

POLICY TITLE

PHASA ADVOCACY POLICY

DATE OF EFFECT

1 January 2022

REVIEW DATE

1 January 2024

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POLICY STATEMENT

1. BACKGROUND

PHASA is committed to ensuring that advocacy is an integral part of the work of the organization, its structures and its members. We take our lead from the Global Charter for the Public's Health which lists advocacy as one of four key public health functions¹ in its global framework to inform and enhance systematic public health action.

Health advocacy can be considered as the use of information and resources to effect system-wide changes that ultimately improve health outcomes of communities. PHASA understands health advocacy to extend beyond raising awareness of individual risks and behaviours that impact health, to include both collective and individual action to address the structural and social determinants of health¹.

Health advocacy action is wide-ranging, encompassing various strategies in different policy and implementation settings, drawing on the knowledge and practice-base of various disciplines, and involving various approaches. Thus health advocacy actions involve diverse groups and individuals, who approach public health advocacy in distinct and intersecting ways to address a common health goal, and are not be confined to clinical or traditional health care settings.^{2, 3} but also encompasses health prevention and health promotion .

PHASA is committed to a vision of health for all in an inclusive South Africa. PHASA's mission is to promote the health of the public and to serve as a professional resource for the public health community. As an organization we have an advocacy role to play in being an independent advocacy voice for public health, contributing to policy discussions of governments, public health organisations and educational institutions, calling for all advocacy and policy recommendations to be based on the best available evidence4, supporting our members to generate the best evidence for policy decisions, and building the advocacy capacity of our membership.

experiences, and is thus well-positioned to address these goals while simultaneously ensuring the highest integrity and relevance of all its position statements, policies, and advocacy initiatives.

This policy aims to provide an approach to guiding advocacy actions within the PHASA. As advocacy initiatives increase and experience accrues, this policy will be responsively revised. The PHASA membership comprises a diverse range of public health professionals, with a broad technical skills and experiences, and is thus well-positioned to address these goals while simultaneously ensuring the highest integrity and relevance of all its position statements, policies, and advocacy initiatives.

This policy aims to provide an approach to guiding advocacy actions within the PHASA. As advocacy initiatives increase and experience accrues, this policy will be responsively revised.

Structural determinants of health

(Social determinants) are shaped by the distribution of money, power and resources at global, national and local levels, which are themselves influenced by policy choices."

(WHO Commission on the Social Determinants of Health, 2008)

Race, class and gender are key structural determinants of health in the South African context.

¹ Social determinants of health

[&]quot;...the circumstances in which people are born, grow up, live, work and age, and the systems put in place to deal with illness." (WHO Commission on the Social Determinants of Health, 2008)

2. GOAL STATEMENT

This advocacy policy sets out a common understanding of the scope and mechanisms of advocacy action to be undertaken by PHASA as an independent public health organisation, and how it serves its members in building their advocacy capacity and amplifying their advocacy work. This policy will enable PHASA and its structures and partners to build a coordinated, coherent programme of advocacy work and set up alliances to advocate for the required macro and meso-level changes required to promote health and well-being.

3. OBJECTIVES

This Policy has several specific objectives, namely:

- Describe PHASA's construction of the scope of health advocacy
- Establish a set of principles which guide PHASA as an organization, its structures (SIGs), and its members, to identify health advocacy issues for planned advocacy action
- Describe PHASA's approach to developing a coordinated programme of advocacy work
- Describe PHASA's process for formulating the organization's positions of issues of global, national and local public health importance.
- Outline some specific advocacy strategies that the organization, its structures and members might employ

4. RELATED DOCUMENTS

- i. Public Health Association Of South Africa Public Health Association of South Africa Strategic Plan 2018-2022 (Version 4).
- ii. Public Health Association of South Africa Operational Guidelines for Special Interest Groups.

5. PHASA'S UNDERSTANDING OF THE SCOPE OF HEALTH ADVOCACY

PHASA understands health advocacy as the use of information and resources to effect system-wide changes that ultimately improve health outcomes of communities. PHASA members are diverse, with different disciplinary backgrounds and they live and work in different settings. We encourage a range of advocacy work, as relevant to the specific setting, knowledge and skills of members. Traditionally much public health advocacy has focused on raising awareness of different priority diseases and advocating for change in immediate health risks and risky behaviours; this remains relevant. In addition, we specifically seek to broaden the advocacy work of PHASA to recognize the impact of structural and social determinants of health on population health, including the explicitly political aspects of creating change at local, national and global levels.

