviour, opinion and practices of the public in order to influence groups and institutions that are involved in affecting change in policies.
- Community advocacy: to influence groups and institutions that are involved in affecting change in policies by working with affected communities to influence behaviour and practices.

But they each overlap at a certain point and each can influence the other.

Figure 2: Types of advocacy, overlap and influence
## Handout 2: Change-seeking community interventions

<table>
<thead>
<tr>
<th>What is it?</th>
<th>Advocacy</th>
<th>IEC</th>
<th>Community Mobilisation</th>
<th>Networking and Partnerships</th>
<th>Fund-raising and resource mobilisation</th>
<th>Overcoming stigma and discrimination</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Action to lead to changes by influencing someone who can make changes.</strong></td>
<td>Action to lead to changes by influencing someone who can make changes.</td>
<td>Information, education, and communication (verbal, printed materials, radio and TV ads, etc.)</td>
<td>Organising a community to take action.</td>
<td>Groups of people working together for a common goal.</td>
<td>Finding funds or materials to support services and using them for those purposes.</td>
<td>Stopping the abuse of people with HIV which makes them appear ‘bad’ or allows them to be treated as second-class.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>What can it change?</th>
<th>Advocacy</th>
<th>IEC</th>
<th>Community Mobilisation</th>
<th>Networking and Partnerships</th>
<th>Fund-raising and resource mobilisation</th>
<th>Overcoming stigma and discrimination</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Attitudes, laws, policies, and the situations in need of change for HIV+ people.</strong></td>
<td>Attitudes, laws, policies, and the situations in need of change for HIV+ people.</td>
<td>Awareness, behaviour, and common knowledge.</td>
<td>Capacity of communities to identify and address their problems.</td>
<td>Isolation and duplication.</td>
<td>Level of resources available for HIV work.</td>
<td>Level of stigma and discrimination against people living with HIV.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Who does it target?</th>
<th>Advocacy</th>
<th>IEC</th>
<th>Community Mobilisation</th>
<th>Networking and Partnerships</th>
<th>Fund-raising and resource mobilisation</th>
<th>Overcoming stigma and discrimination</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Decision-makers, leaders, policy-makers, people in positions of influence.</strong></td>
<td>Decision-makers, leaders, policy-makers, people in positions of influence.</td>
<td>Target populations (age, gender, sexual identity, localities, etc.)</td>
<td>Community members.</td>
<td>Individuals or groups that have similar agendas.</td>
<td>Communities, local councils, government, donors.</td>
<td>People who stigmatise or discriminate.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>What are indicators of its success?</th>
<th>Advocacy</th>
<th>IEC</th>
<th>Community Mobilisation</th>
<th>Networking and Partnerships</th>
<th>Fund-raising and resource mobilisation</th>
<th>Overcoming stigma and discrimination</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Policy change or implementation; laws or practices that improve the lives of people with HIV.</strong></td>
<td>Policy change or implementation; laws or practices that improve the lives of people with HIV.</td>
<td>Positive changes, e.g. increase in access to HIV medical care; decrease in HIV infections.</td>
<td>Community problems are solved; increase in community participation.</td>
<td>Members of the network or partnership achieve more than individuals could.</td>
<td>Increase in giving of money or in-kind materials and services.</td>
<td>Increased opportunities for positive people (jobs, housing, access to medical care and treatments, etc.)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>How do we use this to address the main targets, i.e. people who have influence over others?</th>
<th>Advocacy</th>
<th>IEC</th>
<th>Community Mobilisation</th>
<th>Networking and Partnerships</th>
<th>Fund-raising and resource mobilisation</th>
<th>Overcoming stigma and discrimination</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Direct advocacy.</strong></td>
<td>Direct advocacy.</td>
<td>Materials that we produce can be sent to the advocacy targets to influence their thinking and awareness.</td>
<td>Building the capacity of community groups to articulate their needs and realities to the advocacy targets.</td>
<td>Ensuring that network members are aware of the advocacy targets and ways in which they can be reached.</td>
<td>Ensuring that some amount of organisational budget is set aside for advocacy work, and not to leave it to chance.</td>
<td>Building the awareness of this constituency to take action to change structural and systemic impediments that keep stigma and discrimination in place.</td>
</tr>
</tbody>
</table>
1.4 Defining Advocacy
Defining Advocacy

Objective of exercise
- To arrive at a shared definition of advocacy.

