Achieving 25 by 25:

Best practices in policy and advocacy

Jeremiah Mwangi, World Heart Federation
17 March 2016 – Bengaluru, India
Global Health policy environment

- UN Sustainable Development Goals
- UN Political Declaration on NCDs
- Addis Abbaba Action Agenda
- Universal Health Coverage (UHC)
- Health Systems Strengthening
- Primary Health Care Agenda
- Maternal, Child & Adolescent Health

Where does tobacco advocacy fit?
Global Development Agenda: The SDGs
UN Political Declaration on NCDs

Heads of State and Government commit to five actions:
- Reduce risk factors
- Strengthen national policies and health systems
- International cooperation
- Research and development
- Monitoring and evaluation

2011 political declaration tasks governments to implement:
- National targets and indicators
- Functioning system for generating reliable cause specific mortality
- Operational multisectoral national strategy/action plan
- National guidelines/protocols for the management of NCDs through a primary care approach
UN Political Declaration on NCDs

Member State has implemented the following four demand-reduction measures of the WHO FCTC at the highest level of achievement:

A. Reduce affordability of tobacco products by increasing tobacco excise taxes

B. Create by law completely smoke-free environments in all indoor workplaces, public places and public transport

C. Warn people of the dangers of tobacco and tobacco smoke through effective health warnings and mass media campaigns

D. Ban all forms of tobacco advertising, promotion and sponsorship
What is advocacy?

No single definition... but a working definition could be:

“Advocacy is a process of influencing...

...selected people or institutions...

...in order to achieve policy, practice, social, behavioural or political changes...

...that will benefit particular groups.”
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Common weaknesses

The Seven deadly Sins of Advocacy and Campaigning

1. Unclear aims and objectives
2. Activity planning happening before (or without) developing an influencing strategy
3. Action plans that run to an internal timetable
4. Lack of innovation
5. Messages that don’t get noticed and move people
6. Poor monitoring & evaluation
7. Failing to focus
Core elements of an advocacy plan

• Goals
• Resources and assets
• Support/opposition
• Targets/Agents
• Strategies
• Action steps

“The difference between successful and unsuccessful advocacy campaigns is seldom the worthiness of the cause and more often the strength of the plan.”
Goals: Know what you want to change

Identify problem or issue to be addressed
Analyse problem or issue
Agree your policy position
Agree advocacy aims and objectives

Exercise 1: Think about your groups objective
Do you have a clearly specified outcome?
Is it:
$Specific, Measureable, Achievable, Relevant, Time-bound$
Defining policy success:

The most successful policies are ones which achieve or exceed their initial goals in such a way that they become:

- **embedded**;
- able to **survive a change of government**;
- represent a **starting point for subsequent policy development** or
- **remove the issue** from the immediate policy agenda.

*Institute for Government, The «S» factor, 2012*
Formula for policy success:

• An originating proponent from outside of the government of the day (interest group or opposition)
• Ensure personal ownership within the government (secretary of state, prime minister)
• Ensure the commitment of the owner is strong and long term
• Set well defined goals and objectives
• Even if the goals and objectives are not new, provide a new response (method, process)
• Do not get hung up on the evidence base. It is almost always contested
• Learn to navigate multiple government departments, complex delivery chains and high powered stakeholders
• Party political controversy is not always a barrier
Group Activity

Understand the change process

For a policy change objective that you identified earlier, answer the five key questions:

1. Where is the decision made?
2. Who makes the decision?
3. How is the decision made?
4. When is the decision made?
5. What influences the decision?
Influencing strategies

- Direct Persuasion
- Collaboration
- Building Support
- Coercive Pressure
- Using Judicial Mechanisms

5 strategic choices for advocacy:

Friendly – insider approach
Confrontational – outsider approach
1. Collaboration:

Working with the advocacy target to explore the problem and **jointly identify** the most appropriate solution.

**But:**

*Does the target recognize the problem?*
*Do they trust and value your input?*
*Are you willing to set aside your ideas about the solution to explore and cooperatively develop a solution?*
*Do you trust that they will implement the solution without interference from others*

*Mainly for technical issues that are not highly contested or polarised*
2. Direct persuasion

Persuading those responsible for the policy and practice by presenting them with clear and appropriate arguments.

