

# SESSION TWO: ADVOCACY ISSUES, OBJECTIVES, AND POWER DYNAMICS

## LEARNER OBJECTIVES

By the end of the session, participants will be able to:

1. Select several issues as the focus of an advocacy campaign
2. Set an advocacy objective for each issue
3. Use a power map as a tool for exploring power dynamics around an advocacy issue

## TIME

3 hours, 15 minutes

## SESSION OVERVIEW

- A. Key Issues in Reproductive Health (45 minutes)
- B. Setting an Advocacy Objective (1 hour)
- C. Power Map (1 hour, 30 minutes)

## MATERIALS

- Flipchart and paper, markers, tape
- 3-4 pairs of scissors, colored paper or magazines for power map
- Definition of reproductive health on overhead transparency or flipchart
- Blank power map on transparency or flipchart
- Camera for photographing the workshop

## HANDOUTS

- 2A—Definition of Reproductive Health  
2B—Checklist for Selecting an Advocacy Objective  
2C—Power Map

## PREPARATION

Prior to the session, transfer the power map instructions to the flipchart (see Activity C, Step 3).

## A. Key Issues in Reproductive Health (45 minutes)

### NOTE TO THE TRAINER:

If this advocacy training component is being incorporated into a larger reproductive health workshop, it is likely that Activity A will already have been completed. If you have already discussed and identified priority RH issues, then you can simply return to that list and skip the exercise that follows.

### STEP 1

Review the learner objectives for the session and explain that participants will identify priority issues in reproductive health. They will then practice setting clear, relevant advocacy objectives according to the RH issues selected. Finally, they will apply a tool called “power mapping” in order to analyze power dynamics around their advocacy issue.

### STEP 2

Present the definition of reproductive health (Handout 2A) on a flipchart or overhead transparency. Read the definition aloud or ask a participant to do so. Note that this definition emerged from the 1994 International Conference on Population and Development (ICPD) held in Cairo, Egypt. A total of 180 governments reached consensus on this definition of reproductive health.

Confirm with participants that this definition is applicable within their environment. You may wish to ask if there are any surprises about the definition.

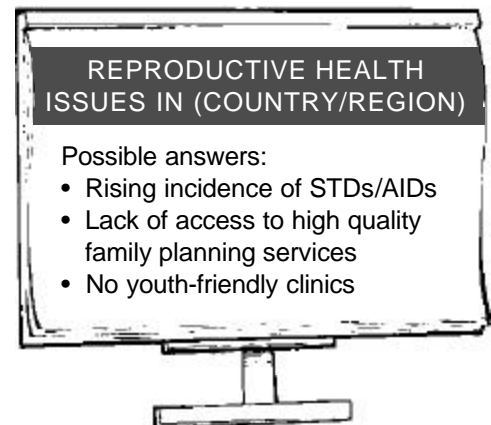
### STEP 3

Next, lead participants in a brainstorming exercise to identify the RH issues in their country or region. Ask participants to reflect on the definition of RH and to think about the issues they face in their daily work.

What are the concerns and problems of the clients and communities they serve?

Record all responses on the flipchart.

### STEP 4



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By the end of the brainstorm, you will have an exhaustive list of RH issues, challenges, and problems. The next step will be to help participants prioritize those issues as they begin to identify an advocacy direction.

As the participants consider the RH issues, they should try to define a **policy solution** for each issue. Take the case of domestic violence, for example. In many societies, domestic violence is a widespread problem with multiple causes. One strategy to reduce the incidence of domestic violence may be for NGOs to launch a public awareness (or IEC) campaign. At the same time, the incidence may be lowered by persuading the Ministry of Justice to enforce existing domestic violence laws. Or perhaps it is necessary for the Chief of Police to initiate and fund a domestic violence training program for police officers. The second two examples are advocacy strategies since they involve a policy response. If there is any confusion about advocacy versus other approaches, refer to the chart on Advocacy and Related Concepts that you prepared in Session One.

#### STEP 5

In order to prioritize the RH issues, ask each participant to tick (✓) three issues on the flipchart that are most urgent and relevant to his/her work. It may be necessary to eliminate any redundancy in the list before the participants begin.

Give the group several minutes to approach the board and tick off their issues.

#### STEP 6

At the end of the voting process, some RH issues should emerge as being especially important for the group. Tally up the responses and note the total next to each issue. Identify the three issues that received the most interest. If there is a tie for third place, the group can either negotiate to choose one above the other or work on a total of four advocacy issues for the remainder of the workshop. The workshop sessions are timed based on only three issues. Adding a fourth issue will require extra time for most sessions.