We actively encourage health advocacy which incorporates a focus on healthy environments, and the more upstream determinants which are the political, economic, social and environmental factors that impact on population health, and which promotes action on these factors to promote population well-being. PHASA encourages advocacy action which empowers health workers and communities to demand increased accountability in policy development and service provision at all levels (local, provincial, national and global) in all sectors which impact on health. We also support advocacy action directed at policy change related to the risk factors of disease and are pleased to note that increasingly our members are advocating for change in areas such as tobacco, alcohol, sugary beverages, and nutrition.

6. VALUES AND PRINCIPLES INFORMING PHASA ADVOCACY

PHASA's public health's advocacy actions must align with the following principles:

- 1 Prioritize key issues that promote health equity, access and improved population health outcomes in South Africa
- 2 Give voice and be inclusive of the most vulnerable and marginalized
- 3 Align with professional and public health values as described in PHASA's founding document, other professional standards, and our Strategic Plan 2018-2022.
- 4 Be non-partisan activities and viewpoints i.e., without bias towards any political party.
- 5 Be evidence-informed

The PHASA is committed to the following core values:
□ Equity
□ Integrity
□ Social responsibility
□ Caring/ compassion/ empathy
□ Partnership
□ Proactive
□ Rights approach
The PHASA is committed to the following principles:
The PHASA is committed to the following principles: □ Leadership
□ Leadership
□ Leadership □ Credibility
 □ Leadership □ Credibility □ Ownership
 □ Leadership □ Credibility □ Ownership □ Timely dissemination of Information
 □ Leadership □ Credibility □ Ownership □ Timely dissemination of Information □ Transparency

Advocacy and healthy public policy actions should be informed by evidence. Evidence can be qualitative and quantitative. The role of public health is to provide and interpret credible information on the health impacts of issues. Community context, preferences and knowledge are important sources of evidence that should be used to inform advocacy actions. While PHASA values a range of advocacy strategies and encourages its members to engage broadly in different approaches, we specifically seek to build advocacy which is:

- Evidence-based, through research and gaps assessments,
- Action-oriented, seeking to move beyond awareness-raising to create change in policy and practice
- Collaborative, promoting community engagement, consultative processes with a wide range of stakeholders, alliance-building and social change processes

7. STRUCTURES TO SUPPORT PHASA'S ADVOCACY ACTION

A PHASA Advocacy Committee will be established to support the development of PHASA programme of advocacy action. The chair of this committee will be appointed by the President of PHASA, in consultation with the PHASA Executive. The founding chair will be asked to serve for 24 months to oversee the establishment of the Committee, its guidelines and its processes.

The main purpose of the PHASA Advocacy Committee is

- to initiate and coordinate the development of the Annual Advocacy Operational Plan,
- to monitor and report on the implementation of the Annual Advocacy Operational Plan
- to guide the development of, review and recommend for adoption policy position statements brought by SIGS and individual members.
- to facilitate support given to SIGs in their advocacy activities

Through its Chair, the Advocacy Committee will report to the Board of PHASA, on the implementation of the Advocacy Operational Plan, lessons learnt, and recommendation made to strengthen PHASA's policy, structures and programme of advocacy work in the next year.

8. PHASA'S APPROACH TO DEVELOPING A PROGRAMME OF ADVOCACY ACTION

PHASA actively encourages advocacy issue identification, strategy development and activities by the organization as a whole, its structures and its members. PHASA is committed to building the capacity of the Association, its structures and members to engage effectively in advocacy work, under the auspices of PHASA and independently in members work and community settings. PHASA seeks to create opportunities for members and structures to have their advocacy work supported by coordination, networking and alliance-building within PHASA, and with external partners.

Advocacy is key goal of the 5-year strategic plan of the organization. An organizational operational plan for advocacy will be developed each year, which identifies the current and emerging public health issues and sets out a strategy to advocate for change. The Advocacy Committee will oversee the development of PHASA's annual advocacy operational plan, based on the issues identified through the participatory process. Synergies between advocacy issues and the potential to collaborate, within PHASA between SIGs, and externally with stakeholders and partners, will be explored in drawing together the operational plan.