Duration
- Group exercise 15 minutes
- Processing time 15 minutes

Exercise

Go back to your groups and think about advocacy again. Together, write a one-sentence definition of advocacy as you understand it. Make it specific to your HIV work, not just your ideas of advocacy in general. Then appoint a member of your group to serve as a lobbyist. That person will come back to the large group and try to convince us of your definition of advocacy.

Note to facilitator: When the groups come together, the lobbyists read the definitions and the facilitator writes them on a flip-chart paper. The goal here is to arrive at a definition of advocacy that everyone can agree upon which will also be used and referred to throughout this training. Look for key words, particularly nouns and verbs, that the definitions have in common and underline or circle them. Then, conclude with something like the following (below) as a best definition:

Advocacy is an action or set of actions taken to influence a person with the authority to change laws or policies that will improve the lives of people most affected by HIV/AIDS.
Use the examples below as a guide only; different organisations do different kinds of advocacy – and organisations that include advocacy in their work use different types of advocacy.

- “Advocacy is a strategy to influence policy-makers when they make laws and regulations, distribute resources, and make other decisions that affect peoples’ lives. The principal aims of advocacy are to create policies, reform policies, and ensure policies are implemented.”
  — Advocacy Tools and Guidelines, CARE, January 2001, pg 3

- “Advocacy is used to influence the choices and actions of those who make laws and regulations, and those who distribute resources and make other decisions that affect the well-being of many people.”
  — Advocacy Tools and Guidelines, CARE, January 2001, pg 3

- “Advocacy is speaking up, drawing a community’s attention to an important issue, and directing decision-makers toward a solution.”

- “Advocacy is putting a problem on the agenda, providing a solution to that problem and building support for acting on both the problem and solution.”

- “Advocacy is the process of people participating in decision-making processes that affect their lives.”

- “Advocacy is a process to bring about change in the policies, laws and practices of influential individuals, groups and institutions.”

- “Advocacy is an on-going process aiming at change of attitudes, actions, policies and laws by influencing people and organisations with power, systems and structures at different levels for the betterment of people affected by the issue.”

- “Advocacy is an action directed at changing the policies, positions and programmes of any type of institution.”

- “Advocacy is pleading for, defending or recommending an idea before other people.”
  — An Introduction to Advocacy, Training Guide, SARA Project, pg 4
1.5
Forms of Advocacy
Forms of advocacy

Objective of exercise
• To examine actions that constitute advocacy-type actions.

Duration
Input from facilitator/resource person 15 minutes

Input from facilitator
Now that we have a definition of advocacy, the next step is to look at the things you do that are advocacy-type actions.

Advocacy takes many forms. In HIV work, they range from individual, cost-free types of advocacy to politically sophisticated, high-budget lobbying efforts that large NGOs and governmental organisations (GOs) use, sometimes with professional advocates brought in from the outside.

An example of advocacy at its simplest is a school girl who approaches a teacher or school headmaster to highlight the issue and defend a classmate with HIV who has been prevented from taking part in group activities, and was probably bullied or worse. Her brave action places her at risk but by speaking out against the injustice, she is advocating indirectly. Her action in effect directly prevents stigma and discrimination. Her action becomes an advocacy action when she achieves her goal, maybe without knowing it: to attempt to change the perceptions, attitudes and behaviours of other students, and the school to change its policy, so that all classmates, including those with HIV, can fully participate in school life.

Advocacy at a far more complex and expensive level takes place when UNAIDS lobbies the world’s richest and most powerful governments to give money to help bring ARV treatments to far away regions such as sub-Saharan Africa, India, China – and Southeast Asia – often by using professional lobbyists to handle the advocacy aspects of the campaign. The success of that advocacy has a more easily identifiable aim: to increase access to ARV medication for PLHIV by securing pledges of money from richer nations.

