



Public Health Advocacy

Toolkit

2007

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Public Health Advocacy Toolkit

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PUBLIC HEALTH ADVOCACY TOOLKIT

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INTRODUCTION

Introduction

Advocacy is a powerful tool in public health, central to protecting and promoting health and well-being. This toolkit aims to help all those working to improve health to think through, plan and undertake advocacy work.

The toolkit provides a model for the advocacy process and can be used to identify training needs, point to resources for developing skills and competencies and provide a framework for action.

It is available both as a printed and web based resource. This printed version provides a basic guide to advocacy while the website (<http://advocacy.phaii.org/>), in addition to the toolkit, has cross-referenced resources to provide further information on each section of the model.

There is scope for the toolkit to continue to grow and develop, particularly if others in the public health community take ownership of it and contribute feedback, resources and suggestions.

What is 'advocacy' in the context of public health?

Advocacy is increasingly being recognised as a key element of the public health role in promoting health and well-being. In the context of the toolkit, public health includes all and any work which aims to protect and improve health and involves people from all sectors and disciplines.

Advocacy can be defined as:

'the pursuit of influencing outcomes – including public policy and resource allocation decisions within political, economic, and social systems and institutions – that directly affect people's lives'.¹

The importance of advocacy in the health promotion and public health arena was highlighted in a statement from the Fifth Global Conference on Health Promotion:

*'Advocacy is an important tool and includes lobbying, political organisation and activism, overcoming bureaucratic inertia, identifying a champion for the cause, enabling community leaders and mediating to manage conflict.'*²

¹ The Advocacy Institute (www.advocacy.org)

² Ministerial Statement for the WHO Fifth Global Conference on Health Promotion, Mexico City, 2000

As with other work to improve and protect health, advocacy requires careful planning to ensure effectiveness. An effective advocate has been described as someone with the ability to:

'utilise available evidence and knowledge about an issue to push for improved public health over the long-term'.³

Advocacy can be carried out by the people affected by an issue or problem, by other people representing them, or by both groups together. Advocacy is often more powerful if those affected by the problem or issue are involved in or lead the process.

When acting as an advocate by representing others, it is important to ensure that their opinions and interests are presented fairly. This means having an understanding of the issue from a range of perspectives – for example, from the evidence base found in the published literature as well as how the issue is perceived by those most directly involved. In some instances it may be necessary to have permission from those affected by the issue to advocate on their behalf. Having permission or the 'right' to advocate for other people is known as 'legitimacy'.

It is also important to ensure that advocacy work is supported within relevant organisational systems, by managers, and by external funders but it may be the case that such support will in itself require 'advocacy'.

³ Ashbridge, M (2004). Public place restrictions on smoking in Canada: assessing the role of the state, media, science and public health advocacy. *Social Science & Medicine*, 58, 13-24

Principles

The toolkit builds on the idea that work on health must address the root causes of illness and disease, including the social, environmental, biological and psychological factors that impact on health and well-being together with the provision of effective services.

The key principles central to public health advocacy are:

Human Rights - recognising health as a basic human right as the basis for all public health advocacy.

- **Equity** - advocating for equality of access, participation and outcomes in health and health service utilisation and for the reduction of inequalities in health.
- **Democracy** - enabling people, communities and organisations to participate in decision- making which impacts on health.
- **Inclusion** - working in partnership with people, communities and organisations to ensure inclusion across sectors, communities, individuals and representative organisations.

Background

The Advocacy Toolkit was initially developed by participants on the Institute of Public Health in Ireland's (IPHI) 'Leadership for Building a Healthy Society Programme'. Further development of the Toolkit has been taken forward by the Public Health Alliance for the island of Ireland (PHA) with funding and support from the Health Service Executive (HSE), the Department of Health, Social Services and Public Safety (DHSSPS) the IPHI and the Ireland and Northern Ireland Public Health Observatory (INIsPHO).

PART ONE

PUBLIC HEALTH ADVOCACY

MODEL

Public Health Advocacy Model

The model of the advocacy process draws on input from a wide range of people working in all sectors to protect and promote health and on the literature on advocacy and public health in general.

The model aims to show a process for effective advocacy with the following elements :

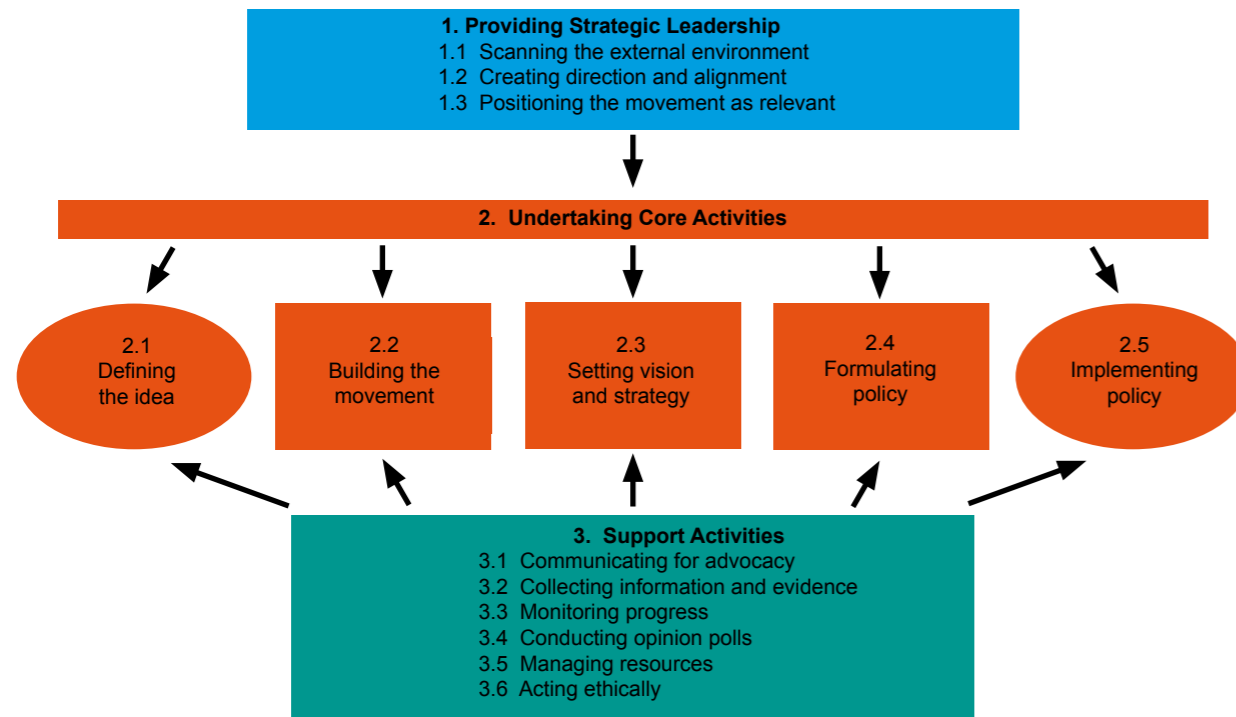
- **Components** of the advocacy process
- **Steps** underlying each component
- **Associated Tasks** needed to complete each step

All elements of the model are interrelated and interdependent. In the model these elements are shown in sequence but in practice there will be overlap in how and when the elements happen.

Effort and timescales

It is important to remember that some advocacy activities result in immediate success and change and are completed in one cycle of the model. However more often advocacy activity will need much longer time periods and require sustained effort, along with a determination to repeat as often as is necessary many of the steps and tasks identified in the model.

Model of Public Health Advocacy



Components of the advocacy process

1. Providing Strategic Leadership

Strategic leadership ensures that the advocacy process stays focused and moving forward. Through strategic leadership, links and connections are made to support the process. Opportunities for, and potential threats to, the success of the advocacy activity are identified and dealt with appropriately.

2. Undertaking Core Activities

Core activity in the process starts with defining the idea/identifying the problem or issue. It proceeds to building support, developing a vision, strategy and tactics for action through to the implementation of change.

3. Support Activities

These activities ensure that the advocacy process stays focused and effective.

