

2nd Global Summit on Circulatory Health

EFFECTIVE OUTREACH WITH A POWERFUL VOICE

Political Advocacy: Reframing Common Messaging

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Introduction





Mike Daube, Curtin University

- Advocacy should make people feel uncomfortable
- Advocacy involves 'behind the scenes' roles in research, programmes, government allies – we should encourage all to contribute
- Opposition can be commercial, philosophical, or passive (even among our colleagues)
- Translation of knowledge does not mean moving from paper to paper, it means ACTION!

Key lessons shared:

Use evidence

Seek consensus through coalitions

Be professional

Simple clear messaging you don't have to explain



Beatriz Champagne, IAHF

- Positive advocacy lessons learned from the Americas
 - Mexican SSBs, Uruguayan tobacco, Brazil food guidelines etc.
- Sent a regional delegation to Human Rights Convention to discuss tobacco industry activities as a controvention of human rights
- There is a need to speak courageously and in coalition

Key lessons shared:

- Frame work courageously, in modern way (i.e. stop using 'Number 2 killer')
- For major impact, we need systemic policy change based on topics that resonate with people, e.g. human rights



Simon Gillespie, BHF

- Advocacy needs to be based on rock-solid evidence
- We need to stop assuming knowledge in the people we advocate to, and stop over-medicalising and complicating our messages
- Focusing on shared 'battering ram' issues is good, but we also need practical shorter-term solutions that can be put into action
- Collaborate with the media, including social media

Key lessons shared:

Focus

Clarity

Collaboration

Sustainability



Susanne Logstrup, EHN

- Need to talk about PREVALENCE as well as morbidity/mortality to show governments how COSTLY these diseases are
- Arguments to governments should be based on benefits to industry and the economy, as well as helping to sustain our health systems
- Imporatnt to be vigilant against disguised industry involvement (e.g. think tanks on smokers' rights) and acknowledge the scale of industry's investment in lobbying

Key lessons shared:

- INVEST in advocacy, especially trained personnel
- Take a rights-based approach, combined with an economic argument, in order to convince decision-makers



Laksmiati Hanafia, Indonesia Heart Foundation

- Indonesia 4th most populous country, so a BIG market for any industry
- Double burden of NCDs and CDs 500,000 deaths from CVD each year
- Tobacco control coalition est. 1998, regulations and laws now strengthening (e.g. smoke-free areas, pictorial warnings, sponsorship restrictions)
- Regional tobacco tax is now earmarking some funds back towards health

Key lessons shared:

- Aim to de-normalise unhealthy behaviour, e.g. smoking
- Educate community on tactics of harmful industries
- We need to start somewhere suggest clear, common messaging



Panellists' Closing Remarks

- We need to present the best evidence and balance it against innovation
- Organizations need to modernise, using media and communications
- We need courage, and to prepare to be attacked for our work so establish your legal framework and get legal minds involved
- Working together does not disclude us from working on own different things as well
- Working in coalition means being prepared to give some things up for the greater good
- Role of WHF to make sure existing coalitions are working (or develop new ones)
- We need to invest more in advocacy at all levels (national, regional, global)



3 SUGGESTIONS FOR ACTION

- 1) We should work together and formalise ourselves as a coalition
 - With a common identity, common themes, and accessible name
 - Drawing from existing examples in global health (e.g. Women Deliver)
 - Practical first step rename the Summit?
- 2) We should change our use of langauge and communications
 - Getting internal coalition consensus before 'going public' on policy options and controversial research issues
- 3) Identify a streamlined policy package (2-3 issues) that unite us
 - Global HEARTS? WHF Roadmaps? A combination?

