

# Implement a Plan

Part 1: Monitor for Impact—The Decision Tree

Part 2: Evidence-based Briefs—Make Your Case

**NOV 2015** 

# In implementing a strategic advocacy plan, advocates must monitor progress to track whether activities are achieving their intended impact or whether different tactics are needed. A decision tree can help advocates look ahead and focus on follow-through. Advocates must also use targeted materials such as briefs, presentations, and case studies to clearly outline key messages, present research findings, disseminate policy and program guidelines, outline crucial challenges, and provide concrete next steps in the form of "asks."

The most effective materials are informed by evidence-based advocacy—advocacy that identifies, assesses, and uses the most up-to-date research findings as the basis for policy decisions. Once this information is collected and analyzed, it can then be packaged to produce focused, succinct briefs that make a clear case for change. This component provides a decision tree for monitoring impact and basic guidance for making your case with evidence-based briefs.





# Monitor for Impact: The Decision Tree

# Monitor Implementation of the Advocacy Strategy

AFP tracks advocacy objectives and quick wins to determine if they are achieving their intended impact. Over time, it is possible to identify that certain steps must occur either consecutively or in parallel to have outcomes at the impact level. Monitoring whether these steps have occurred is essential to determining advocacy success. In this sense, the Decision Tree can serve as a checklist—which is helpful since advocacy occurs in an environment with limited resources, narrow mandates and geographies, and multiple demands on time. Figure 1 provides an example on task sharing and describes the AFP process for monitoring results.

# STEP 1: IDENTIFY THE QUICK WIN(S)

Identify the Quick Win/s you are monitoring and date of accomplishment.

## STEP 2: IDENTIFY THE MOST EFFECTIVE INTERVENTIONS

Identify which interventions are most effective in creating change beyond the Quick Win. AFP may be involved in some or none of these interventions. Track whether the required interventions are being implemented (either through the local advisory group or other formal/informal mechanisms). If you find that a necessary, effective intervention has not been planned, this is the time to review and revise your original advocacy strategy and advocacy actions. At each level of implementation, a binary outcome (yes/no) will occur. Each level represented in the figure is an instance for documentation and data collection. A "no" at each level represents an opportunity for advocacy to reverse the outcome. A "yes" means moving forward and tracking the next incremental outcome.

For example, a Quick Win may be a policy decision to include a new method in the public sector. After this Quick Win, the most effective interventions to increase

contraceptive choice include (1) disseminating policy, (2) training providers, and (3) developing a supply chain to support the new method. AFP should track whether these interventions have taken place even when we are not directly involved in specific activities. We track implementation of the policy decision by working closely with the relevant partners and prepare for additional advocacy if a particular action falters.

# STEP 3: IDENTIFY THE MONITORING TEAM

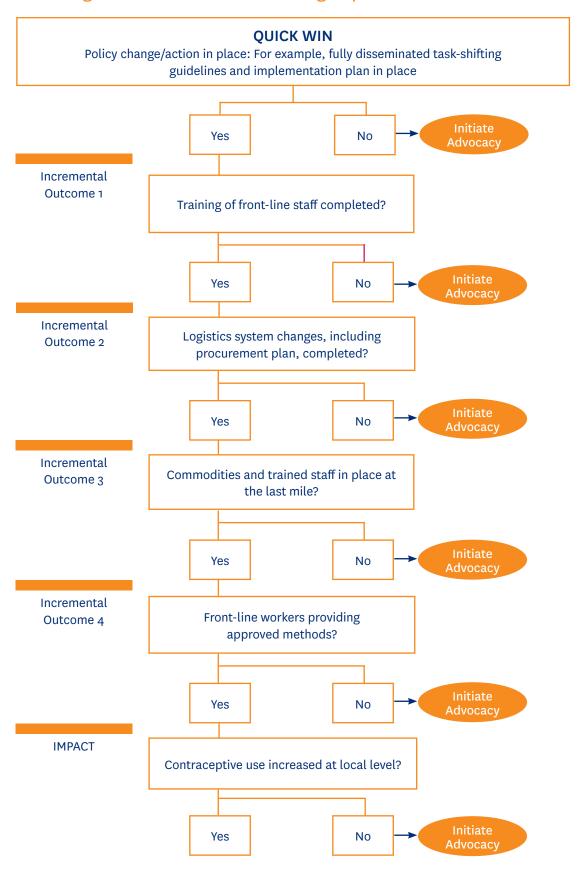
Identify who will track the status of an intervention and how they will get information and communicate; and document this in detail in the workplan drafted during the strategy development process, where advocacy partners are assigned responsibilities.

