

MEDIA ADVOCACY

FOR TOBACCO CONTROL

FEBRUARY, 2000

This info pack discusses media advocacy as a strategy for achieving sustainable health behaviour changes, with a specific focus on tobacco policy initiatives. It includes:

- a description of media advocacy;
- an overview, with examples, of how to successfully use media advocacy; and
- a list of additional resources.



at THE CENTRE FOR
HEALTH PROMOTION
UNIVERSITY of TORONTO

CTFO council for a tobacco-free ontario
CATO conseil anti-tabagisme de l'ontario

PTCC
CFC Program Training & Consultation Centre
Centre de Formation et de Consultation

Understanding and Using Media Advocacy for Tobacco Control was developed by the Council for a Tobacco Free Ontario (CTFO), the Program Training and Consultation Centre (PTCC) and The Health Communication Unit (THCU)—resource centres funded by the Ontario Ministry of Health and Long Term Care. It is the fourth info pack in a series of five info packs, designed to support community-based media campaigns.

Other titles include

Understanding and Using Audience Analysis and Segmentation for Tobacco Control
Understanding and Using Fear Appeals for Tobacco Control
Understanding and Using Mass Media for Tobacco Control
Understanding and Using Process Evaluation for Tobacco Control

Additional copies of this resource or the complete set is available free of charge to Ontario residents. Phone or fax requests to the PTCC at 1-800-363-7822 (phone) or (613) 724-4116 (fax).

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CTFO is a volunteer-directed, not-for profit organization. Its mandate is to support community-based coalitions across Ontario. It supports local action for National Non-Smoking Week (3rd week in January) and World No-Tobacco Day (May 31). It also supports local coalitions by providing information on tobacco issues and assistance with council revitalization. You can find CTFO on the web at <http://www.opc.on.ca/ctfo/>, or reach them by telephone at 1-800-316-CTFO, by fax at (416) 962-6464, or by e-mail at ctfo@web.net.

PTCC is a resource centre that provides training and consultation on tobacco control programs to public health units, local tobacco-free coalitions, community health centres and non-government organizations. PTCC is a partnership of the Ottawa-Carleton Health Department, RBJ Health Management Associates and the Centre for Applied Health Research at the University of Waterloo. You can find PTCC on the web at www.ptcc.on.ca or reach them by telephone at 1-800-363-7822, by fax at (613) 724-4116, or by e-mail at nevalaja@rmoc.on.ca

THCU is a resource centre that provides training and support to communities in health communication, planning, evaluation and policy development. THCU integrates health promotion principles with communication theory, research and practice. You can find THCU on the web at <http://www.utoronto.ca/chp/hcu/>, or reach them by telephone at (416) 978-0522, by fax at (416) 971-2443, or by e-mail at hc.unit@utoronto.ca.

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Understanding and Using Media Advocacy for Tobacco Control

What Is Media Advocacy?

Media advocacy is a tool for policy change. It involves working with the mass media (television, newspapers, radio, etc.) in conjunction with community development, to build support for the development of healthy environments through public policies. This is done by gaining access to the media and presenting health issues in terms of social and environmental causes *rather than in terms of individual responsibility*. When presented effectively, the resulting media coverage shapes public opinion, mobilizes community activists and pressures decision makers to create the desired policy change.

Since media advocacy focuses on policy changes, it often involves direct confrontation with powerful vested interests, so health agencies and the media may be hesitant to work with advocates on certain issues (Wallack, 1990). Despite that barrier, media advocacy has clear advantages in terms of its potential for permanently influencing large numbers of people in a cost-effective way. Though it requires planning, skill, creativity and long-term commitment, it has been successfully used by many community groups to address a variety of health issues, including tobacco control.

Following is an overview of how to successfully use media advocacy to advance policies related to tobacco. References and resources for more information on media advocacy are also listed.

Healthy public policies

create an environment conducive to healthy living, making it easier to adopt healthy behaviours and more difficult to adopt risky behaviours. Examples of healthy public policies include creating safe walking paths in a community or limiting where people can smoke in public places. Such policies build standards for healthy behaviours into the social environment, where large numbers of people can be influenced over the long term.

What is the difference between mass media education campaigns and media advocacy?