Our advocacy work usually falls somewhere between those extremes. Here’s a chart showing the forms our advocacy typically takes:

<table>
<thead>
<tr>
<th>Forms of advocacy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work from within the system – sitting at decision-makers’ tables (e.g. consultations, planning committees, community advisory boards, etc.)</td>
</tr>
<tr>
<td>Lobbying or petitioning government and other civic officials</td>
</tr>
<tr>
<td>Arranging face-to-face meetings with decision-makers</td>
</tr>
<tr>
<td>Writing and delivering position papers and briefing notes</td>
</tr>
<tr>
<td>Preparing and giving public presentations</td>
</tr>
<tr>
<td>Creating and performing dramatic presentations</td>
</tr>
<tr>
<td>Staging public demonstrations</td>
</tr>
<tr>
<td>Writing letters</td>
</tr>
<tr>
<td>Writing e-mails</td>
</tr>
<tr>
<td>Making phone calls</td>
</tr>
<tr>
<td>Working with the media:</td>
</tr>
<tr>
<td>• Newspapers, magazines and other print media</td>
</tr>
<tr>
<td>• Television</td>
</tr>
<tr>
<td>• Radio</td>
</tr>
<tr>
<td>• The internet</td>
</tr>
</tbody>
</table>
Working with the media in these ways:
- Writing press releases and media advisories (the latter being short notifications to the media of upcoming events and why they are happening or important)
- Holding press conferences
- Doing media interviews
- Creating a website or blog
1.6 Advocacy Targets
Advocacy only works when our efforts influence the people who can make the changes we want. Those people are known as the advocacy targets. There are two general types:

- Institutions: Organisations such as private businesses, multi-national corporations and law-making and law-enforcing bodies (GOs).
- Civil Society: Non-profit, organised groups (like other ASOs, CBOs, NGOs, PLHIV networks and client groups), unions, religious institutions, civic clubs and associations in society that operate independently from government and the state.

Institutions and civil society are where we find the people we direct our advocacy efforts toward, but the important thing to remember is that we don’t advocate to institutions or civil society. For advocacy to be effective, we must find the right people – the ones who can make the desired changes. Examples are the president of a company, government, ministries etc.

Exercise

Complete the following chart by writing suitable target or targets for each type of advocacy. Give out Handout 4. Specify the title of an individual at a governmental or civil agency who would be an appropriate target, e.g. health minister, police chief, or landlord.

A sample of completed chart (Figure 3) is on the next page.
### Figure 3: Sample chart of forms of advocacy/targets

<table>
<thead>
<tr>
<th>Forms Of Advocacy</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work from within the system – sitting at decision-makers’ tables</td>
<td>National AIDS planning committee</td>
</tr>
<tr>
<td>Lobbying government and other civic officials</td>
<td>Deputy General of the Ministry of Public Health</td>
</tr>
<tr>
<td>Arranging face-to-face meetings with decision-makers</td>
<td>General manager of the Nike shoe factory</td>
</tr>
<tr>
<td>Writing and delivering position papers</td>
<td>HIV specialist at the Human Rights Board</td>
</tr>
<tr>
<td>Preparing briefing notes</td>
<td>Volunteer PLWHA advocate</td>
</tr>
<tr>
<td>Preparing and giving public presentations</td>
<td>Lion’s club</td>
</tr>
<tr>
<td>Creating and performing dramatic presentations</td>
<td>Shoppers at the night market</td>
</tr>
<tr>
<td>Staging public demonstrations</td>
<td>Government decision makers</td>
</tr>
<tr>
<td>Writing letters</td>
<td>Members of the local social club</td>
</tr>
<tr>
<td>Writing e-mails</td>
<td>Anyone with an interest in the issue</td>
</tr>
<tr>
<td>Making phone calls</td>
<td>Anyone with an interest in the issue</td>
</tr>
<tr>
<td>Working with these media:</td>
<td></td>
</tr>
<tr>
<td>• Newspapers, magazines and other print media</td>
<td>Readers of the specific publication (why this publication?)</td>
</tr>
<tr>
<td>• Television</td>
<td>Viewers of the TV program (why this channel?)</td>
</tr>
<tr>
<td>• Radio</td>
<td>Listeners of the radio program (why this station?)</td>
</tr>
<tr>
<td>• The internet</td>
<td>Visitors to the specific blogsite/website (why this website?)</td>
</tr>
<tr>
<td>Working with those media in these ways:</td>
<td></td>
</tr>
<tr>
<td>• Writing press releases and media advisories</td>
<td>Reporters interested in the issue</td>
</tr>
<tr>
<td>• Holding press conferences</td>
<td>Media interested in the issue</td>
</tr>
<tr>
<td>• Doing media interviews</td>
<td></td>
</tr>
<tr>
<td>• Creating a website or blog</td>
<td></td>
</tr>
<tr>
<td>Other: [can you think of more?]</td>
<td></td>
</tr>
</tbody>
</table>
### Handout 4