If possible, set timelines for each of the above steps. Some implementation steps may occur concurrently or consecutively, but documenting when they occur provides evidence of implementation and insight into the length of the advocacy process for future efforts.

# STEP 4: COLLABORATE TO RENEW EFFORTS, IN REAL TIME

Once again, for each stage along the process, be prepared to renew advocacy efforts. This step requires close partnership with the government and implementers to be able to understand when and why interventions have stalled and to develop new advocacy strategies to overcome barriers.

Figure 1. Decision Tree: Creating Impact from Outcomes



# Understand and Manage Setbacks

When expected changes do not occur, it is important to revisit the assumptions underlying the advocacy strategy. Typically, we see changes in contraceptive use or method mix as a result of advocacy if we

- Made reasonable assumptions about the local demand for family planning services and specific methods
- And made reasonable assumptions about the local barriers to access and use
- And invested in the most effective interventions with our partners

The following example shows how underlying assumptions dictate strategy but may not lead to expected results:

Family planning partners in District A share a common opinion that frequent stock-outs in the public sector are contributing to low contraceptive use. They develop a strategy to reduce stock-outs by increasing funding for local transport to regularly collect commodities. The Quick Win is an increase in district-level funding for regular commodity transport. Here are some unexpected results from the Quick Win and different assumptions that may underlie them:

 Result 1: Despite the increase in funding, there are no changes in stock-outs at District A

*Explanation*: This result points to a fallacy at the process level. Increased funding does not automatically change stock status. It will do so only if the funds were used to collect commodities, which were then properly stocked and distributed at the facility level.

 Result 2: There are fewer stock-outs in District A, but no change in contraceptive use occurs after one year

*Explanation*: At the causal level, contraceptive use may not be supply-elastic (i.e., may not be responsive to changes in supply). This can happen when women's preferred method is unavailable and the wrong types of methods are fully stocked.

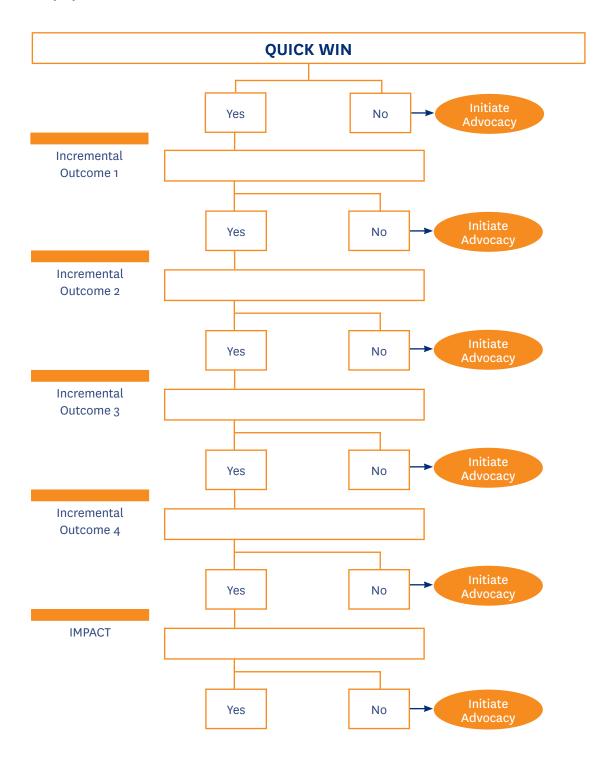
# Result 3: There are fewer stock-outs in District A, but contraceptive use for the district decreases

*Explanation*: Our assumption about the relationship between stocks and contraceptive use did not take into account other variables that may be more powerful in explaining contraceptive behavior in District A. For example, following a series of economic shocks, District A's infant mortality rates spiral upward. The replacement effect reduces the demand for contraception in the period that follows.

Results can vary because the underlying assumptions about process and cause may be incorrect. In every instance, revisiting underlying assumptions and adjusting strategy based on new evidence will help move a Quick Win back on track to achieving a result.