On an annual basis an invitation will be sent out to all structures and members to participate in identifying key advocacy issues and initiatives to be addressed for the year. This invitation will be accompanied by a summary provided by the PHASA Board, in collaboration with the SIGs, of current

priority issues and interventions emerging from commitments or recommended action based on latest evidence at global, regional national level. Global and national health calendars will also be reviewed to identify key public health issues in the South African context. The PHASA Board/Executive team may also identify a key advocacy project, which is of significant public health interest, and which the organization wishes to engage with over a defined period of time.

The SIG Chairperson, or an identified member, will assume responsibility for coordinating a specific time-bound advocacy plan as it pertains to the particular advocacy issues that fall in their area of interest. This plan may be documented using the template provided (Appendix One). The SIG Chairperson or an identified member will forward this specific plan to the Advocacy Committee. During the planning phase, specific consideration is to be given to the support required, and that which could be offered by PHASA to implement the plan. While PHASA has limited financial resources, it is able to offer resources such as advocacy development, access to social media platforms and the quarterly newsletter, partnerships with a range of institutions and organizations, and policy statement endorsement.

9. PHASA'S APPROACH TO RESPONDING TO EMERGING AND URGENT ADVOCACY ISSUES

In addition to the planned advocacy programme of activities, issues of global or national importance may emerge during the course of a year. The issue may be identified by the PHASA Executive team or may be brought to the attention of the PHASA Executive team by a SIG or any member. Advocacy issues that are considered controversial should also first be discussed with the PHASA President or the Chair of the PHASA Advocacy Committee as a priority, and the entire Executive Committee if there is sufficient time, prior to any action being commenced ⁵.

Once an emergent issue has been endorsed by the PHASA Executive team, the chairperson of a SIG or a member with known expertise in the area of interest will be approached to assist with the design and implementation of advocacy-related activities.

10. PHASA'S APPROACH TO DEVELOPMENT OF PUBLIC POLICY POSITIONS

- Inspirational start with small wins those with a reputation
- Agree to move away from controversial positions
- Credible partners similar values and commitment to health equity and improved health outcomes
- open to endorsments, in keeping with positions and values of organisation

The PHASA's public policy position development process is the mechanism by which the Association addresses policy guidance to others outside our organization. Ideas for new public policy activity may come from anywhere within the organization. PHASA members, individually and/or as members of SIGs, are encouraged to develop policy statement proposals on key public health topics, including issues that PHASA annually identifies as policy statement gaps or policy statements that need

updating. Members and structures are strongly encouraged to work collaboratively across PHASA structures when developing policy statement proposals to ensure the proposals contain input from all relevant member groups and experts within the Association. Proposed policy statements only become official PHASA policy statements after an approval process where the statement is reviewed by PHASA's Advocacy Committee and then submitted to the PHASA Board for sign off.

PHASA policy statements are expected to reflect the latest available scientific research. Policy statements will be peer-reviewed to ensure that they promote population health and equity, are aligned with the values and principles of PHASA, are scientifically sound, and do not pose a risk for PHASA. This function will be overseen by the Advocacy Committee.

The policy position development process can result in one of the following in support of advocacy:

- Issuance of an PHASA position paper;
- · Coalition building on a particular issue;
- Issuance of a letter of concern or support for an issue;
- Participating as a "sign on"; or
- In-person visitation to policy makers or legislators.

Sign-on are joint letters sent by PHASA and other agencies or partners to members of parliament, relevant parliamentary committees and other policy makers. PHASA will partner with other likeminded organizations, as well as with other government agencies to influence policymakers to pass legislation, policies and make regulations in the interest of public health.

The policy statements help to inform PHASA's advocacy work. Once policy statements are adopted by the Board, they should help to shape the development of legislative, policy, regulatory and media advocacy activities. PHASA members may refer to PHASA policy statements as background for determining whether PHASA will support or oppose legislation, policy, regulations and other actions based on the research, general position and recommendations included in the policy statements. The policy statements also drive the content of PHASA's legislative, policy and regulatory recommendations, including letters and comments sent to parliament, government entities, editors and the judiciary.