#### Forms Of Advocacy

<table>
<thead>
<tr>
<th>Forms Of Advocacy</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work from within the system – sitting at decision-makers’ tables</td>
<td></td>
</tr>
<tr>
<td>Lobbying government and other civic officials</td>
<td></td>
</tr>
<tr>
<td>Arranging face-to-face meetings with decision-makers</td>
<td></td>
</tr>
<tr>
<td>Writing and delivering position papers</td>
<td></td>
</tr>
<tr>
<td>Preparing briefing notes</td>
<td></td>
</tr>
<tr>
<td>Preparing and giving public presentations</td>
<td></td>
</tr>
<tr>
<td>Creating and performing dramatic presentations</td>
<td></td>
</tr>
<tr>
<td>Staging public demonstrations</td>
<td></td>
</tr>
<tr>
<td>Writing letters</td>
<td></td>
</tr>
<tr>
<td>Writing e-mails</td>
<td></td>
</tr>
<tr>
<td>Making phone calls</td>
<td></td>
</tr>
<tr>
<td>Working with these media:</td>
<td></td>
</tr>
<tr>
<td>• Newspapers, magazines and other print media</td>
<td></td>
</tr>
<tr>
<td>• Television</td>
<td></td>
</tr>
<tr>
<td>• Radio</td>
<td></td>
</tr>
<tr>
<td>• The internet</td>
<td></td>
</tr>
<tr>
<td>Working with those media in these ways:</td>
<td></td>
</tr>
<tr>
<td>• Writing press releases and media advisories</td>
<td></td>
</tr>
<tr>
<td>• Holding press conferences</td>
<td></td>
</tr>
<tr>
<td>• Doing media interviews</td>
<td></td>
</tr>
<tr>
<td>• Creating a website or blog</td>
<td></td>
</tr>
<tr>
<td>Other: [can you think of more?]</td>
<td></td>
</tr>
</tbody>
</table>

You can see that it may be difficult to identify the target of any particular advocacy effort until we are clear about the aims or goals of our advocacy. Those aims then help us to identify the objectives of individual advocacy actions – that is, what we hope to achieve by a particular action and how that fits into our advocacy goals.
At one level, all advocacy actions are the same in that they seek to influence a person in a position to effect a change we want to do so. However, each individual act of advocacy is different or, rather, specific. It has to use exactly the right means (form of advocacy) to reach exactly the right person (target) to take the specific action that will accomplish the goals of the advocacy.

Figure 4: The links between aim, objectives and activities

```
Aim/Goal

↑ ↓

Specific Objectives (or results/effects/outcomes we want to see)

↑ ↓

Activity/Advocacy action (directed to target)
```
1.7 Understanding Aims, Objectives and Activities
Understanding aims, objectives and activities

Objectives of exercise

- To understand the differences between the aims, objectives and activities of advocacy efforts.
- To test objectives against the SMART formula.

Duration

- Input from facilitator/resource person: 15 minutes
- Group exercise: 30 minutes
- Plenary: 40 minutes

Planning advocacy work is similar to other kinds of planning; it is easier to come up with the right activities if we first identify our aims and objectives. This helps clarify what changes are necessary to reach a solution that will bring about the long-term change we have identified. Here are the definitions we use to make the distinctions clear:

- **Aim**: The long-term result that we are seeking.
- **Objective**: A short-term target that contributes towards achieving the long-term aim; objectives reflect the desired outcome, or end result, of activities.
- **Activities**: The individual activities that will accomplish the objectives.