Requires:
Access to decision makers or those supporting or advising them
Relationships of mutual trust and respect
Suitable for issues that are not highly contested or politicised

Risk:
May have to compromise or moderate your position to build and maintain relationships
Getting co-opted on to the target’s agenda
Legitimising the advocacy target and or the consultation process
Vulnerable to changes in government in personnel
3. Building support

Building and mobilizing support for your objective with one or more of:

• Selected group of influential stakeholders
• Targeted segments of the public
• Affected communities

Targeting those who have most influence over the decision-making process

*Required for issues that are more contested, politicized or polarised*
4. Coercive pressure

Increasing the political, social or economic cost of the target not changing its policy or practice.

Examples:
• Strikes, boycotts or disruptive direct action
• Often adopted by groups who have no other sources of power
• Sometimes used to gain publicity

Beware: Confrontational and may destroy relationships with the target and other affected stakeholders.
5. Judicial mechanisms

Prosecuting an individual or organization in a court of law to force them to change their policy or practice.

Only use when:

- There is a law that in support of what you are advocating for, that the target is clearly breaking
- The judicial system is independent
- The judicial system is strong enough to impose its judgement

*Beware: Confrontational and will destroy relationships with the target. Usually a last resort*
Influencing strategies

- Direct Persuasion
- Building Support
- Coercive Pressure
- Collaboration
- Using Judicial Mechanisms

5 strategic choices for advocacy

Friendly – insider approach
Confrontational – outsider approach
2. Direct persuasion

Persuading those responsible for the policy and practice by presenting them with clear and appropriate arguments.

What types of argument can help persuade decision-makers?

- Arguments that demonstrate the **benefits to the people affected** and/or to society in general
- ...that demonstrate how your objective supports the decision maker’s interests and priorities (**personal and professional**)
- ...link the the problem and your objective to generally accepted norms, such as human rights
- Appeals that link to the decision maker’s core values and beliefs
3. Building support

Building and mobilizing support for your objectives, selecting and targeting those who will have more influence over the decision-making process.

Identify:

• Those who agree with you and are already active (coordinate with and or build an alliance)
• Those who agree but are not active (find ways to mobilise them)
• Those who agree with your analysis but do not think they are a priority (persuade that the issue is vitally important and mobilise)
• Some will not agree with your analysis despite sharing your aim (persuade that your analysis offers the best and most realistic solution)
Chains of influence

NGO → Minister

NGO → Media → Minister

NGO → Civil Servants → Junior Minister → Minister

NGO → Supporters → MPs → Parliament → Minister

Working together to make a difference
VOICE OF TOBACCO VICTIMS

February 17, 2016

Prakash C. Gupta
Director, Healis - Sekhsaria Institute for Public Health
Navi Mumbai, India
• VoTV (Voice of Tobacco Victims) is an advocacy campaign by the victims of tobacco (mostly patients of mouth and throat cancers) to advance tobacco control policies.
• The VoTV campaign provides a stage to victims (or immediate care giver) to tell what they want to tell.
• VoTV is thus about empowering the victims of tobacco.
• The patients are accompanied by their doctors and at least one relative.
• The stage for a VoTV function is set up with the presence of policy makers, senior bureaucrats and media by tobacco control professionals associated with the campaign.
• In a VoTV function, patients are chief spokespersons with everything else and everyone around helping them in this task.
• Patients are encouraged to speak whatever they want to say about their personal experience with tobacco, effect of cancer on them, their families etc.
• The messages and scientific facts are tailored towards immediate objective.
• Most persons including policy makers, bureaucrats, social leaders are initially indifferent and resistant, almost impervious to tobacco control messages.
• They consider tobacco as legal, desirable; providing livelihood; generating revenue; use, a matter of free choice; nothing really happens e.g. my grandfather; etc
• VoTV with its humane angle, helps in overcoming myths and makes people receptive to tobacco control messages.
• Once outside the hall, leaders would have ten other issues to occupy their minds and even firm promises may go in cold storage.
• That is where VoTV steps in – it provides scientific data backing victims’ demands, outlines action points and constantly follows up with politicians and bureaucrats until the objectives are met.
In addition to policy makers, VoTV affects all other participants.
- Media – It laps up VoTV stories with much higher priority than statistics or scientific arguments.
- Clinicians – In addition to treating individual patients, it is within their power to do much more for the whole community.
- Law professionals and law enforcers – They can save lives just by doing their job.
VoTV affects participating patients most strongly:
• Quite often, patients become tobacco control activists by themselves.
• Their outlook towards their own life changes from negative to positive.
• They get answer to their question – why me? To help others.
• They feel they have a special purpose in life.
VoTV events have been organized with objectives of:

- Increasing taxes on tobacco products.
- Stronger pictorial warnings
- Smoke-free and tobacco-free policies
- Protecting youth – no sale to and by minors; and no sale near schools
- Better enforcement of tobacco control laws
- Motivating lawyers to argue strongly in tobacco control cases.
A VoTV Campaign Objective

- VoTV contended that tobacco consumption in India can’t be reduced without specifically targeting smokeless tobacco.
- One specific product, gutka, was registering 25% growth yr to yr creating havoc with health, particularly oral health.
- VoTV therefore specifically targeted gutka and smokeless tobacco use from 2011 onwards.
- Many friends didn’t quite agree with this strategy.

What has been the effect of VoTV campaign?
Gutka Ban Case Study

Advocacy

Litigations

Enforcement

Media Activity
Incidence rates of oral cancer in the city of Ahmedabad

Ref: J Ind Med Assoc 1999;85;1885-99
Prakash C. Gupta
India, Ahmedabad (Mouth Cancer), Male

Gupta PC et al. Indian J Cancer. Indian J Cancer 2014;51:67-72
India - Mouth Cancer Capital of the world
Sensitization of MPs/ MLAs/ MLCs
Sensitization of Chief Ministers
Public Interest Litigations

NDTV

Ban gutka or we will, High Court tells Akhilesh Yadav government

Akhilesh: The Allahabad High Court today dissolved the Akhilesh Yadav government to quell a stand on banning gutka (tobacco chewing pace) in Uttar Pradesh within two weeks, and warned to slap a ban if the latter failed to act.

The Statesman

Doctors move HC over state govt’s failure to ban gutka

Andhra Pradesh orders ban on manufacture, sale of gutka

Deccan Chronicle

Delhi bans gutka following High Court orders
Sensitization of the Media
Sensitization of the Media

Voices of the Victims: a wake-up call for smokers

Ziyad Masud
Posted: May 30, 2009 at 04:21 hrs IST

Mumbai “Seventeen years ago, I lost my voice due to constant smoking for 25-30 years,” says Deepak Kumar, a throat cancer survivor, at a talk held at the Tata Memorial Hospital. The talk, Voices of the Victims, invited a number of patients diagnosed with tobacco-related cancer to speak about harmful effects of tobacco products on the eve of World Anti-Tobacco Day.

“It is not an informed choice,” Kumar says, responding to a question on the responsibility of smokers in maintaining health. People often do not realize that products like gutka can be harmful and due to misleading advertisements they consider these products to be harmless mouth fresheners. The problem, according to Dr Rajendra Kerkar, is that once a person becomes addicted to tobacco, breaking the habit is difficult.

Kerkar, a cancer specialist at the Tata Memorial Hospital, said he had seen several cases of patients who wanted to quit smoking, but could not. He suggested the government should support smokers in their efforts to break the habit.

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26 NEWS COVERAGE @ $ 200
How tobacco victims are downing the shutters of the industry that sold them cancer
Effect on gutka and SLT ban in the country*

- In 2011, for the first time, there was a volume decline in total SLT of 2%; in 2012, 26%; and in 2013; 80%; on year to year basis.
- In 2014, the forecast is volume decline of 40%, in 2015 of 35%; in 2016 of 30%; and 2018 of 25% on year to year basis.
- Compared to 2013, by 2018, the volume decline is forecasted to be 84%.
- From the peak in 2010, SLT volume has already fallen by 85% in 2013 and is forecasted to fall by 97.7% by 2018.

(*from SMOKELESS TOBACCO IN INDIA; Euromonitor International; December 2014)
Effect on gutka and SLT ban in the country*

- Study conducted in 7 states of India (1001 current & former gutka users and 458 tobacco product retailers) - 92% support for gutka ban & 99% in agreement that bans have a positive impact in reduction.
- Of the respondents that quit since the bans, a substantial portion in each state (41-88%) reported quitting Gutka.
- Gutka virtually disappeared from display in retail outlets

(*Johns Hopkins University Bloomberg School of Public Health & WHO Study, December 2014)
Sensitization of Legal Profession
Mumbai Consumer Redressal Forum – 3rd December, 2009

Cancer-stricken Customs man files complaint against ITC

A commissioner of customs and central excise, who has alleged that ITC’s failure to warn him of the harmful consequences of smoking led him to contract throat cancer (Cancer-stricken top Customs man sues cigrre biggie, MM, December 2), has filed a complaint seeking Rs 1 crore damages from the company.