1. Provide Strategic Leadership

- 1.1 Scanning the external environment
- 1.2 Creating direction and alignment
- 1.3 Positioning the movement as relevant

- 1.1.1 Defining stakeholders
- 1.1.2 Identifying allies and oppositional groups
- 1.1.3 Identifying opportunities and threats to the initiative: political, economic, social, technological (PEST)

- 1.2.1 Keeping the movement on track
- 1.2.2 Making sure all resources are being used effectively
- 1.2.3 Brokering relationships
- 1.2.4 Resolving conflicts
- 1.2.5 Preventing tangential diversions

- 1.3.1 Ensuring advocacy issue is presented widely as relevant to society
- 1.3.2 Linking the advocacy issue to other areas of concern

2. Undertake Core Activities

- 2.1 Defining the idea
- 2.2 Building the movement
- 2.3 Setting vision and strategy
- 2.4 Formulating policy
- 2.5 Implementing policy

- 2.1.1 Goal setting
- 2.1.2 Defining aims and objectives
- 2.1.3 Testing for strategic significance /robustness for health gain, values

- 2.2.1 Building a coalition of support – creating and sustaining a movement; promoting empowerment of others
- 2.2.2 Developing knowledge, information; sourcing evidence; sourcing a neutral sounding board to check ethics

- 2.3.1 Developing a values-based vision, strategy and short/medium/long term goals
- 2.3.2 Implementing – organising events, creating media coverage, lobbying, preparing briefings, positioning, creating saturation of the argument

- 2.4.1 Assessing opportunities for shaping policy through existing processes
- 2.4.2 Formulating policy
- 2.4.3 Involving stakeholders
- 2.4.4 Identifying resources
- 2.4.5 Agreeing action and timing

- 2.5.1 Developing an action plan
- 2.5.2 Sustaining implementation in the face of opposition and revision
- 2.5.3 Defining new angles
- 2.5.4 Evaluating impact

3. Support Activities

- 3.1 Communicating for advocacy
- 3.2 Collecting information / evidence
- 3.3 Monitoring progress
- 3.4 Conducting opinion polls
- 3.5 Managing resources
- 3.6 Acting ethically

- 3.1.1 Creating awareness and public consciousness of the issues
- 3.1.2 Gathering and collating information and stories

- 3.2 Collecting information and evidence

- 3.3 Monitoring progress

- 3.4 Conducting opinion polls

- 3.5.1 Securing resources

- 3.5.2 Planning resources

- 3.5.3 Deploying resources

- 3.5.4 Ensuring accountability for resources

- 3.6.1 Checking the values and principles of the advocacy initiative



PART TWO

The Model Expanded

A quick reference guide

The Model Expanded - A Guide

The purpose of this section is to provide a quick reference guide to the model. It provides a simplified overview of the key areas, some key questions to ask at each stage and pointers to the tools that can be used to assist in the process.

1. Providing Strategic Leadership

- 1.1 Scanning the external environment
- 1.2 Creating direction and alignment
- 1.3 Positioning the movement as relevant

What does this mean?

Providing Strategic Leadership – Advocacy activity involves a wide range of people and is influenced by many factors. It is therefore important to take a holistic view by looking at the bigger picture, discovering who could be interested in supporting or joining your advocacy activity and what could help strengthen or limit the process (1.1). Key to all other aspects of the process is clarity about the purpose. (1.2). The leader(s) need to identify what is going on in society/the community/organisation in order to identify from whom, where and when to seek support. (1.3)

Quick reference checklist

- Decide on key team members to lead the process.
- Identify supporters and team members to lobby and support action.
- Assess possible opposition and develop a plan to address this.
- Manage the direction of the advocacy process by considering what is currently of interest to the community or others to be influenced and how this can be used to promote and publicise your activity.

Useful Tools

PEST

Stakeholder

Force Field Analysis

2. Undertaking Core Activities

- 2.1 Defining the idea
- 2.2 Building the movement
- 2.3 Setting vision and strategy
- 2.4 Formulating policy
- 2.5 Implementing policy

What does this mean?

Undertaking Core Activities – In this part of the process the vision comes to life. Building the movement means making contacts and building alliances. Roles should be delegated to members of the team depending on their skills and abilities to work towards the overall vision. Planning and taking action towards your aims should link to community and other networks and be informed by current social trends and political movements.

CHECKLIST

- Ensure the idea is clear to all involved.
- Align the skills and capabilities of team members to the plan.
- Develop a step by step guide as to how the vision can be achieved.
- Ensure that all team members have the relevant support and materials necessary to achieve their tasks.
- Identify social/community partners and networks that can offer help and support.

Useful Tools

SWOT Analysis

Objectives Setting

3. Support Activities

- 3.1 Communicating for advocacy
- 3.2 Collecting information and evidence
- 3.3 Monitoring progress
- 3.4 Conducting opinion polls
- 3.5 Managing resources
- 3.6 Acting ethically

What does this mean?

Support Activities - It is essential that team members communicate with one another effectively.

Communication to the public at large and your target audience is of equal importance. (3.1). Your message must reach the public by the most appropriate method, so it is essential to know your audience.

Collecting information and evidence to support and further your case may take many forms including surveys, public meetings, etc (3.2).

On-going evaluation and monitoring of action ensures that the process remains focused (3.3/3.4). Making sure that all resources- people and things- are used to best effect is also key to success (3.5)

All stages of the process must be based on ethical principles (see introduction) (3.6)

CHECKLIST

- Manage communication - internal and external.
- Ensure all members are aware of their role and how it relates to the success of the plan.
- Gather evidence from reliable sources to validate the case
- Monitor progress and share what is happening with the team.
- Ensure all resources are used efficiently.

Useful Tools

- Communicating effectively
- Creating public awareness
- Writing a successful press release



Part Three
Competencies

Part 3 Competencies

Listed below are the key knowledge and skills associated with steps and tasks in the advocacy model.

- | | |
|---|---|
| Acting ethically | Maintaining lobbying |
| Analysing policy | Managing conflict |
| Assessing health impact | Managing information and knowledge |
| Assessing impact on equality | Managing projects |
| Assessing research | Managing publicity |
| Applying research and analysis | Managing resources |
| Assessing impact on environment | Managing time |
| Assessing opportunities | Marketing |
| Assessing risk | Monitoring |
| Brainstorming | Negotiating effectively |
| Building/managing budgets | Networking |
| Coalition building | Organising |
| Coordinating | Organising events |
| Collecting and analysing data | Preparing and delivering briefings |
| Communicating effectively | Preparing written advocacy materials |
| Communicating an inspiring vision | Priority setting |
| Conducting meetings | Problem solving |
| Coordinating action- | Providing feedback and giving |
| Developing information resources | constructive criticism |
| Developing a value clarification system | Providing leadership |
| Developing a vision | Resource management |
| Environment scanning (PEST) | Stakeholder analysis |
| Facilitative leadership | Story telling |
| Facilitating community development and involvement | Strategic planning |
| Formulating policy theory and local and national practice | SWOT analysis |
| Fund raising | Tactical planning |
| Gathering / reviewing the evidence base | Team building |
| Goal setting | Understanding group dynamics |
| Group planning /objective setting | Undertaking consultation |
| Implementing a value clarification system | Undertaking evaluation |
| Influencing | Undertaking research and analysis |
| Information sharing | Undertaking social research |
| Information technology | Using the Media effectively |
| Issue framing | Using the media effectively, including letter writing, public speaking and debating |
| Listening effectively | Utilising information technology |
| Lobbying | Utilising spreadsheets |
| | Working in partnership for collaboration |
| | Writing reports |

Competency Self-Assessment Tool

This self-assessment tool will help you identify the current extent of your knowledge and skills in relation to the practice of public health advocacy.

The key knowledge and skills needed for effective advocacy for each of the model's steps and tasks are listed in the next section. You can rate your competence in each of these areas of advocacy, using the following scoring system:

- 0 = not developed**
- 1 = somewhat developed**
- 2 = fairly well developed**
- 3 = very well developed**

You can use this information to create a profile of your future training and development needs in relation to public health advocacy.

A directory of resources is available on the Advocacy Toolkit website <http://advocacy.phaii.org/> as a starting point for acquiring information and skills to support your advocacy work.