Clear aims allow us to make our work objectives well-defined, specifically targeted, measurable and easy to evaluate when completed. Objectives should be SMART:

<table>
<thead>
<tr>
<th>Specific</th>
<th>Be precise about what you are going to do.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measurable</td>
<td>Quantify your objectives in a way that can be monitored and evaluated.</td>
</tr>
<tr>
<td>Achievable</td>
<td>So you don’t try to do what you cannot realistically accomplish.</td>
</tr>
<tr>
<td>Realistic</td>
<td>Do you have the resources to do it all?</td>
</tr>
<tr>
<td>Time-bound</td>
<td>When will you achieve the objective?</td>
</tr>
</tbody>
</table>

Give out **Handout 5**.

AIDS Bedbhav Virodhi Andolan’s (ABVA’s) advocacy **aim/goal** was to secure basic rights for prisoners involved in male-to-male sex.

Notice that one of the **objectives** is specific: to get the Inspector General of Prisons (the advocacy target, a member of the national government) to supply condoms to prisoners in Indian jails. The NGO is probably only one of the many groups that finds the colonial law that makes sodomy a criminal offence unacceptable – and badly in need of changing. But that would take a long time. The smaller change, getting the Inspector General to change his policy about condom distribution, is more doable.6

The result of this effort was mixed: the petition to declare Penal Code 377 invalid and unconstitutional failed at that time; however, anecdotal reports say that some prisons may now allow condoms to be brought to male prisoners, or at least ‘look the other way’ if not openly allowed, during other prevention activities.

---

6 The result of this effort was mixed: the petition to declare Penal Code 377 invalid and unconstitutional failed at that time; however, anecdotal reports say that some prisons may now allow condoms to be brought to male prisoners, or at least ‘look the other way’ if not openly allowed, during other prevention activities.
**Group work and plenary**

**Note to Facilitator:** Divide participants into two or three smaller groups. Select a case study that they can work on. Ensure that the case study is not too complex at this stage – the idea is to get the participants to explain what is an aim, an objective and an activity.

1. Ask the group to write down what they think are the aim, objectives and activities.
2. Ask that they check their objectives against the SMART formula.
3. Give the group 30 minutes to discuss in small groups, and then discuss in plenary to see if there were similarities and differences in the responses from the different groups.

Advocacy aims can be achieved by accomplishing objectives and engaging in activities that are not themselves advocacy. This is the cause of much confusion about differences that distinguish advocacy from awareness-raising, IEC and other kinds of work that we do as we saw in Handout 2: Change-seeking community interventions.

For example, an organisation can advocate for the implementation of a good national HIV policy. To achieve this aim, it may do direct negotiation and lobbying with and petitioning of the central government and/or local government. An organisation could also undertake educational activities targeted at the people, the relevant law or policy change would affect, to give them the information they need to advocate for themselves. Both of these activities help achieve the overall aim, but the second activity is not advocacy – it is education (IEC) that supports others in carrying out advocacy work.

To summarise, effective advocacy requires having clear goals (broad, long-term aims), achievable objectives (SMART objectives that are more short-term and incremental) and the appropriate activities to achieve those objectives and, eventually, the long-term goal.

---

**Figure 4: The logic of a project – A set of linked hypotheses**

| In order to ________________,  |
| it will be necessary to _________. |
|  
| Goal |
|  
| Objective |
|  
| Expected Results |
|  
| Productions/activities inputs |
|  
| If ________________,  |
| then _________________. |
Handout 5

Case study:
NGO in India challenges penal code provision on sodomy

Note to facilitator: Select case studies according to local needs and issues. Choose examples that are close to the experiences of the participants whenever possible.

AIDS Bedbhav Virodhi Andolan (ABVA), an NGO that campaigns against AIDS and in support of lesbian and gay emancipation, has filed a public interest petition with the High Court of Delhi challenging the constitutional validity of Section 377 of the Indian Penal Code, dating from the colonial era, which makes sodomy a criminal offence.

Indian prison authorities have cited Section 377 as a justification for refusing to distribute condoms to prisoners. In 1992, the Inspector General of Prisons refused to supply condoms in India’s largest prison on the ground that homosexual activity was illegal. The court case has enabled ABVA to develop an extensive and successful public education campaign around the issues of the rights of prisoners and men who have sex with men.

References


Resources – Publications

There exists quite a large body of literature (books, monographs, newsletter and magazine articles and websites) on advocacy and policy change. When searching for assistance, keep in mind that the parts and steps of effective advocacy are almost exactly the same. Whether the issues is improved living with HIV and AIDS or something entirely different such as securing land ownership rights for women, the advocacy to achieve is “a set of actions taken to influence a person with the authority to change laws or policies.”