PHASA members, SIGs, and Affiliates also use the policy statements to advocate for public health issues in their networks and communities. Additionally, the policy statements may be referenced in peer-reviewed literature and white papers, and they can inform resource information for the public such as media reports, infographics, fact sheets, other reports and educational webinars and sessions at the PHASA Annual Conferences. PHASA aims to adopt policy statements with an evergreen approach, avoiding tying proposals to specific legislation or finite timeframes that could quickly outdate a policy statement. Any PHASA member or SIG or its Affiliate considering submitting a policy statement proposal is strongly encouraged to suggest the list policy gaps for that financial year and collaborate with other PHASA structures in developing proposals, so that new proposed policy statements fill the identified gaps.

Our policy statements:

- help shape PHASA's position on legislation and regulations.
- are used to write briefs and statements on many public health issues.
- highlight the latest research on specific public health topics.
- are the source of information for reference and resource information for the public, such as infographics, fact sheets and reports

11. PLANNING ADVOCACY ACTIVITIES

11.1. Planning

In planning health advocacy initiatives, the Association, its structures and members are encouraged to consider the relevance one or more of the following steps:

identification of the public health issue

identifying the change that needs to happen (i.e. what is the result that you would like to see happen when you implement your advocacy strategy)

establishing goals and objectives.

identifying target audiences

identifying relevant stakeholders and/or strategic partners

allocating roles and responsibilities

determining resource requirements

research and evidence generation

developing key messages to influence your target audience

- a. e.g. professional and/or public education
- b. development and/or promotion of regulations and legislation

developing and implementing your health advocacy plan.

monitoring and evaluation of health advocacy action

11.2. Strategies

PHASA encourages the use of different advocacy strategies, tailored to the issue, the context, the opportunities for community engagement and intersectoral action, and the resources available. Different strategies may be required at different stages in policy processes or stages of service delivery implementation.

Health workers, managers, policy makers and researchers need to be able to work with communities

and other sectors in advocating for intersectoral action for health. Strategies to mobilize, support and collaborate with communities and other stakeholders are necessary.

To bring about effective change on structural and social determinants of health, advocacy should also be targeted at laws, regulations, policies and institutional practices, prices, and product standards.

Some strategies which may be considered in the development of advocacy plans are:

i. E-Advocacy

This involves delivering credible information via an internet or social-media platform, to inform and/or educate the public and decision-makers on important public health issues. See Appendix 2 for tips to strengthen e-advocacy. Examples of such platforms include:

- a. PHASA Website
- b. E-mail lists servers
- c. Twitter
- d. Facebook
- e. LinkedIn
- f. Interactive platforms/ feedback
 - i. Online polls
 - ii. Online petitions

ii. Media Advocacy

Various media platforms can be used to advance one's health advocacy message. These include:

- a. Press releases (Appendix Three)
- b. News articles
- c. Letters to editors
- d. TV or radio interviews
- e. Advertisements
 - i. Print media
 - ii. Radio grabs

iii. Other written advocacy approaches

- a. Position papers
- b. Newsletters
- c. Briefs
- d. Publications

iv. Events

- a. Meetings with relevant institutions, departments, or individuals
- b. Seminars
- c. Workshops
- d. Conferences

v. Lobbying

To be considered lobbying, a communication must refer to and express a view on a specific legislative proposal that has been introduced before a legislative body. This means working to influence the outcome of specific legislation—trying to get a bill passed or defeated—by communicating your organization's views or position to those who participate in the formulation of the specific legislation—your Members of Parliament, legislators, your local elected officials, or national and local policymakers.

12. IMPLEMENTATION AND MONITORING

- The Advocacy Committee, in conjunction with the committees for SIGs and Media, will oversee implementation of this policy.
- The Advocacy Committee will be responsible for monitoring of all health advocacy activities within PHASA. SIGs and members who have been appointed as leads on particular advocacy activities will be asked to submit a report on activities implemented and outcomes and impact achieved, 6 weeks before the annual PHASA conference.

13. REFERENCES

- 1. Lomazzi M. A Global Charter for the Public's Health—the public health system: role, functions, competencies and education requirements. *The European Journal of Public Health* 2016; **26**(2): 210-2.
- 2. Chapman S. Advocacy for public health: a primer. *Journal of Epidemiology & Community Health* 2004; **58**(5): 361-5.
- 3. Christoffel KK. Public health advocacy: Process and product. *American Journal of Public Health* 2000; **90**(5): 722.
- 4. Public Health Association Of South Africa. Public Health Association of South Africa Strategic Plan 2018-2022. Version 4. . 2017.
- 5. Public Health Association Of South Africa. Operational Guidelines for Special Interest Groups. 2016.