Process Steps	Competencies Required	Rate your level of competence for each item:				
		0	1	2	3	
1. Providing Leadership						
1.1 Scanning the strategic external environment	Identifying and analysing relevant research and evidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Priority setting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	1.1.1 Defining stakeholders – all those involved in or affected by the issue	Environment scanning (PEST)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1.1.2 Identifying allies and those likely to oppose change	Leadership that facilitates others to be actively involved	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1.1.3 Identifying opportunities and threats politically, economically, socially and technologically	Communicating effectively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Identifying who has a 'stake' in the issue - (stakeholder analysis)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Networking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Building alliances/ coalitions with others interested in the issue	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Actively involving all with an interest in the issue	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		SWOT Analysis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.2 Creating direction and alignment						
1.2.1 Keeping the work on track	Organising	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	1.2.2 Making sure all resources are being used to progress the work	Coordinating action	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Managing projects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1.2.3 Managing relationships	Team building	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Influencing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1.2.4 Resolving conflicts	Negotiating effectively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Managing conflict	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1.2.5 Preventing loss of focus	Tactical planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Problem solving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Conducting meetings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Process Steps	Competencies Required	Rate your level of competence for each item:			
		0	1	2	3
1. Providing strategic leadership					
1.3 Making and presenting issue relevant	Issue framing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Information sharing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.3.1 Ensuring the advocacy issue is presented widely as relevant to society	Using the media effectively, (including letter writing, public speaking and debating)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.3.2 Linking the advocacy issue to other areas of concern	Preparing written advocacy materials, including Dail or Local Assembly questions and briefings, presentations to managers/other groups etc	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Communicating effectively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Writing reports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Working in partnership for collaboration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Process Steps	Competencies Required	Rate your level of competence for each item:			
		0	1	2	3
2. Undertaking Core Activities					
	Assessing health impact	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1 Defining the idea	Assessing risk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1.1 Goal setting	Ensuring ethical principles are upheld	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1.2 Defining aims and objectives	Assessing impact on equality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1.3 Testing for strategic significance/robustness for health gain, values	Assessing impact on environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Gathering and reviewing the evidence base	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.2 Building the movement					
	Working in partnership for collaboration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Communicating an inspiring vision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.2.1 Building a coalition of support - creating and sustaining a movement, empowerment	Providing feedback and giving constructive criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Listening effectively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.2.2 Developing knowledge, information, sourcing evidence, sourcing a neutral sounding board, to check ethics	Communicating effectively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Understanding group dynamics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Networking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Negotiating effectively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Undertaking research and analysis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Lobbying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Brainstorming	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Process Steps	Competencies Required	Rate your level of competence for each item:			
		0	1	2	3
2.3 Setting vision and strategy	Developing a vision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.3.1 Developing a values based vision, strategy and short, medium and long term goals	Strategic planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Goal setting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.3.2 Implementing – organising events, creating media coverage, lobbying, preparing briefings, positioning, creating saturation of the argument	Group planning and objective setting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Organising events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Communication effectively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Using the media effectively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Developing information resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Marketing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Managing publicity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Preparing and delivering briefings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Lobbying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Managing time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.4 Formulating policy	Undertaking consultation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.4.1 Assessing opportunities for shaping policy through existing processes	Resource management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.4.2 Formulating policy	Formulating policy theory and local and national practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.4.3 Involving stakeholders	Providing leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.4.4 Identifying resources for implementing policy	Networking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.4.5 Agreeing action and timing	Analysing policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Assessing opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Monitoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Maintaining lobbying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Coordinating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Organising	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Managing time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Managing resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Undertaking evaluation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Process Steps	Competencies Required	Rate your level of competence for each item:			
		0	1	2	3
3. Support Activities	Communicating effectively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.1 Communicating for advocacy	Networking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.1.1 Creating awareness and consciousness of the issues	Influencing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.1.2 Gathering and collating information, evidence, stories	Story telling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.2 Collecting information and evidence	Utilising information technology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Managing information and knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Collecting and analysing data	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Assessing research	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.3 Monitoring progress	Coordinating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Managing information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Utilising spreadsheets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.4 Conducting opinion polls	Undertaking social research	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.5 Managing resources	Fund raising	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.5.1 Securing resources	Managing resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.5.2 Planning for resource allocation	Building/managing budgets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.5.3 Deploying resources					
3.5.4 Ensuring accountability for resources					
3.6 Ensuring an ethical approach	Developing a value clarification system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.6.1 Checking the values and principles of the advocacy initiative.	Implementing a value clarification system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Advocacy Skills Development Plan

To help you develop your advocacy skills it may be useful to take time to think through the following questions. Use this as your plan of action to identify your next steps. Remember to set realistic timescales and look for support from others active in the field of advocacy. You may want to work on this development plan with work colleagues, managers, or tutor depending on your circumstances.

Competency

What skills do I need?

Who can help me?

Steps to achieve this?

Completion date?



Part Four
Useful Tools

Useful Tools

This section contains useful tools which will help you carry out some of the main tasks identified in the advocacy process.

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Stakeholder Analysis

Stakeholder Analysis is the technique used to identify the key people who have to be won over, influenced or simply informed. You can then use this information to build the support that will help you succeed.

Before you start to think about how you influence or negotiate, it is important to look at who you need to involve, and if there is anyone 'important' you are leaving out. You should also remember that one of the principles identified for public health advocacy is inclusion and therefore the key stakeholders are, in the first place, all those affected by the issue or problem whether they are powerful or without influence.

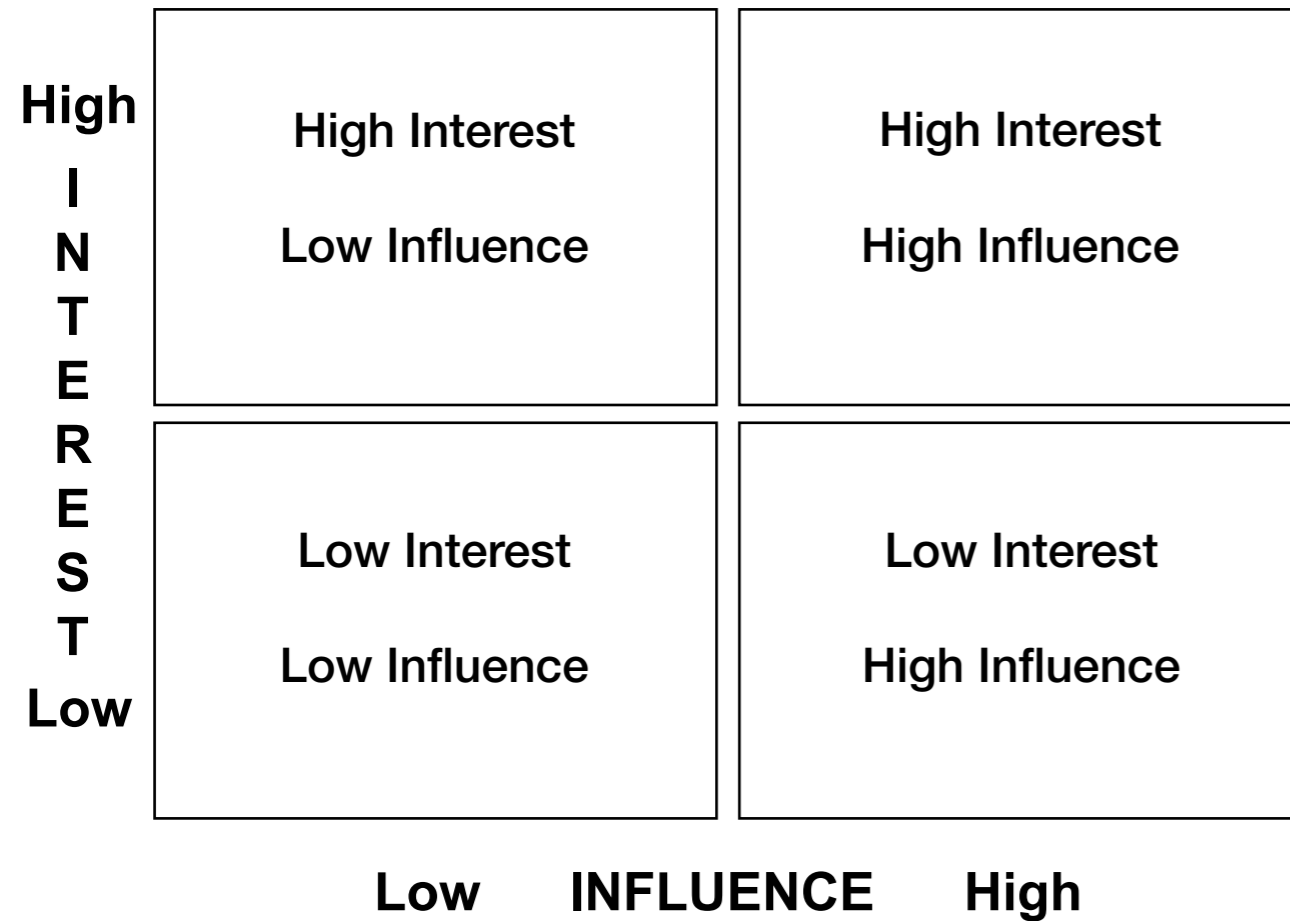
Benefits of using a stakeholder-based approach