The POLICY Project (Constella Futures). The POLICY Circle Online. The POLICY Project (Constella Futures). www.policyproject.com/policycd/content.cfm?a0=8


**Resources for media advocacy**
(Source: HIV Advocacy Network, San Francisco AIDS Foundation at www.sfaf.org)

**AIDS Advocacy Network (AAN)**
www.amsa.org/global/aids/
Health professional students dedicated to creating a national (USA) network focused on advocating for the fight against the global AIDS pandemic, with representatives at medical, public health, and nursing schools in the US working to coordinate efforts to have the strongest voice possible. AAN is a program of the American Medical Student Association.

**Asian Harm Reduction Network (AHRN)**
www.ahrn.net
AHRN is a global information and support network, created to link and support the people and programmes working throughout Asia to stop HIV among IDUs. Their online resources contain invaluable information about HIV-related issues, organisations, networks and tactics, many of which have direct application to advocacy actions.

**Benton Foundation**
www.benton.org (http://www.benton.org/publibrary/toolkits/stratcommtool.html)
A web resource with information about communications technology focused on advocacy. The site includes a best practices guide and online tools to help advocates make better use of communications technology.

**HIV Advocacy Network (HAN)**
www.sfaf.org/policy/han/
Public Policy Department
San Francisco AIDS Foundation, San Francisco, CA USA
HAN recruits, trains and organises people living with and affected by HIV/AIDS to actively encourage elected officials and government decision-makers to approve sound public policy in response to the epidemic. Services are mostly USA focused with emphasis on California issues and law makers.

**News for a Change: An Advocate's Guide to Working with the Media**
An excellent workbook for budding media advocates that is crammed with basic principles, practical suggestions, clear examples and specific tips to help policy advocates use the media. Written by a team of media advocacy experts at the Berkeley Media Studies Group, it is available from Sage Publications, at www.sagepub.com.

**SPIN Project**
www.spinproject.org
The Strategic Press Information Network provides technical media assistance to non-profit public interest organisations, and a recently released booklet, SPIN WORKS!: A Media Guidebook for Communicating Values and Shaping Opinion, by Robert Bray. SPIN Works is an excellent tool for advocates looking for more tips for effective media advocacy.

**We Interrupt This Message**
www.interrupt.org
An American non-profit media strategy and training centre dedicated to building capacity in grassroots and public-interest organisations to conduct media work, as well as to reframe public debate and interrupt media stereotypes. This organisation offers beginning and advanced trainings and technical assistance to individuals and groups interested in conducting media activism campaigns.

**YOUANDAIDS, the HIV/AIDS Portal for Asia Pacific**
www.youandaids.org
A site created by UNAIDS containing resources, information, news and interactive communications.
Resources – Organisations and websites

Many organisations are available to assist in advocacy and policy issues for HIV/AIDS as well as working with and for vulnerable populations. Most of the groups maintain extensive databases of a broad range of information, statistics and referrals for areas such as epidemiology, behaviour research, best practices and so forth. As well, most offer opportunities for increased networking, capacity building and skills development activities and publications for organisations, particularly NGOs and CBOs.

AFAO International Program (Australian Federation of AIDS Organisations)

APCASO (Asia Pacific International Council of AIDS Service Organizations)
www.apcaso.org

Asian Development Bank (ADB)
http://www.adb.org/

Association for Women’s Rights in Development
www.awid.org

Constella Futures
(formerly The Futures Group; includes The POLICY Project)
http://www.constellagroup.com/international-development/resources/
http://www.policyproject.com/index.cfm

ICASO International Council of AIDS Service Organisations
http://www.icaso.org/

International Community of Women Living with HIV/AIDS (ICW)
www.icw.org

UNAIDS RST (Asia Pacific Regional Support Team)

UNICEF
http://www.unicef.org/infobycountry/eastasia.html
http://www.unicef.org/infobycountry/southasia.html

UNICEF (United for Children – Unite Against AIDS)
http://www.uniteforchildren.org/index.html

