

Introduction



Advocacy to Control Tuberculosis Internationally (ACTION) was designed to demonstrate that targeted advocacy in donor and high tuberculosis (TB) burden countries can help increase financial resources and overcome key policy constraints for the expansion of effective TB treatment.

ACTION was developed and implemented by a consortium of TB and advocacy organizations including RESULTS Educational Fund (REF) in the US, RESULTS Canada, RESULTS Japan, RESULTS UK, Global Health Advocates, ACTION India, Kenya AIDS NGOs Consortium (KANCO), Coalition for Healthy Indonesia (KuS), the Stop TB Partnership (STP) and the World Health Organization (WHO)'s Stop TB Department (STB).

One critical part of the project's impact is serving as a platform for learning how to better influence political priorities and agendas on global health and development. Two and a half years into the project, ACTION team members have compiled some of the more innovative tools, tactics and strategies that this project has so far developed or helped refine. Twelve of these best practices are presented in this booklet.

The Global Tuberculosis Crisis

Approximately one-third of the world's population is infected with the TB bacterium and nearly nine million people become sick with TB every year. TB is the number one opportunistic infection for people who are HIV-positive and the leading infectious killer of people with AIDS – accounting for up to half of all AIDS deaths in some areas. While an effective, low-cost treatment strategy is available that can cure the disease, 1.6 million people continue to die each year from TB because they do not have access to effective diagnosis and treatment.

It is hoped that these best practices will provide a model for replication globally and usefully inform other advocacy initiatives aiming to increase political will to address TB and other vital global health issues. There is at least a \$3 billion annual shortfall for TB control, with over half of that gap needing to be filled by endemic countries. In order to help mobilize these resources, the Global Plan to Stop TB calls for a continued scale-up of advocacy activities until, by 2010, “civil society TB advocacy organizations or coalitions will be functional in 20 donor countries and 40 endemic countries.” We must continue to expand human resource capacity and replicate and coordinate advocacy efforts across countries to achieve these goals.

As advocates, we believe that advocacy can be one of the “best buys” for public and private donors; modest investments in advocacy initiatives, when well-conceptualized and effectively executed, can leverage much greater levels of public sector resources for global health. Indeed, we would advocate to foundations that they can make an even greater impact on global health by financing advocacy initiatives which shape policy priorities and leverage financial support from governments in both donor and endemic countries.

Types of Advocacy

What types of advocacy are most effective for mobilizing additional resources to control the global TB epidemic? At first glance, various advocacy strategies appear to be similar; most involve the use of the media, high profile individuals, advocacy materials and message development. On closer examination, a significant distinction can be made among strategies by their immediate audience: those which use *indirect* means to engage and inform public policy decision-making by initially attempting to shape social agendas and mobilize larger groups of influence, versus those which use *direct* means to personally engage and educate decision-makers.

The following matrix presents one way – but by no means the only possible way – of disaggregating different types of advocacy. As in the case of the ACTION project, most advocacy efforts manifest themselves in practice as part of a strategic advocacy mix, combining a variety of these types.

Differentiating Various Types of Advocacy by Their Immediate Audiences

Type	Immediate Audience	Tactics	Champions	Examples
Indirect				
Research advocacy	Opinion leaders	Politically relevant research Budget & policy analysis Opinion polls	Jeffrey Sachs	Commission on Macroeconomics of Health Global Plan to Stop TB
Coalition advocacy	Multipliers (i.e. bringing new partners or networks into the coalition)	Politically relevant research Budget & policy analysis Opinion polls		Global Health Council Stop TB Partnership Roll Back Malaria Partnership
Mass advocacy	Sustainers (fundamentally changing social opinions and priorities on an issue)	Internet activism Petitions Mass events Celebrities Electoral processes Cause-related marketing Popular media	Bono Youssou N'Dour Chaka Chaka Rahman	ONE Campaign Make Poverty History
Direct				
Bureaucratic advocacy	Policy enablers	Communiqués Declarations & pledges Targets	Mario Raviglione Jorge Sampaio Stephen Lewis	United Nations General Assembly Special Session on HIV/AIDS World Health Assembly
Protest advocacy	Political obstructers	Marches and demonstrations Boycotts Civil disobedience	Zackie Achmat	ACT-UP TAC
Legal advocacy	Courts	Class action suits & litigation		
Policy advocacy	Decision makers	Parliamentary / Congressional delegations Editorial board meetings Committee hearings Direct correspondence (e.g. phone calls, letters, etc.) Individual meetings	Winstone Zulu Lucy Chesire Bono Members of Parliament / Congress	ACTION Bread for the World Friends of the Global Fight