Desgrug Kumar, 59, filed a complaint with the State Consumer Dispute Redressal Commission on Wednesday. The first hearing of the case will be on December 7.
Innovations: World No Tobacco Day as Martyr Day
Tobacco Taxes Campaign

300 Doctors wrote to Prime Minister, met Finance Minister / Secretary Media Advocacy

India raises taxes on cigarettes

Public health experts have welcomed the increase in taxes for cigarettes and other tobacco products included in India's latest budget, shown in a tobacco campaign from new media.

The Indian Government is clamping down on tobacco consumption by imposing higher taxes on cigarettes, chewing tobacco products, and all manufactured tobacco. The increase in excise duty in the range of 11–72% for different types of cigarettes is the steepest in a decade. Within this move, government taxes are projected to account for around 70% of the retail price of some cigarette types. The taxes are seen as a result of strong advocacy by new health minister Harsh Vardhan, who is an ex-Union, and former surgeon and anti-tobacco campaigner. He had recommended an across-the-board increase in tax on tobacco products to the finance ministry while the national budget was under preparation.

Nearly 1 million deaths in India each year are attributable to tobacco-related diseases. The death toll is set to rise as the absolute number of male smokers is rising—from 80 million in 1998 to 108 million in 2005, according to data published by the Centre for Global Health in 2013. Young men aged between 15–24 years accounted for the largest proportion of the increase in male smokers during this period.
Our Contribution to Pictorial Warning
COTPA amendment

ORDER

SUBJECT: Constitution of a committee to review COTPA and suggest appropriate amendments

A Committee has been constituted to review the Cigarettes and Other Tobacco Products (Prohibition of Advertisement and Regulation of Trade and Commerce, Production, Supply and Distribution) Act, 2003 (COTPA) and suggest appropriate amendments. The composition of the Committee is as follows:

1.0 Composition:

1. Shri Ramesh Chandra, Adviser, MoHFW - Chairperson
2. Dr. Prakash Gupta, Director, Healis, Navi Mumbai
3. Shri Sanjay Seth, India Director, Campaign for Tobacco Free Kids
4. Dr. Pankaj Chatrurvedi, Tata Memorial Hospital, Mumbai
5. Dr. G. K. Rath, AIIMS, New Delhi
6. Shri Alok Mukhopadhyay, Chief Executive, Voluntary Health Association of India (VHAI)
7. Dr. A. K. Prat, Professor, Fero School of Management, New Delhi
8. Joint Secretary in Charge of Tobacco Control in the Ministry

2.0 Terms of Reference:

2.1. The Committee will review and suggest amendments to the Cigarettes and Other Tobacco Products (Prohibition of Advertisement and Regulation of Trade and Commerce, Production, Supply and Distribution) Act, 2003 (COTPA), and frame such amendments which in the opinion of the Committee is necessary to further improve the implementation and enforcement of the provisions of COTPA.
Dear Principal,

In continuation to our circular No. 102/2013 dated 11.10.2013, the Central Board of Secondary Education, New Delhi, is pleased to inform you that the launch of Classmate Spell Bee Campaign is scheduled to be held on 29th May 2014.

The campaign aims to promote the use of the English language and to encourage students to participate in a friendly competition. It is a great opportunity for students to showcase their knowledge and skills in spelling and vocabulary.

We urge you to participate in this campaign and to encourage your students to take part. The campaign will be held across all schools affiliated with the Central Board of Secondary Education.

Thank you for your continued support and cooperation.

Best regards,

[Signature]

[Name]

[Position]
RR Patil's death: Doctors for ban on chewing tobacco in public

TIMESOFINDIA

Mumbai

RR Patil's death: Doctors for ban on chewing tobacco in public

MUMBAI: Leading cancer specialists want to extract one larger positive out of former deputy chief minister R.R. Patil's death to oral cancers: a quick introduction of the proposed ban on chewing tobacco in public places.