Education campaigns raise awareness about a particular issue, and normally include some type of "call to action." Media advocacy efforts may include education campaigns, as long as the focus is on policy and environmental solutions to the problem, rather than on individual responsibility for behaviours. For example, a campaign that provides information on how to quit smoking is not media advocacy. On the other hand, a media campaign that focuses on how tobacco advertising contributes to smoking and health costs is media advocacy. In the first example, the campaign focuses on individual action; in the second, on desired changes in the environment.

Using Media Advocacy

Becoming a truly effective media advocate takes practice. However, some standard steps and tactics can enhance all media advocacy efforts, including those of community groups just starting out. In short, these include:

- planning and preparation;
- framing for access;
- framing the content to advance the policy; and
- evaluating.

These steps may be repeated in many different ways, as changing public policy is normally a lengthy process spanning months or years.

Planning / Preparing for Media Advocacy

Identify the issue.

An example of a tobacco control issue could be “Many children are experiencing health consequences such as asthma, frequent colds and ear infections from exposure to second-hand smoke.”

Identify the policy solution.

In the case of children and second-hand smoke, part of the solution could be to pass a law that limits where smoking can occur in public.

Identify who has the power to create and adopt the policy—the primary intended audience(s).

If a law restricting smoking in public places were to be passed at a local level, it would be municipal politicians making the final decision about passing the law.

Explore who has the power to influence the decision makers—the secondary intended audience(s).

In many communities, there are highly vocal special interest groups (such as business associations), that local politicians have a history of being involved with and influenced by. It is important to discover who these people or groups are so that efforts can be made to get them “on side.” The mass media are also an important secondary audience in media advocacy efforts.

Research the implications of adopting or not adopting the policy.

For example, could passing a municipal bylaw that makes smoking in restaurants illegal result in numerous patrons going to the neighbouring municipality to eat out? Or will residents of other municipalities be attracted to the smoke-free area?

Research what the intended audiences (primary and secondary) already know and feel about the issue.

Are the intended audiences aware of the issue? Do they understand all the facts about the issue? Are they already opposed to or supportive of the proposed policy solution? If so, why? This information can be gathered through formal surveys, focus groups or by informal conversations with contacts in the community. See the info pack in this series called *Understanding and Using Audience Analysis & Segmentation for Tobacco Control*.

Review key studies, significant data and contested issues.

Is there proof that the policy you are suggesting will adequately address the issue at hand? Does the intended audience(s) agree that your “proof” comes from a credible source, or do they doubt its validity?

Find out where the intended audience(s) get their information.

What are the channels/vehicles that the audience regularly attends to? Do they regularly read editorials in the local newspaper (as politicians normally do)? Or do they mainly attend to lifestyle stories or talk shows (as the community at large does)?

Learn about the different ways to access the types of mass media that the intended audience(s) attend to.

Learn how to write a press release that appeals to journalists and/or the editor of the types of mass media the audience attends to. Research when it is appropriate to send a media advisory, create a press kit, or hold a news conference. Identify the key contacts at the local newspaper, and at the radio and television stations.

Learn how to work effectively through different mass media and train/prepare one person or a team of people to deal effectively with the media.

Develop interviewing skills for each of the types of media journalists you may be dealing with. Monitor the media on a regular basis. Learn about what kinds of things the media are interested in hearing/writing about and how to get your message across clearly.

Careful planning and thorough preparation make it easier to successfully capture the attention of the media and shape the content of media coverage to focus on policy development as a solution to the health issue at hand.

Framing for Access

Building a solid relationship with key journalists enhances the chance of getting media coverage. This takes time, but you can start by always respecting their deadlines, returning their phone calls promptly, and following up a discussion or coverage with a thank you.

While media advocacy sometimes includes paid advertising, it more commonly involves *earning* access to the news media. Earning access involves getting journalists to cover your story, so that you can present your policy message. Not only is earning access to the news media a more cost-effective way of reaching large audiences than purchasing media time or space, but many studies have shown that the news media are considered a credible source of information. They can influence how the public, policy makers, and the media themselves rank the importance of different issues and how they feel about those issues (Jernigan and Wright, 1996).