14. APPENDICES

a. 10 Steps For Your Advocacy Plan:

- 1. Identify an advocacy opportunity/challenge.
- 2. Determine the key audience/s.
- 3. Find out what those audiences currently know or perceive.
- 4. Determine how each audience receives its information.
- 5. Establish measurable objectives for each audience.
- 6. Define message points for each audience.
- 7. Determine the communication activities to deliver those messages.
- 8. Decide what resources are necessary to complete each activity.
- 9. Establish a timeline and responsible party for each activity.
- 10. Evaluate whether you have reached your objectives.

b. The WHO Advocacy Strategy Template

THE WHO ADVOCACY STRATEGY TEMPLATE

BACKGROUND

• Brief context & situational analysis – what's the problem? Why advocate on the issue? Human rights, commitments, accountability, outcomes...

ΔΙΜ

• Long-term goal that want to contribute towards, e.g. MDGs 4 & 5?

OBJECTIVES

- Specific Measurable Attainable Realistic Time-bound change objectives
- Do these contribute to the realisation of your aim?

TARGETS

- Who has the power to make the necessary changes?
- Who influences those people?

ALLIES/PARTNERS

- Who can you work with to build momentum and support?
- Different perspectives...

ACTIVITIES & OUTPUTS

- Policy & research
- Advocacy
- Popular mobilisation
- Engagement of key stakeholders

KEY MESSAGES

• For each audience

TIMELINE

• Moments/opportunities for influence? How to be prepared for these with evidence and advocacy needed?

ROLES & RESPONSIBILITIES

BUDGET

• What gaps (incl. capacities)? How fill them?

M&E&L

· Log-frame

c. SOCIAL MEDIA TIPS

- Social media can be used for the sharing of health information messages, as well as short statements related to the PHASA's position on topical public health occurrences
- Currently, PHASA has the following social media accounts: Twitter, Facebook, and LinkedIn
- PHASA social media links should be included in all outgoing email
- Twitter can be used for short responses ≤ 280 characters
- Longer social media responses can be posted on the PHASA Facebook and LinkedIn pages
- The PHASA Twitter handle should be used by SIGs and other members, for all relevant Public Health messages and information sharing i.e. #@PublicHealthSA
- The PHASA Twitter Account will acknowledge, and re-tweet all approved, tagged Twitter posts
- The PHASA Twitter account should also tag relevant organizations, individuals e.g. PHASA members, PHASA executive committee, and other experts to increase the reach of the post
- Links to all PHASA social media posts will appear on the PHASA website

d. SAMPLE PRESS RELEASE TEMPLATE:



(Media Contact Name) (Contact Phone/ Email)

(Date)

(Re:)

e. GUIDELINE FOR SUBMITING REQUEST TO PHASA BOARD

Request to Board:

All requests to be submitted to PHASA secretariat (secretariat@phasa.org.za) with Secretary and President copied. **Documents Required:**

- -Formal Request with motivation for the request (1 page maximum)
- if urgent then highlight reasons for urgency in the motivation
- -All requests needing funding must be sent to treasurer for review, with completion of PHASA funding documents before Board reviews.



Urgent Requests:

- -All requests will be reviewed by the board within 5 working days, unless more urgent motivation provided.
- -Requests will be reviewed by board via email.



Outcome of Request:

- Requests to board will have following outcomes:
- -Approved, with no conditions
- -Approved with conditions
- -Rejected with guidance for resubmission
- -Rejected with reasons

Outcomes of the board will communicated with 10 working days.



Non-Urgent Requests:

-All requests will be reviewed by the board at the first board meeting from date of submission.

-Candidates may be invited by board for further information/clarity related to the request.



Appeal of outcome

All Appeals must be submitted to board secretary with five working days of receiving request outcome. Panel consisting of PHASA EXCO (President, Secretary, Treasurer) will review appeal

Documents Required:

- motivation to review outcome of the board (1 page maximum)

Outcomes of the Appeal will be communicated within 7 working days of appeal being reviewed.

COMPILED BY: DR LWANDO MAKI DATE: 01 NOVEMBER 2021 BOARD ADOPTED DATE: REVIEW DATE: 01 NOVMEBER 2024