- You can use the opinions of the most powerful stakeholders to shape your plans. Not only does this make it more likely that they will support you but, in addition, their input can also improve the quality of your work
- Gaining support from powerful stakeholders can help you to win more resources - this makes it more likely that your projects will be successful
- By communicating with stakeholders early and frequently, you can ensure that they fully understand what you are doing and understand the benefits of your work - this means they can support you actively when necessary
- You should anticipate people's reaction to your ideas and plan actions that will win people's support for your plans.

How it's done

- List all the people and/or organisations that are influenced by and/or have influence/ interest/power in relation to your issue or problem. You will likely identify a mix of organisations and people but it is important to focus on the key person(s) with authority and power to effect change.
- Prioritise the list of people and organisations into the grid on the next page
- Ask yourself some key questions -
 - Why are the people in the low interest/low influence area?
 - What can you do about those you have identified in the low interest/ high influence area?
 - What motivates those you have identified?
 - What information will they want from you?
 - How will they want to receive the information from you?
 - What is their current opinion of your work? Is it based on good information?
 - Who influences their opinions generally, and who influences their opinion of you?
 - If you don't think you will be able to win them round how will you manage their opposition?
 - Who else might be influenced by their opinions? Do these people become stakeholders in their own right?

Stakeholder Analysis



SWOT Analysis

SWOT analysis is a tool used to highlight the areas where improvements could be made by identifying the following:

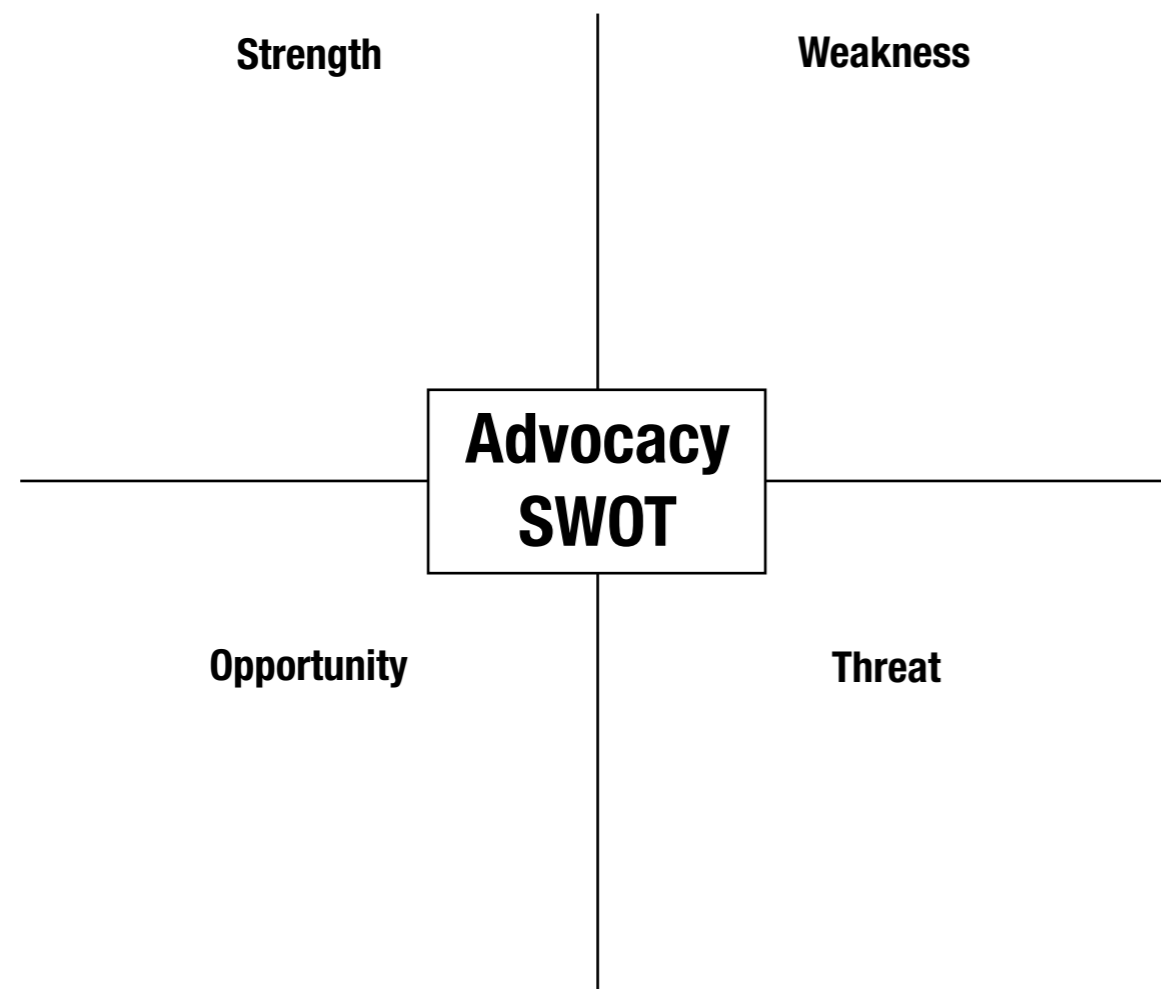
Strengths – what is currently done well? How can you build on strengths to move towards your goal.

Weaknesses - what is not working so well? Are there areas where resources and skills could be developed/utilised more effectively?

Opportunities - are there things happening which could help you achieve your goal? For example events, people, policies, a campaign on a related issue, which you can use to support/endorse your advocacy activity.

Threats - what do you see as potentially disadvantageous e.g. policy changes, new services being provided by others – anything that may limit or be in competition with your goal

Once the SWOT analysis is completed, you can begin to plan how to build on strengths, deal with weaknesses, take advantage of opportunities and lessen the impact of threats. For example, if inadequate use of the media is identified as weakness, your goal will be ‘to improve the use of the media’.



PEST Analysis

Political

Economical

Social

Technological

This is the process of looking at the factors in the external environment that may impact on your advocacy activity. Some of the areas identified may not be within your control, but it is essential that you know what they are as they may strengthen/weaken your case.

Under each heading list what PEST factors may impact/relate to your advocacy activity.

Political e.g.

Legislation
New policies and guideline
Government/political
organisations/power

Economical e.g.