"The government must wake up fast to control the menace of tobacco, both smoking and smokeless kinds," said cancer surgeon from Tata Memorial Hospital, Dr. Pankaj Chaturvedi. He said chief minister Devendra Fadnavis, who had a fortnight back promised to personally study the feasibility of banning chewing tobacco at public places, should act soon. "There is an urgent need to scare people from taking up the tobacco habit in any form. It is the only way to prevent oral cancer," said Dr. Mandar Deshpande of Kokilaben Ambani Hospital in Andheri.

Doctors have a reason for linking legislation and oral cancer. Oral cancer is the most common cause of cancer-related death among Indian men, and accounts for 30% to 40% of all cancers in the country. "About 90% of oral cancer cases occur due to smoking tobacco or because of smokeless tobacco. If a person takes alcohol along with these products, they have a synergistic effect in causing cancer," added Dr. Deshpande.
Ban on Flavoured Areca Nut (Pan Masala)

Pan masala, supari manufactures challenge FDA ban, move HC

Sunday, 23 February 2014 - 8.00am IST | Agency: dna

Maitri Parecha

Manufacturers of flavoured arecanut and pan masala from across the state have challenged the ban imposed on production and sale of their products by the Food and Drugs Administration.
SC quashes ban on hookah imposed through local laws

The Supreme Court on Monday quashed a ban on smoking hookah and providing tobacco to persons who are not minors in the states where the prohibition was clamped through local laws.
Take Home Message

• VoTV has already achieved much.
• It needs to continue to work, perhaps even harder, to achieve forecasted or better results.
• From the public health point of view however, a real evaluation would come through the next Global Adult Tobacco Survey.
Future Directions

• SOP for COMPLIANCE District

• Tobacco growing - Illegal & licensed

• Active involvement pf Legal Professionals in Implementation
Holistic & Alternative Thinking

Fire Dept
Pollution boards
Urban development
Law commission
Judicial Assoc
Awareness as Catalyst for Enforcement & vice-versa

- Education
- Health
- Judiciary

- NGO
- TOT

- Home
- Municipality

Awareness

Training

Enforcement
VoTV Team

- Dr Prakash Gupta, Director - Healis
- Dr Pankaj Chaturvedi, Professor, Surgical Oncology, Tata Memorial Hospital
- Sanjay Seth, Chief of Operations, Healis
- Ashima Sarin, Project Director, VoTV
- Geeta Anil Kumar, National VoTV Coordinator
- Achyutha Nagade, VoTV Coordinator, Karnataka
- Praphul K Nair, VoTV Coordinator, Kerala
- Pratap Kumar Mishra, VoTV Coordinator, Rajasthan
Acknowledgements

• VoTV Patrons, India
• Mr. Keshav Desiraju, Government of India
• Ministry of Health & Family Welfare, New Delhi
• BI Partners – Campaign for Tobacco Free Kids; World Lung Foundation; World Health Organization; The Union
• MD Niche, Kerala
• Institute for Public Health, Bangalore
• Assam Voluntary Health Association, Assam
• Cancer Awareness Society, Bihar
• Voluntary Health Association of India, New Delhi
Why collaborate:
Cultivate champions:

**Patient champions:** Can be “policy agitators” drawing on their experience

**Public Health Champions:** Doctors, health workers and international experts

**Policymaker Champions:** Parliamentarians, civil servants, members of congress etc. who have been convinced of the value of making tobacco control a signature policy issue

**High Profile Champions:** High-level government officials, political celebrities and other notable figures who can generate attention to the issue among colleagues

*Exercise: Take 5 minutes in your groups to identify the champions you need to cultivate as part of your proposal.*
Let's bring it all together:

1. Created debate on issue/put issue on the agenda
2. Influencing debate
3. Influential «champions» emerge
4. Widespread agreement among influential stakeholders
5. Gained policy commitments from decision makers
6. Policy formulated/proposed
7. Policy agreed/adopted
8. Policy enforced: Tobacco free world!!
Some resources

- [FCTC SDG Toolkit](#)
- [WHF Advocacy Toolkit](#)
- [WHF CVD and the Development Agenda Toolkit](#)
- [Action on Smoking and Health local action Toolkit](#)
- [NCD Alliance Advocacy Toolkit](#)
Thank you!

Working together to make a difference