The ACTION project has largely relied on *direct* advocacy, both through **policy advocacy** (e.g. individual meetings, briefings, personal letters, etc. appealing to policymakers and their staff) and **bureaucratic advocacy** (e.g. strategically utilizing public sector officials from WHO, the Stop TB Partnership and the Global Fund to educate key policymakers). *Indirect* advocacy has also been utilized by the project, primarily in the form of **research advocacy**, through the evidence and financial projections provided by the *Global Plan to Stop TB: 2006-2015*, data-gathering for annual baseline donor spending on TB, calculations of donor “fair shares” for TB spending and the preparation of reports on World Bank and the US President's Emergency Plan for AIDS Relief (PEPFAR) spending on TB.

In most of the ACTION donor countries, **coalition advocacy** for TB to date has built upon small existing coalitions or tapped into other pre-existing networks. By contrast, partners in all three ACTION endemic countries have needed to be proactive in building on existing or creating new coalitions engaged specifically and strategically in TB and Global Fund advocacy. This has represented one of the most important lessons learned by the ACTION project: where little advocacy capacity or relevant coalitions on one's issue exist, significant time, resources and energy must be allocated toward building a committed and strategically-focused, though not necessarily large, constituency.



Unlike AIDS or tobacco, for example, TB has yet to significantly benefit from direct **protest advocacy** or **legal advocacy**, or more indirect forms of **mass advocacy**. With a few exceptions, an appetite for protest advocacy has yet to materialize even among emerging TB patient communities. Finally, a popular celebrity of Bono or Richard Gere's stature has yet to embrace TB as their cause and encourage mass advocacy, but not for lack of attempts by a number of TB advocates to enlist celebrity champions over the past decade.¹

One of the most valuable advocacy combinations for the ACTION project has been capitalizing on synergies between bureaucratic advocacy and policymaker advocacy. This "inside/outside" approach maximizes the use of conventional institutional channels to increase resources and heighten awareness. However, it recognizes that "inside" strategies alone are often insufficient in creating political will. Pressure from other parties is required to hold governments accountable for achieving results, as well as to "speak the truth" when other parts of the government are not contributing to or even hindering efforts. For an "inside/outside" approach to succeed, it is essential that activists have an appreciation of the institutional constraints of the bureaucratic partners with whom they are working. Conversely, it is necessary for bureaucratic partners to be proactive in providing their advocacy partners with useful support and timely information.

This matrix raises the question of whether other strategic advocacy mixes might be more effective for fighting TB in various countries. Arguably, policymaker advocacy might be even more effective if the "good cop" bureaucratic advocacy is coupled with "bad cop" protest advocacy. In the same way, the emergence of mass advocacy could greatly enhance direct policymaker advocacy efforts.

As the world's political and social forces are in continuous flux, the means for influencing them must constantly be reinvented. Those fighting for better health, equity and justice in our world must keep pace by investigating new generations of advocacy tactics and strategies. As the ACTION project moves forward - and as different advocacy types and tactics are applied to different audiences and countries - it intends to continue documenting the lessons it learns, as well as new and innovative best practices for advocacy. The following are some of what we believe to be the most interesting, effective and innovative tools and strategies that we have refined or developed to date.

¹ Including Tina Turner, Tom Jones, Whoopie Goldberg, Val Kilmer, Nicole Kidman, Rachel Weisz and Leonardo DiCaprio.