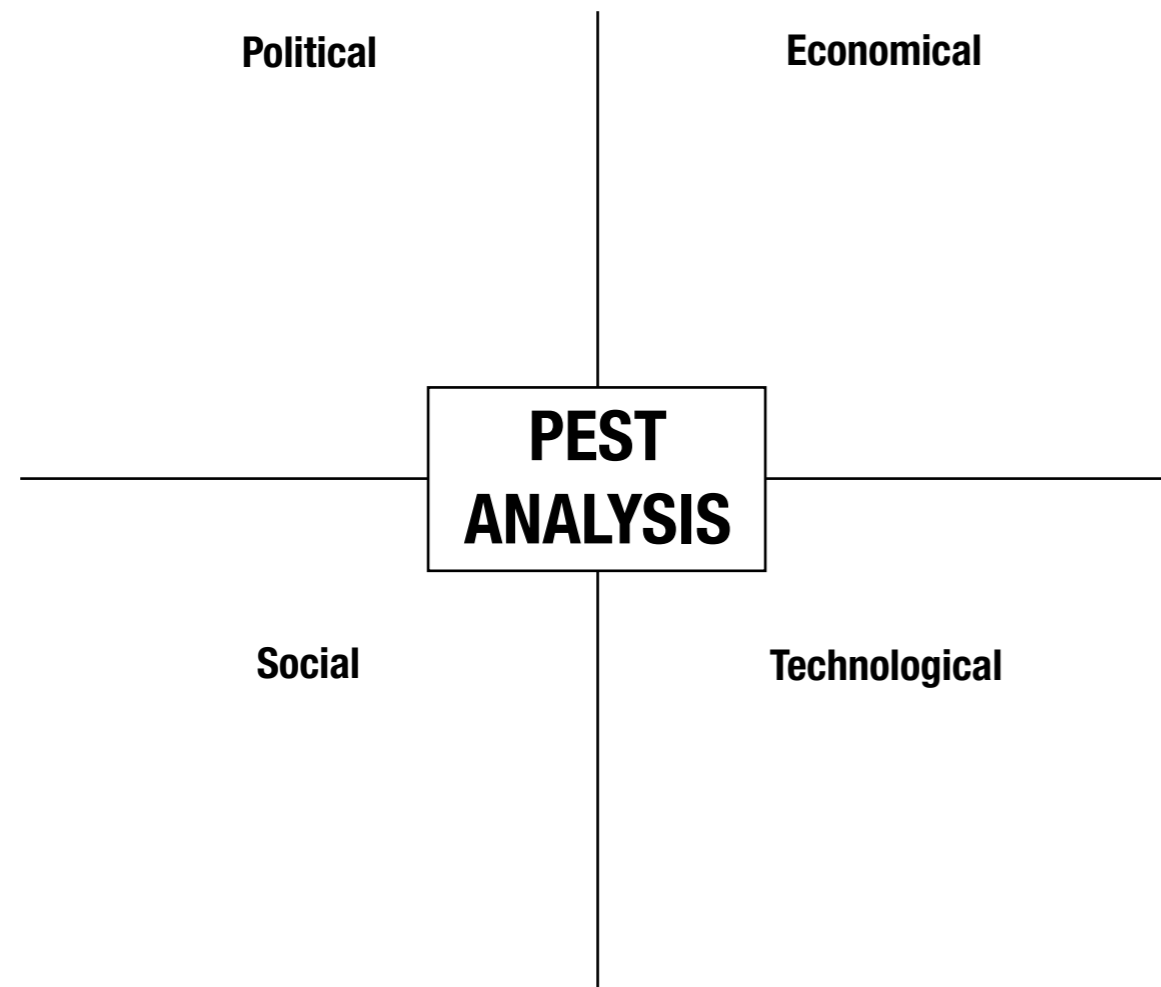
Funding sources
Employment rates
Interest rates
Economic situation locally/
nationally
Inflation rates

Social e.g.

Education levels
Interest levels in population
Fashions/trends/hot topics
Class structure
Gender/sexual orientation
Ethnicity
Changes in social structures

Technological e.g.

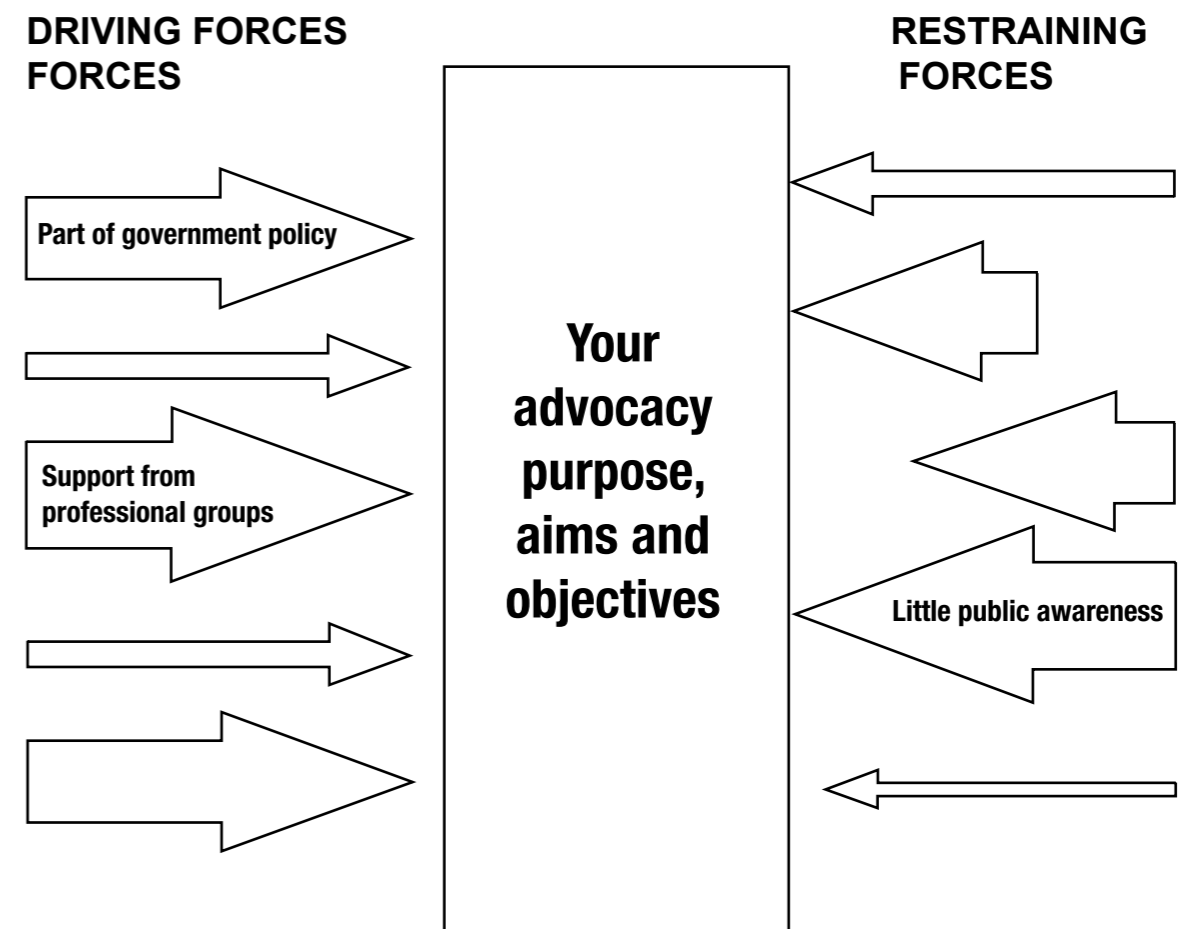
New developments
New ways of working
Impact of technology on
people/jobs/finances