Note that the process is not intended to determine scientifically which are the most important RH issues in the region. The purpose is to determine which issues are most critical to the work and lives of the participants. Advocates are most successful when they feel a deep concern or passion for their advocacy issue.

#### STEP 7

Before moving forward, the participants will need to organize themselves into three working groups according to the RH issues identified. They should select an area that interests them and, preferably, in which they have expertise. An easy way to facilitate this process is to ask each participant to write their name on a slip of paper and rank the three issues as their first, second, and third choice. For example:

<p>Your Name</p> <ol style="list-style-type: none"><li>1. Lack of youth-friendly services</li><li>2. Scarcity of condoms</li><li>3. Lack of insurance coverage for family planning services</li></ol>
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Collect the slips of paper and, if possible, schedule a tea break so that you have time to

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arrange the groups. In addition to trying to give everyone their first or second choice, it is important to seek a balance in terms of gender, regions, and organizations represented in each group.

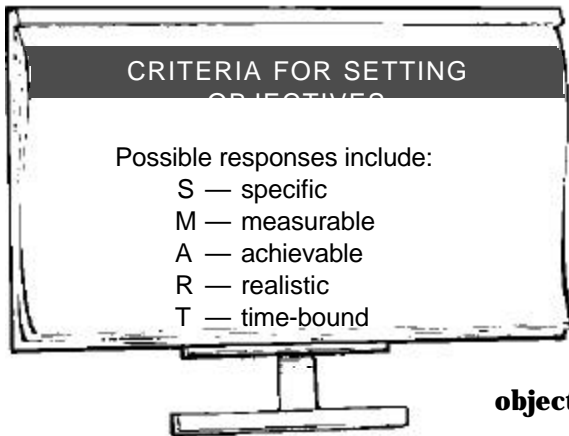
STEP 8

Once you have the issue teams organized, list them on a flipchart and let the participants know they will be working in these groups until the end of Session Two.

**B. Setting an Advocacy Objective**  
(1 hour)

STEP 1

Many participants will have wide experience in establishing programmatic objectives. This experience will be very helpful as they work on setting advocacy objectives. Begin by pointing out the importance of a sound objective to the planning process—whether one is planning a reproductive health program or an advocacy campaign. Depending upon its quality, the objective can bring either clarity or confusion to the rest of the planning process.

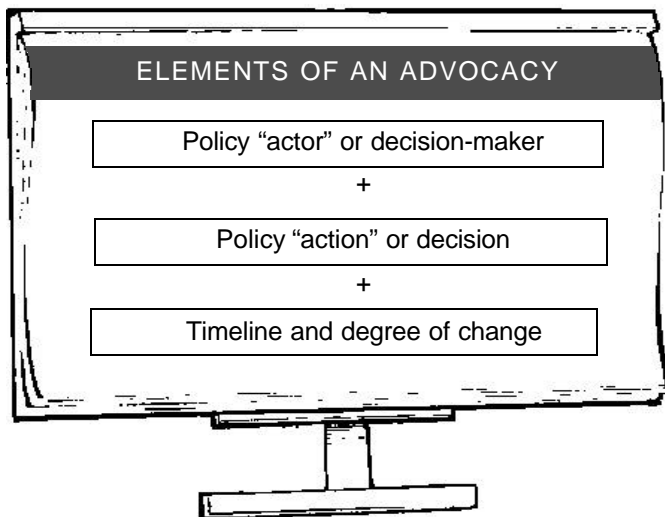


Ask participants to list the criteria they use when developing programmatic objectives. Note their responses on a flipchart. Many groups mention the SMART objectives (see left).

Participants may have other criteria to add to the list.

STEP 2

Ask participants how they would modify the list to include criteria for setting **advocacy** objectives. Refer back to the Session One activity where participants sorted the advocacy cards. An advocacy **goal** is a long-term (5-10 year) vision for change. An advocacy **objective** is a specific, short-term, action-oriented target.



Participants may add criteria such as the following to the brainstorm list:

Is the objective likely to generate public support?  
Will other NGOs rally around the objective?