WHO (The World Health Organisation)
http://www.who.int/en/
### Glossary

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advocacy</td>
<td>Action or set of actions taken to influence a person or persons with the authority to change laws or policies to cause them to take action to create, change or modify laws or policies.</td>
</tr>
<tr>
<td>Ally</td>
<td>A supporter, individual or group, willing to work with you to achieve a common goal or aim.</td>
</tr>
<tr>
<td>Audience</td>
<td>Person or group of people at a public event and/or those people who are intended to be reached by outgoing messages.</td>
</tr>
<tr>
<td>Blog</td>
<td>Webpage on the internet where a person or group maintains an online diary, personal log, usually in the order of the date it was put on the webpage, of thoughts and opinions, usually related to a specific subject or interest. Usually comments by readers are allowed to be added, creating a type of online, although not ‘live’, discussion.</td>
</tr>
<tr>
<td>Brainstorming</td>
<td>Training technique used to solve specific problems, gather collective information, stimulate creative thinking and/or develop new ideas, by having a group of people discuss the topic in an unrestrained and unstructured manner.</td>
</tr>
<tr>
<td>Campaign</td>
<td>Organised and aggressive effort to achieve a goal.</td>
</tr>
<tr>
<td>Civil society</td>
<td>Range of non-governmental organisations and institutions that work on behalf of the interests of citizens and which are independent of the government.</td>
</tr>
<tr>
<td>Coalition (also see Network)</td>
<td>Group of organisations or individuals that come together to work toward achieving a common goal or set of goals.</td>
</tr>
<tr>
<td>Constituency</td>
<td>Group of supporters, clients or customers or others to whom an organisation is responsible to; also the residents or group of residents in a geographic area or region as defined by a political system and represented by a government official, usually elected.</td>
</tr>
<tr>
<td>Human rights</td>
<td>Basic rights and freedoms that are regarded as belonging to all human beings, including the right to life, health, freedom from persecution and discrimination and equal treatment under the law.</td>
</tr>
<tr>
<td>IEC – Information, education and communication</td>
<td>Process of developing communication materials and messages to help individuals and communities develop strategies to promote healthy behaviours as appropriate to different settings.</td>
</tr>
<tr>
<td>Inputs</td>
<td>Actions taken and resources used that are intended to lead to the successful achievement of the goals, through measurable outcomes or outputs.</td>
</tr>
<tr>
<td>Intelligence</td>
<td>The process of collecting and analyzing information to make informed advocacy related decisions.</td>
</tr>
<tr>
<td>Journalist</td>
<td>Person whose job it is to report on the news (identify, write and communicate it in some way such as writing a newspaper, magazine or internet article or announcing it on TV or radio).</td>
</tr>
<tr>
<td><strong>Lobbying/lobbyist</strong></td>
<td>Action or actions intended to influence the process and the public officials and legislators involved in making laws, policies and regulations/the person who undertakes lobbying.</td>
</tr>
<tr>
<td><strong>Media</strong> (sometimes referred to as the press)</td>
<td>Organised and systematic ways that the general public gets its information (e.g., news, current events and community happenings). Types of media include: newspapers (daily and weekly); magazines (usually monthly); community, trade organisation and business newsletters (frequency varies); radio; TV (free broadcast and cable); and the internet (websites, blogs, newsgroups, and other new online features and developments).</td>
</tr>
<tr>
<td><strong>Message</strong></td>
<td>Communication of some type, usually short, that conveys a particular point or establishes and conveys the opinion of the sender on an issue.</td>
</tr>
<tr>
<td><strong>Negotiation</strong></td>
<td>Process in which two or more people or groups of people discuss and attempt to agree on outcomes of a disagreement or conflict that will mutually benefit both parties.</td>
</tr>
<tr>
<td><strong>Network</strong> (see also Coalition)</td>
<td>Group of individuals and/or organisations formed around a common interest, usually done to gain support of a particular issue or cause.</td>
</tr>
<tr>
<td><strong>Networking</strong></td>
<td>Process of sharing information and services among individuals and groups having a common interest, both inside or outside an organisation, usually done to gain support of your issue or cause.</td>
</tr>
<tr>
<td><strong>News Advisory</strong> (also Media Advisory)</td>