Force field analysis

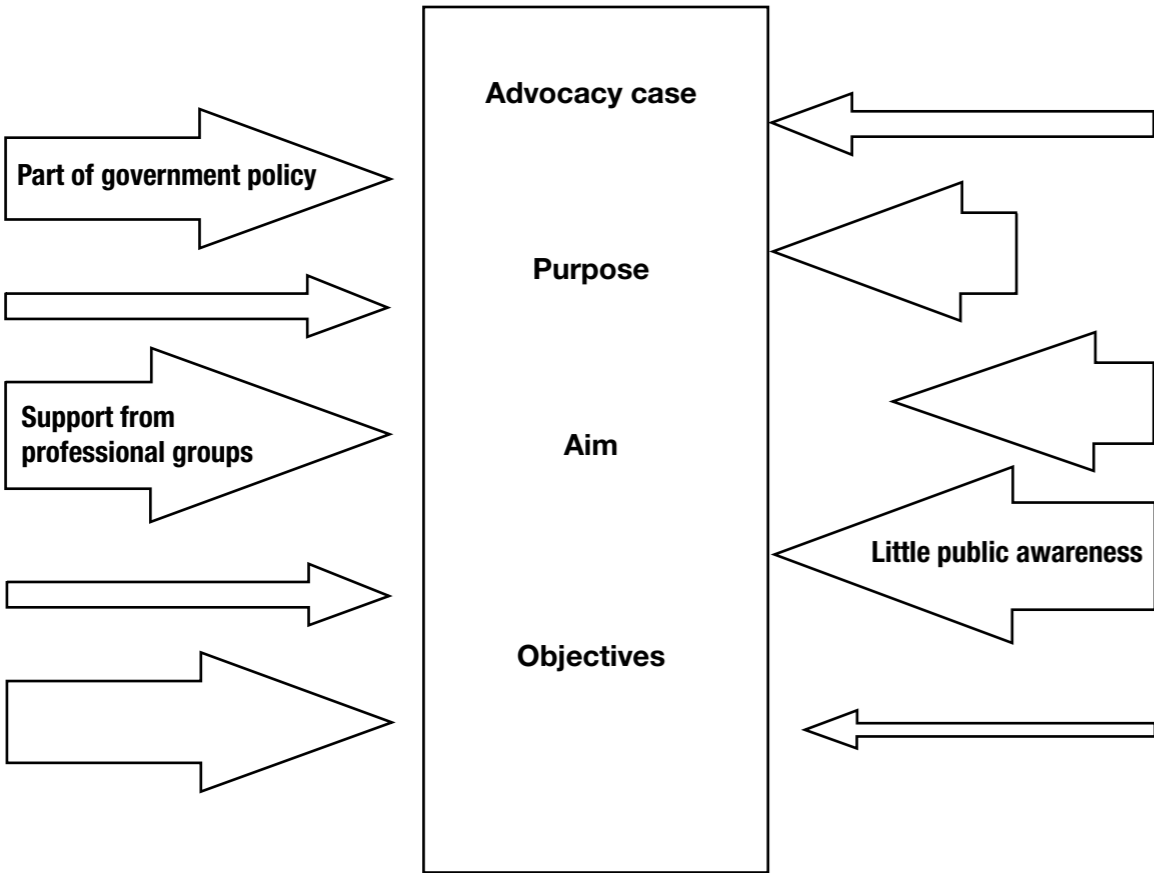
Force field analysis has many uses. In advocacy work it can be used to identify the 'pros and cons' for the process as a whole or any part of it. It helps identify the people, organisations, policies and other factors that can support your aims the '**driving forces**' and who and/or what may cause difficulties – the '**restraining forces**'. With this information you can decide how the driving forces can be used to help strengthen your activity and identify ways of overcoming and influencing any opposition highlighted in the 'restraining forces'.

Example



Complete your own Force Field Analysis –

- ◆ Clearly state your purpose, aim and objectives
- ◆ Identify who and/ or what are the driving forces?
- ◆ Identify who and/or what are the restraining forces?
- ◆ Place the driving/restraining forces you have identified in the larger/smaller arrows depending on how you estimate their importance.
- ◆ When you have completed analysis you can begin to plan to use the driving forces and deal with/negate the restraining forces to support your work.



Setting Objectives

Firstly be clear that you clearly identifying your aims and objectives.

- **Aims** – your overall goal
- **Objectives** – the important landmarks/steps that you need to achieve to reach your aim

When setting objectives remember to keep them **SMART!**

SMART stands for:

- S**PECIFIC
- M**EASURABLE
- A**CHIEABLE
- R**EALISTICS
- T**IMEBOUND

SPECIFIC - Be precise about what you want to achieve.

MEASURABLE - Quantify your objectives, e.g. provide statistics or be specific in qualitative statements which can be measured, e.g. a policy document on equality will be developed.

ACHIEVABLE - Are you attempting too much?

REALISTIC - Do you have the resources to attain the objective (support, people, funding, time, materials, knowledge)?

TIMEBOUND - What is the deadline for your overall aim and each step or objective. How do all the parts of your plan fit within your timescale e.g.within a year, by a specific date, etc.?

Communicating effectively

To be a successful advocate you will need to increase awareness, build support and change attitudes. Communication is the key. An important element of effective communication is to keep your target audience in mind and tailor the message and your presentation methods to their needs and abilities.

Decide on your audience

Be clear about who your audience is.

- Be clear what message you are trying to put across and target the audience(s) that will have the most influence on the success of your advocacy activity.

Understand your target audience

Different groups of people are influenced in different ways.

- Take time to understand what appeals and 'grabs' the interest of your target audience.
- Learn what works, share that knowledge and build on this.

Consider the method of communication

What communication method appeals to your audience?

- How would they like to find out about you? Email, newsletter, meeting, radio, letter, etc.
- Tell them what they need to hear in the format that will most appeal

Consider the messenger

Consider who is best to carry the message.

- Who will hold credibility with the audience
- Often people take an issue more seriously if they feel they can relate to the person delivering the information –so who is best to for your intended audience?

Consider the message

When trying to capture your audience think about what they want to hear.

- Offer solutions to the problem posed so your case does not seem unattainable
- Keep information and statistics as relatable to your audience as possible – this gets peoples' attention.

Raising public awareness

There are many ways to raise public awareness including:

Hold public meetings – Make the public aware of your case, build support and engage with the interested to bring them on board.

Start a Ribbon/wristband campaign – many groups have created an emblem which publicly symbolises support for a cause. e.g. pink ribbon for breast cancer awareness, wristbands for anti-bullying and anti-poverty campaigns

Websites – Develop websites or include your campaign on relevant websites of key interest groups – widen your audience at every opportunity.

Involve local communities – Find out about local groups and think about who might have an interest in your campaign. Make contact, build relationship and get people involved.

Involve local schools/further education institutes/universities. – Find out who the local, influential, knowledgeable people are in these institutions. Make contact, bring your campaign to their attention

Distribute educational resources – Create and distribute factsheets, posters/ leaflets. These should be well designed and contain relevant information for your audience.

Think about where best to reach your target audiences – is it the post office where people collect pensions, the hairdresser or garage, the pub, local shop or churches?

Press Release – send a press release of any coming events or significant achievements to help raise awareness of your case. Contact local newspapers, radio stations, etc

How to write a successful press release

What is a press release?

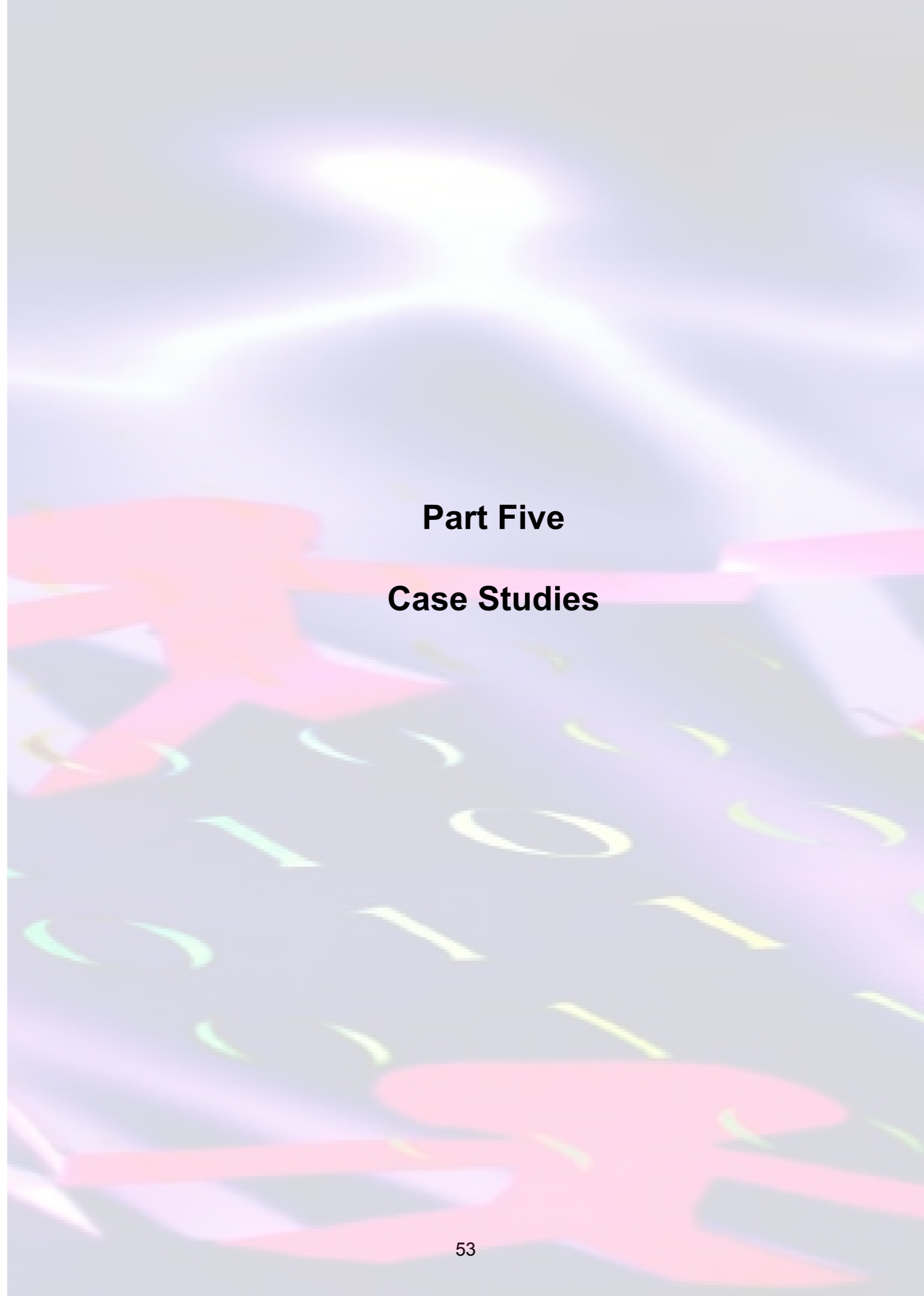
A short, catchy story that captures the key points of your case in a way which will interest the media and build awareness of and support for your case