AFP's approach calls for strong evidence to guide advocacy, and this example shows the value of obtaining better information about client preferences to develop an effective strategy. Even when we have good evidence, the context may change rapidly, which requires refining the strategy and restarting advocacy. The Decision Tree anticipates these moments of returning to advocacy each step along the way to an incremental outcome and impact (see Figure 1).

# Appendix 1.1. Decision Tree Worksheet



# Make Your Case

# An Overview of Evidencebased Advocacy Briefs

An advocacy brief includes a concise summary of a particular issue, the policy options to deal with it, and some recommendations on the best option. It also provides decisionmakers with the evidence to support that option. Because advocacy efforts focus on decisionmakers who might have little relevant technical background or are busy and sometimes not aware of or interested in the topic, the following points should be kept in mind when developing briefs.

### Briefs should be

- Short. One page (double-sided, usually about 700 words) is best, with key information on the front.
- **Focused.** There should be only one or two take-home messages.
- **Evidence-based.** But non-technical in presentation. Focus on meanings, not methods.
- Relevant. Country- and, if possible, state- or district-specific.

Briefs can inform (research results or a state of knowledge) and/or influence (advocacy).

An effective advocacy brief will

- Provide enough
   BACKGROUND for the policymaker to understand the problem.
- **CONVINCE** the policymaker that solving the problem is important and urgent.
- Provide EVIDENCE to support action.
- Incite the policymaker to make a decision with a clear, actionable ASK.

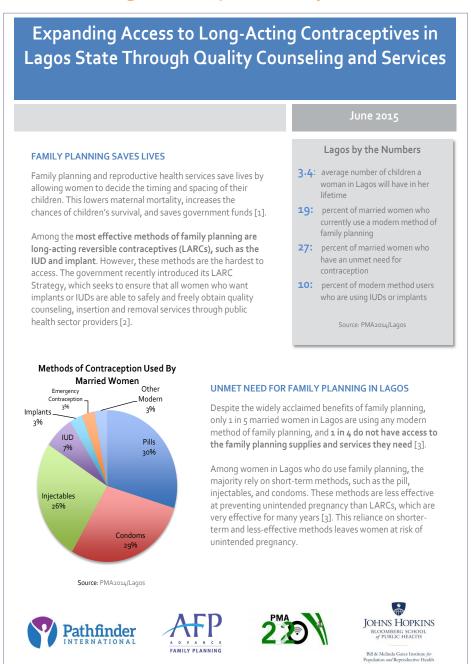
See Figure 1 for a sample advocacy brief.

# **EVIDENCE**

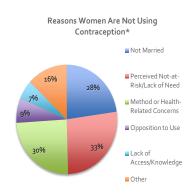
Data that support or emphasize the main message are essential.

- Present only information that is relevant to the decisionmaker.
- Use graphics such as charts, figures, and tables to show data visually, but make sure the graphics have clear titles and the message is easily discerned.
- Define technical terms in a way that is understandable to the average reader.

Figure 1: Sample Advocacy Brief



# Figure 1: Sample Advocacy Brief, continued



### \*women were allowed to select more than one option Source: PMA2014/Lagos

# WOMEN NEED FAMILY PLANNING COUNSELING

Recent data show that public facilities in Lagos do have LARCs in stock. However, 60% of women who visited a health facility for their own or their children's care in the last year did not receive any counseling about family planning from their health provider. Given the high proportion of nonusers of FP who have health concerns or are worried about method-related side-effects, provider counseling is especially important [3]. This lack of information may explain the reliance on less-effective short-term methods.

### MEDICAL OFFICERS OF HEALTH CAN IMPROVE COUNSELING & SERVICES

To help Lagos state meet the aims of the national LARC Strategy and help more women access family planning—including LARCs—LGA and LCDA Medical Officers of Health can:

- Ensure high quality family planning counseling and services through regular scheduled and unscheduled monitoring of providers
- $\bullet \quad \text{Organize } \textbf{refresher trainings} \text{ on provision of LARCs, in accordance with the national LARC Strategy}.$
- Make local health funds available to implement training on FP counseling and ongoing supportive supervision.