<td>Communication used to inform and alert the media on an event that is newsworthy, usually brief and covering only the who, what, when, where, and why that is essential to journalists deciding whether to cover a story.</td>
</tr>
<tr>
<td><strong>Newsgroups</strong></td>
<td>Method of discussion about a particular topic or shared interest on the internet in which messages are posted on a particular website, sometime referred to as a bulletin board, and/or emailed to a pre-registered group of subscribers.</td>
</tr>
<tr>
<td><strong>Opponent</strong></td>
<td>Individual or group that is against and likely to take action to stop or block a policy change.</td>
</tr>
<tr>
<td><strong>Outputs</strong></td>
<td>Measurable outcome related directly to an action or intervention, usually after a period of time has passed.</td>
</tr>
<tr>
<td><strong>Policy</strong></td>
<td>Law, rule, regulation or a set of guidelines, procedures, or norms, usually set by a high-level authority or regulatory body, intended to set the standard practice and actions to be taken (or avoided) related to a particular issue or problem.</td>
</tr>
<tr>
<td><strong>Policymaker</strong></td>
<td>Person or regulatory body with the authority and ability to create or change community, organisational or governmental policies or programmes.</td>
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<tr>
<td><strong>Press</strong></td>
<td>See also media; usually refers only to representatives of print media, such as newspapers and magazines.</td>
</tr>
<tr>
<td><strong>Press (News) Conference</strong></td>
<td>Event organised to invite members of the press to both communicate the messages intended for them to capture and to allow them to ask questions, with the goal to gain media coverage for an issue, position or activity.</td>
</tr>
<tr>
<td><strong>Press (News) Release</strong></td>
<td>Communication used to inform and invite members of the news media to cover events or activities which may be viewed as newsworthy. For more in-depth information about the events and related issue, interviews may need to be arranged.</td>
</tr>
<tr>
<td><strong>Primary Target</strong></td>
<td>In advocacy work, the person or persons that are the decision maker(s) with the power to directly influence or make the changes necessary to reach the aim.</td>
</tr>
<tr>
<td><strong>Secondary Target</strong></td>
<td>Individuals and groups that can influence decisions of the primary target.</td>
</tr>
<tr>
<td><strong>SMART</strong></td>
<td>Concept to ensure that work objectives are well-defined, specifically targeted, measurable and easy to evaluate when completed; specific, measurable, achievable, realistic, and time-bound.</td>
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<tr>
<td><strong>Talking Points</strong></td>
<td>Short statements that summarise clear and concise facts and concepts related to the advocacy action or activity such as a face-to-face meeting or media interview.</td>
</tr>
<tr>
<td><strong>Tree analysis (Problem tree analysis)</strong></td>
<td>Systematic method for visually exploring problems and their causes by using a diagram of a tree (roots, trunk, branches and leaves) in order to reveal solutions to the problems and the potential effects of the solutions.</td>
</tr>
<tr>
<td><strong>Universal Declaration of Human Rights</strong></td>
<td>The agreement adopted by all member states of the United Nations in 1948 that proclaim all humans are born free and equal in dignity and rights “without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.”</td>
</tr>
</tbody>
</table>
Other publications by APCASO

APCASO. Asia Pacific Civil Society & 2008 UNGASS ON HIV & AIDS. APCASO. Kuala Lumpur. 2008


This comprehensive toolkit on advocacy is designed to build capacity of NGOs and CBOs who have garnered valuable information and data that could better inform and influence policymakers but who often lack the specific skills, understanding or experience to do so effectively.

Objectives of the toolkit are two-fold:
1. A tool to facilitate a process for NGOs and CBOs to identify their policy and/or advocacy aims.
2. A tool to provide training on developing action plans on advocacy to enhance the role of NGOs and CBOs in the national response to HIV/AIDS.

The Toolkit is divided into four books. They are as follows:
1. Understanding Advocacy
2. Integrating Advocacy Into Your Organisation
3. Building Networks for Advocacy
4. Advocacy Action Tools

Asia Pacific Council of AIDS Service Organizations (APCASO), is a key regional network of non-government and community-based organisations which provide HIV/AIDS services within the Asia and the Pacific region. Its main strategies are to increase the capacity of NGOs and CBOs to respond to HIV/AIDS, and to develop a coordinated regional response through capacity building, advocacy and networking.

For more information please go to www.apcaso.org