Dos & Don'ts of a Press Release

- DO write something worth reading – exciting, informative, short, sharp and straight to the point. Remember what sells newspapers!
- DON'T exaggerate the facts of your case – this will only ruin the credibility of your case.
- DON'T try to give all the details of your case – if people want more information they will ask
- DO have a good catchy heading- look at how papers normally layout headlines and attempt to copy the style
- DO give contact details so the media can get back in touch for more information
- DON'T have a messy layout – ensure the layout is clear, concise and easy to read. Try using subheading to guide the reader if needed.
- DO include all your contact details as part of the press release so the readers know how to get in touch.
- DON'T use jargon, complicated or unexplained words – readers give up if they don't understand what you are trying to tell them.
- DO keep the information to one or two pages at the most.
- DON'T only use plain text – where possible use interesting quotes from people the readers would be interested in hearing from/know/associate themselves with.
- DON'T use 'I' or 'we' unless it is in a quote.
- DO think of the audience/readers and write your release to interest them!
- DO send it to the right people in newspapers, journals or radio stations!! You will need to research who best to contact and then keep a contact list for future reference.

Press Release Layout - Example

Advocacy Title/Slogan/Logo	
Name (Contact Details for advocacy) Address Telephone number Email Address Website	Press Release – (possibly add date when should be released)
MAIN TITLE IN BOLD Subtitles in mixed cases	
Main body of text	
For further information please contact XXXXXX on XXXXX.	



Part Five
Case Studies

Case Studies

This section gives examples of how the public health advocacy model relates to experiences in practice. The following two cases studies have been analysed to show how the key aspects of the model fit into real situations. It should be noted that the interactive aspects of the components, tasks and steps are more clearly seen in the full version of these case studies, which, together with other case studies on public health advocacy, are available on the toolkit website.

The case studies offer an in-depth account of public health advocacy in a number of settings and can be used to develop general awareness of advocacy in action or can be analysed (as in these samples) to identify how the model can work in practice. As part on the ongoing development of the toolkit it is planned to add more case studies to the website over time.

CASE STUDY ON

Advocating for a Smoking Ban in Northern Ireland - the role of ASH

Northern Ireland

Based on a case study by Gerard McElwee and Anne Devlin of the Ulster Cancer Foundation

Background

The Ulster Cancer Foundation established the 'ASH' committee to advocate for smoke-free environments in Northern Ireland in 1973 (amongst other smoke related issues).

On Monday 30th April 2007 The Smoking (Northern Ireland) Order 2006 came into effect which means that it is against the law to smoke in most enclosed/ substantially enclosed workplaces and public areas. This legislation is the culmination of many years of campaigning for smokefree places undertaken by ASH Northern Ireland together with local partners and international coalitions.

Providing Strategic Leadership

In scanning the external environment to identify opportunities to strengthen the case ASH focused on:

- Clarifying the main aim of the case and highlighted 10 key areas
- Linking their advocacy campaign to the Smokefree Legislation in the Republic of Ireland, in particular its successful implementation
- Identifying allies at local, national and international levels
- Identifying and using opportunities to meet with/negotiate with and attempt to influence key political people/parties
- Keeping the subject on the agenda of related organisations/media etc
- Raising public awareness of the campaign and the key issues

Undertaking Core Activities - the main actions taken to support the case included:

- Awareness raising seminars about the need for smokefree public places
- Continually lobbying government and other relevant people/organisations to keep the topic on everyone's agenda
- Introducing Smokefree Premises Awards to encourage support from local business and raise general awareness
- Publicising the campaign in the media
- Clarifying the preferred option in relation to a Department of Health 20 year strategy on smoking
- Building a coalition of 45 key leaders from a range of organisations around Northern Ireland to strengthen the case and maintain momentum and support.
- Building support within the media

Support Activities - that helped build the momentum and achieve success were:

- Attending party political conferences to hold fringe meetings on this issue
- Sending letters to Members of Parliament, Members of the European Parliament, and Members of the Local Assembly seeking their support
- Producing information leaflets and stickers to educate the public on the dangers of secondhand tobacco smoke
- Well targeted and timely press releases
- Websites providing information on and arguments for smoke free environments
- Gathering and presenting information and statistics in response to the consultation process
- Methods used to increase public awareness and make it easy for the public to reply to the consultation on proposed legislation included
 - Freepost postcards
 - Posters
 - Letters
 - Smokefree websites
 - Press releases
 - Newspaper cut-out voting forms
 - Public meetings

CASE STUDY TWO - The Voice of Older People in Donegal

Based on a case study by Ann Marie Crosse

Background

The Voice of Older People Donegal project began as a pilot programme funded by the Health Promotion Department of the North Western Health Board and the Department of Health and Children. The aim of the pilot was to develop the capacity of older people to articulate their needs and concerns and to develop methods of moving individual issues into a collective agenda and a collective voice. Over three thousand older people and agencies participated in this process. As the process was left open-ended and dynamic, information flowed, new issues emerged and more isolated older people joined in, adding new dimensions. Overall the project engendered the belief that issues of importance to people were heard and acted upon.

Providing Strategic Leadership

Scanning external environment

- A mapping process was undertaken at local, county, regional, national and European level to ascertain the level of activity and the various organisations working with or with a remit to work with older people
- Building on the initial mapping process an older person was employed to develop a second level mapping which consisted of collating data on community and voluntary groups.

Positioning movement

- Once the networks were established it was clear that it was important to cement a collective identity. To do this a county representative group was formed comprising two people from each of the five network areas. This has enabled a two-way flow of information.

Undertaking Core Activities

Defining the idea

- Early in the development of the project the importance of advocacy was recognised and an Advocacy Action Plan was developed involving various levels of advocacy. The plan covers four areas: health, ageism, transport and information.

Strategic significance

- Decision makers were invited to join the County Forum which now comprises ten older people and eight service sector representatives.
- The development of a collective strategic agenda rather than ad hoc individualised needs-led plans was found to be more effective in influencing decision makers.

Building the Movement

- Five networks were set up across Donegal to discuss issues that were important to them, formulated plans and take action to address these issues.
- Partnership working, collaboration and pooling of resources helped to join fragmented service provision together. Partnerships were made with the community and voluntary sector as well as Community Development and Family Resource centres, partnerships and the State sector.
- Sessions were held on citizen involvement and linked to the Irish Senior Citizen's Parliament, Age Action, Age and Opportunity, among other voluntary organisations.