STEP 3

A good advocacy objective contains several other elements. Present the following on a flipchart (see left):

As the participants prepare to write

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advocacy objectives, they should address these three elements:<sup>1</sup>

1. Identify the policy **actor** or decision-maker who has the power to convert the advocacy objective into a reality (i.e., Minister of Health, Chair of a Parliamentary Subcommittee, etc.).
2. Identify the specific policy **action** or response required to fulfill the objective (i.e., adopt a certain policy or allocate funds to support an initiative).
3. Stipulate the time-frame and degree of change desired. Advocacy objectives usually focus on a 1-2 year period. Can the policy be formulated and adopted in a 1-2 year period? Also, some advocacy objectives—but not all—indicate a quantitative measure of change. For example:
  - *Redirect 25% of the regional family planning budget to target adolescents by the end of the next fiscal year; or*
  - *Within six months initiate and fund a community-based distribution program to serve 40% of women and men of reproductive age in Region X.*

Participants should be as specific as possible as they articulate advocacy objectives.

#### STEP 4

Ask participants to work in their teams to develop two distinct advocacy objectives that outline a policy response to their issue. Allow 15 minutes for the groups to draft two objectives.

#### STEP 5

Next, review and distribute Handout 2B—Checklist for Selecting an Advocacy Objective. The groups should take their first objective and analyze it according to the nine criteria provided. They should then repeat the process with their second objective. After comparing the two objectives, the groups should prepare a brief explanation of the objective they elect to pursue and why.

Allow 20 minutes for the issue teams to analyze their objectives using the checklist.

#### STEP 6

Invite each group to present the results of its analysis. As you are observing, be sure that the policy **actor** and policy **action** are clearly identified in each objective.

### C. Power Map (1 hour, 30 minutes)

#### STEP 1

Preparation: collect the scissors, tape, colored paper or magazines and place them on a centrally located table.

#### STEP 2

In the next activity, participants will build on their work with RH issues and advocacy objectives. They will create power maps to identify power relationships, sources of support, and opposition. The result of this exercise will be a dynamic, visual road map that will guide the teams in the development of their advocacy strategies.

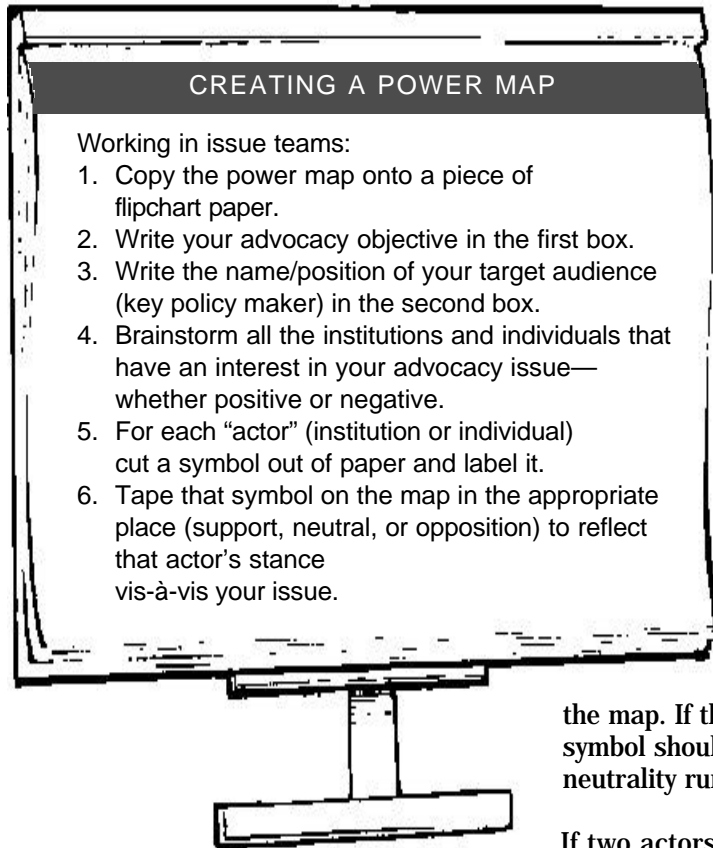
#### STEP 3

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<sup>1</sup> These elements taken from the SARA/AED Advocacy Training Guide.

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Present the blank Power Map (Handout 2C) on a flipchart or an overhead transparency along with the following task:



#### STEP 4

As you review the task, several steps will require more elaboration.

Step # 4—participants should think of traditional as well as non-traditional “actors” in the policy process, including community leaders, celebrities, business leaders, etc.