### REFERENCES

- Rhonda Smith, et al. 2009. "Family Planning Saves Lives." Population Reference Bureau. http://www.prb.org/pdfog/familyplanningsaveslives.pdf
- Nigeria Federal Ministry of Health. 2014. "Increasing Access to Long-Acting Reversible Contraceptives in Nigeria: National Strategy and Implementation Plan (2013-2015)."
- 3. Performance Monitoring and Accountability 2020 (PMA2020) Project, Centre for Population and Reproductive Health at the University of Ibadan (CPRH), the Centre for Research, Evaluation Resources and Development (CRERD), the Population and Reproductive Health Program (PRHP) at the Obafemi Awolowo University in Ile-Ife, and Bayero University Kano (BUK). 2014. Lagos. Baltimore, MD: PMA2020, Bill & Melinda Gates Institute for Population and Reproductive Health, Johns Hopkins Bloomberg School of Public Health.

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# FORMATTING AND STYLE

Write short, succinct sentences.

- Use "white space" to make the page appealing to the eye and attentioncatching.
- Lay out your text in an electronic- and printer-friendly format.
- Consider bulleted lists and tables, use boldface text to highlight important words or phrases, and insert subheadings to improve readability.
- Select photos strategically to convey a message and put a "human face" on the topic, as well as to make the page attractive. However, be cautious of adding too many images, which can make the file size large and affect download speed.
- Use boxes or sidebars to present various types of information that do not fit well in the flow of the text.

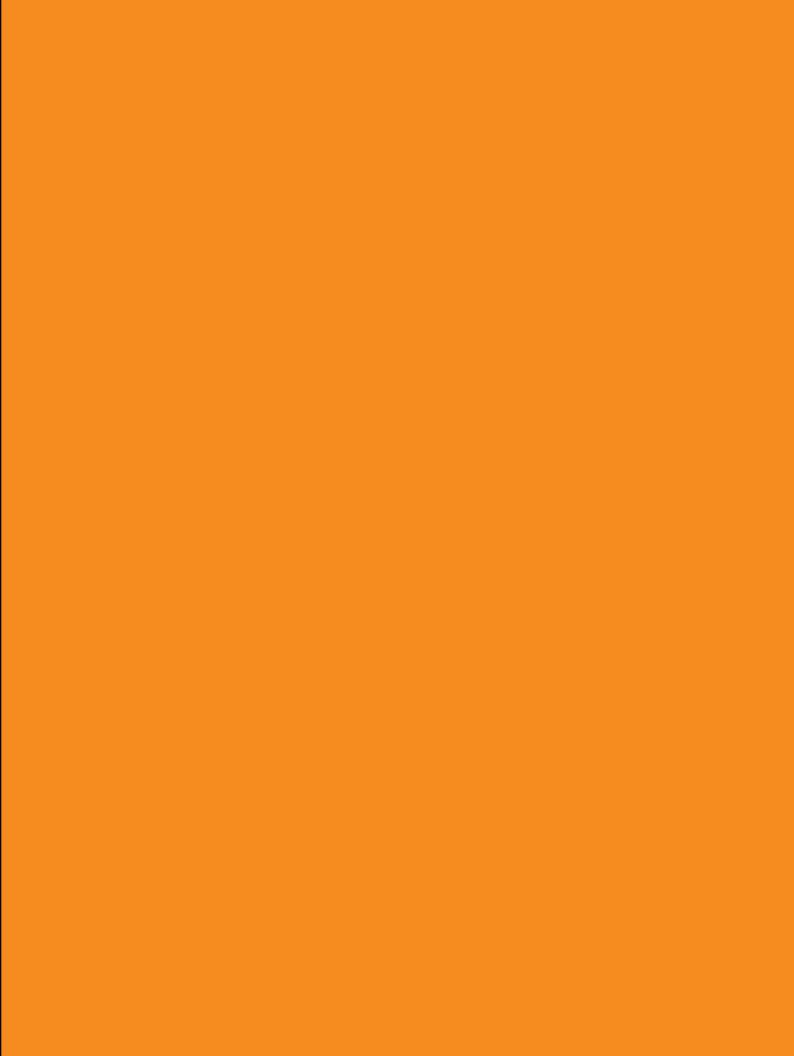
# **ATTRIBUTION**

- Provide references for evidence—but not so many that it begins to look like an academic report.
- Make the organizational source of the brief clear through attribution or inclusion of a logo(s).
- Include a "for further information" section along with the name of a person to contact.

## SUPPORTING MATERIAL

In addition to the brief, supporting materials may include

- A factsheet
- Supporting research, field reports, or complementary advocacy materials
- Examples of successful applications of the recommended "asks"



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