Support Activities

Communicating for advocacy

- Information sessions were held in rural, isolated areas and areas where people gathered (e.g. GPs surgeries and marts) – targeting vulnerable and isolated older people- particularly older men.
- Information outputs, which not only serve to provide information but also reflect a collective identity and purpose included:
 - Monthly newsletter;*
 - Literary magazine called The Silver Pen;*
 - Project leaflet, The Voices of Older People at Local Level,*

Collecting information and stories

- Community arts programmes were used as a platform to vocalise issues and disseminate information- e.g. a play on ageism called *Age Rage* and another on a returned emigrant's story
- A series of '*Celebration Days*' and *Active Citizenship* days were held. The aim of these days was to explore issues in which older people were interested and to develop from these a positive sense of the ageing process.

Maintaining progress

- The County Forum meets once a month to examine key issues emerging from the local level.
- Using the baseline and ongoing information and evidence two posts have been established to maintain progress within the project.

Acting ethically

- The principles of community development were core to the process as demonstrated by active participation in identifying issues, implementing responses and advocating for change.
- All new aspects of the project have been designed based on locally identified need.



PART FIVE

Glossary

Glossary

Advocacy: a combination of individual and social actions designed to gain political commitment, policy support, social acceptance and systems support for a particular health goal or programme. Such action may be taken by and/or on behalf of individuals and groups to create living conditions which are conducive to health and the achievement of healthy lifestyles. Health professionals have a major responsibility to act as advocates for health at all levels in society. (WHO)

Capacity: all of the resources available to an organisation, service or community including people, money, equipment, expertise, skills and information. (PHEL)

Collaboration: a process through which parties who see different aspects of a problem can explore constructively their differences and search for (and implement) solutions that go beyond their own limited vision of what is possible. Collaboration is a mechanism for leveraging resources; dealing with scarcities; eliminating duplication; capitalising on individual strengths; building internal capacities; and increasing participation and ownership strengthened by the potential for synergy and greater impact. (University of Victoria).

Community: group of people living or working in a geographically defined area (geographical community) or who have a characteristic, cause, need or experience in common (community of interest). (PHEL)

Community development: the process of enabling or empowering people to actively work for social change which will improve the quality of their lives, the community in which they live and /or the society of which they are a part. It is a collective process that recognises the interdependence of people. It helps people to identify and articulate their needs and influence the decision-making structures that affect them, their communities and wider society. Combat Poverty Agency 2000

Community involvement: entails both consultation and participation, with local people participating in the development of policies to improve the health of their community as well as having a say in the prioritising, planning and delivery of services. It involves the voluntary sector and the wider public being included in higher strategic planning levels as well as lower levels of decision-making and input. (PHEL)

Competencies: the knowledge and skills needed to undertake public health advocacy.

Consultation: canvassing the views of stakeholders and clients in the process of developing sound public policy or action. Public consultation is part of, but not necessarily the same as, public involvement.

Empowerment: a process through which individuals and/or groups are able to express their needs, present their concerns, devise strategies for involvement in decision-making, and achieve political, social and cultural action to meet those needs. (WHO)

Environment: the circumstances or conditions that surround us. The complex of social and cultural conditions affecting the nature of an individual or community.

Equality: the degree to which a resource is equally distributed (PHEL)

Equity: refers to how fairly resources are distributed among people. Initiatives to address health equity try to distribute resources, opportunities, access, etc, fairly (according to need) but not necessarily equally. (PHEL)

Evaluation: assessing whether an intervention achieves its aims. Process evaluation is an ongoing examination of the processes, activities, methods of planning and implementation of an intervention and includes staff performance, quality, client satisfaction and cost effectiveness. Impact evaluation measures the immediate or midterm effects of an intervention. Outcome evaluation is an assessment of the long-term effects of an intervention or some aspect of an intervention. (PHEL)

Evidence base: the best current research information available based on a systematic analysis of the effectiveness of a treatment, service or any other intervention in order to produce the best outcome, result or effect. (PHEL)

Facilitative leadership: a facilitative decision making style which indicates a joint effort between leaders and subordinates, with both providing input to make a shared decision. It is important that all have access to the information required to make the decision and should also have some degree of expertise and/or motivation to ensure the best decision is made.

www. <http://search.bnet.com/search/Strategic+Leadership.html>

Health: a state of complete physical, social and mental well-being, and not merely the absence of disease or infirmity. Health is a resource for everyday life, not the object of living. It is a positive concept emphasising social and personal resources as well as physical capabilities. A comprehensive understanding of health implies that all systems and structures which govern social and economic conditions and the physical environment should take account of the implications of their activities in relation to their impact on individual and collective health and well-being. (WHO)

Health impact assessment (HIA): a process which determines how a proposal will affect health. HIA can be used as a practical way to influence decision makers. The process involves: developing screening criteria to select policies or projects for assessment; profiling the areas and communities affected; applying a pre-defined model of health to predict potential impacts; evaluating the options and making recommendations for action. (PHEL)

Lobby: To try to influence those with power to take a certain action

Model: a way of showing different parts of complex ideas and how they relate to each other. In the toolkit the model shows the links between the processes, steps and tasks required to undertake advocacy for public health.

Monitor: collecting and reviewing relevant information to find out if the targets/ outputs specified have been met.

Network: a grouping of individuals, organisations and agencies organised on a non hierarchical basis around common issues or concerns, which are pursued proactively and systematically, based on commitment and trust (WHO)

Participation: having the opportunity to fully contribute to, and share in the decision making process.

Partnership: a partnership (for health) is a voluntary agreement between two or more partners to work cooperatively towards a set of shared health outcomes. (WHO)

Public Health: the science and art of preventing disease, prolonging life, promoting and protecting and improving health and well-being through the organised efforts of society. These efforts will address policy issues at the level of the population's health and will tackle the roots of health and disease, as well as considering the provision of effective health care services. Public health works in partnerships that cut across disciplinary, professional and organisational boundaries and exploits this diversity in collaboration, to bring evidence and research based policies to all areas which impact on the health and well-being of populations. (based on Acheson, 1988)

Stakeholders: people who have an interest in an organisation, project or activities, e.g. service users, partners, and employees, shareholders, the Government, the voluntary sector, the local community the NHS, local government, schools and businesses. (PHEL)

Story telling: there are different ways to use stories in health work. One method is simply to listen to a story and reflect upon it personally, which is the way most people read stories or enjoy the oral craft of story-tellers. Another way is to engage with others, including the story-teller, in a dialogue about the story. At the heart of this method is the reflective practitioner—the story-teller and those participating in the dialogue. At every stage in the method, participants are encouraged to reflect on how what they hear and learn from others has meaning for them personally. (based on Labonte, 1996)

Strategic leadership: involves the ability to anticipate, envision, maintain flexibility, and empower others to create strategic change and multi-functional work that involves working through others.

<http://search.bnet.com/search/Strategic+Leadership.html>

Team: a group that works in collaboration to achieve an objective or goal. The necessary qualities of a successful team are clear understanding by every member of the roles and functions of all members, harmony, mutual support, and ideally, capacity for individual team members to assume other roles and responsibilities when unusual circumstances make this necessary.

Values: the beliefs, traditions, social customs held dear and honoured by individuals and society collectively. They include beliefs about the sanctity of life, the role of families in society, protection from harm of children and other defenceless people. Social values are more flexible and may change; these include beliefs about the status and roles of women in society, attitudes towards use of alcohol, tobacco and other substances.

References - glossary

Acheson D, (1988), Public Health in England, Report of the Committee of Inquiry into the Future Development of the Public Health Function, Department of Health
Combat Poverty Agency www.cpa.ie

Labonte R, et al (1996) Handbook on Using Stories in Health Promotion ,Health Canada

PHEL Public Health Electronic Library

<http://www.phel.gov.uk/glossary/glossary.asp>

Strategic leadership <http://search.bnet.com/search/Strategic+Leadership.html>

University of Victoria voluntary sector knowledge network <http://vskn.ca>

WHO Glossary of Health Promotion

http://www.who.int/hpr/NPH/docs/hp_gossary_en.pdf