Step # 5—the groups can be creative in selecting a symbol or magazine image to depict the different actors. If the actor has broad power or influence over the issue, they should create a large symbol. If the actor is interested in the issue but has little influence over the target audience or general public, they should use a small symbol.

Step # 6—if the actor is highly supportive of the issue/objective, its symbol should be placed to the far left of

the map. If the actor represents strong opposition, its symbol should be placed on the right side. The line of neutrality runs up the center of the map.

If two actors are closely linked (i.e., a school principal and the teachers’ union) the symbols can overlap or

touch each other to reflect the interconnection.

#### STEP 5

Take an example and go through several steps in the mapping process:

For example,

**Objective:** Within the next year, persuade the Chief of Police to institute a domestic violence training program for all current and in-coming officers.

**Target audience:** Chief of Police

Mention several allies such as women’s NGOs or lawyers’ associations, and show where they would be placed on the map. Mention several possible opponents (i.e., the middle managers on the police force who lose staff resources while officers are in extended training) and place them on the map.

#### STEP 6

Allow the issue teams 45 minutes to complete their power maps.

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H NOTE TO THE TRAINER:

~~This is a good time to have your~~ camera on hand. The power maps are usually quite interesting visually. Following the presentations, take a quick photo of each issue team with their power maps—it's a good photo opportunity.

#### STEP 7

When they have finished working, ask each team to present its power map to the group.

Following each presentation, pose several questions to the whole group to maximize learning from the exercise.

- Are there any additional allies that belong on the map? Any additional opponents?
- Does the map capture the interconnections between different “actors?”
- Where on this map does most of the power and influence reside?
- Based on these power dynamics, how would you focus your advocacy effort? Would you build on the support, neutralize the opposition, or try to convince the “undecideds?”

#### STEP 8

As a learning point for this exercise, it is important to emphasize that many successful advocacy campaigns opt to build their support base and recruit the “undecideds” over to their viewpoint. Sometimes, direct engagement with the opposition turns into a heated conflict. Unless the advocacy group desires this level of conflict—to raise mass media attention, for example—it may be advisable to focus on supporters and neutrals. In all cases, however, it is essential to forecast and anticipate your opponent’s argument or message. Effective advocates are **pro-active** in framing an argument, rather than reactive to the opposition’s stance.

Point out that the completed power maps can serve as advocacy road maps on an on-going basis. For example, if a neutral actor joins the support base, its symbol can be moved to represent the new position.

This is the close of activities for Day One. Use a simple method to conduct a brief evaluation of the first day. For example:

- Nominate two participants to provide a synopsis of key Day One learning points as an opener the following morning.
- Place a flipchart at the exit door and ask each participant to write feedback on the board as they leave.

## HANDOUT 2A

### DEFINITION OF REPRODUCTIVE HEALTH

“Reproductive Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity, in all matters related to the reproductive system and to its functions and processes. People are able to have a satisfying and safe sex life and they have the capability to reproduce and the freedom to decide if, when and how often to do so. Men and women have the right to be informed and have access to safe, effective, affordable and acceptable methods of their choice for the regulation of fertility, as well as access to health care for safe pregnancy and childbirth.”

—ICPD Programme of Action as documented in Action for  
the 21st Century/Reproductive Health and Rights for All  
Family Care International (FCI), 1994

## HANDOUT 2B CHECKLIST FOR SELECTING AN ADVOCACY

This checklist is taken from the SARA/AED Advocacy Training Guide and adapted from Midwest Academy's Organizing for Social Change. It is designed to help advocacy groups develop and choose sound objectives for policy change.

CRITERIA	OBJECTIVE 1	OBJECTIVE 2
Do qualitative or quantitative data exist to show that the objective will improve the situation?		
Is the objective achievable? Even with opposition?		
Will the objective gain the support of many people? Do people care about the objective deeply enough to take action?		
Will you be able to raise money or other resources to support your work on the objective?		
Can you clearly identify the target decision-makers? What are their names or positions?		
Is the objective easy to understand?		
Does the advocacy objective have a clear time frame that is realistic?		
Do you have the necessary alliances with key individuals or organizations to reach your advocacy objective? How will the objective help build alliances with other NGOs, leaders, or stakeholders?		
Will working on the advocacy objective provide people with opportunities to learn about and become involved with the decision-making process?		



# HANDOUT 2C POWER MAP

Advocacy objective \_\_\_\_\_

Target audience \_\_\_\_\_