Part of earning access to the news media involves telling your story in a newsworthy way—a process called framing for access. It can be a proactive process where news is “created” or it can be a reactive process, where the issue is tied to an existing news story (piggy-backing). Both methods require constant monitoring for breaking news, unexpected events and other opportunities to catch the attention of the media. Ways to gain media exposure include:

- sponsoring a community event
- writing letters to editors
- forming an unusual partnership
- piggy-backing on breaking news
- purchasing paid advertising time
- releasing new data
- holding a contest
- beginning an ad campaign
- staging an event

These story “backdrops” can be made even more attractive to journalists by including human interest, conflict, a person of prominence, irony, local relevance, photos (for newspaper) or video clips (for television). There is really no restriction on the number of ways a community group can create or react to news to advance their policy goal. It is a creative process that improves with experience.

Piggy-backing on breaking news.

“Some years ago, there was a story about grapes being imported from Chile that had been sprayed with cyanide. Some media advocates got together and realized that one cigarette contains several hundred micrograms of cyanide and second hand smoke contains ten micrograms. All fruit imports from one entire country were banned because of two grapes containing a tiny fraction of one of the many poisons in cigarettes! This was a perfect opportunity to show the need to regulate tobacco. So a big press conference was called with a pile of grapes on one side of the podium and a pile of cigarettes on the other in order to compare the different amounts of cyanide. The idea was strategic: how can we piggy-back on the news and get something positive out of it for our side?” (Weiner, 1995).

Framing/Reframing for Content to Advance the Policy

Unfortunately, sometimes the element of the story most likely to draw media attention (e.g., focus on the victim) is not what you want to emphasize (Wallack and Dorfman, 1996). To advance policy as a solution to a health issue, it is important to shift the frame from personal responsibility for health to social and environmental factors that affect health. This is called *framing for content* (or reframing from the original point of view). It means telling the story from the policy advocacy perspective. A personal responsibility point of view, for example, might focus on how parents should discourage their children from smoking. Shifting to the policy advocacy perspective (or social/environmental causes) would involve reframing the issue to focus on increasing the price of cigarettes, stopping tobacco advertising, or restricting smoking in places where children frequently spend time, as ways to prevent children from starting to smoke.

There are a number of ways to effectively frame (or reframe) an issue in a way that advances a policy objective. Some of the most common strategies include: using media bites, social math and focusing on values that most people respond to in similar ways.

Media bites are short, concise statements that summarize the main point of a message. They are a key tool to use when interacting with the media. The more catchy a bite is, the more likely it is to be used in the media and remembered by the intended audience. The important part of using media bites for media advocacy is that they should clearly advance the policy as the solution to the problem. With media advocacy, getting noticed is important, but the primary goal is always to *advance the policy*.

Social math (also known as creative epidemiology) is a tactic that can make media bites memorable and meaningful. Social math makes data relevant, understandable and interesting. For example, “cigarettes kill over 40,000 Canadians every year. This death rate is equivalent to the crash of a jumbo passenger jet every four days, for a year, with no survivors.” The key to using a tactic like this is to remember to *advance the policy*. In this example, one more sentence could be added at the end, describing what the policy solution is, such as reducing sales to minors, raising cigarette taxes or banning tobacco advertising.

There are other ways of making media bites meaningful to the media, the public and decision makers. Studies show, for example, that there are a set of almost universal values that people typically respond to positively. These include freedom, security, family, health, fairness, opportunity and caring. Conversely, most people respond with negative enthusiasm to unfairness, government or corporate oppression, harm, deceit, greed, favouritism and dependency (Benton Foundation, 1991).

In a recent study, Menashe and Seigel, 1998, discovered that in the past decade, the tobacco industry has consistently and constructively used these values in the media to frame their messages in a way that increased public

In a 1998/99 media advocacy campaign, the Thunder Bay Health District Unit used some innovative, hard-hitting ads that demonstrated how an issue can be framed to grab public attention by focusing on the individual, and then reframed to advance the policy goal. A newspaper ad with the headline “We’re Killing Our Waitresses” showed a graph of death rates among waitresses as compared to other women. It urged the public to speak up in support of a clean air bylaw, and drew a great deal of public attention and discussion.

approval of the industry, whereas the anti-tobacco movement has not. They suggest that this may explain why tobacco remains legal, accessible and acceptable despite conclusive evidence of the hazards of use!

Evaluating Media Advocacy Activities

With media advocacy, the ultimate indicator of success is policy adoption and implementation. There are, however, some evaluation questions that are worth asking while working towards that goal. This evaluation of the process (process evaluation) can help make future media advocacy activities more successful. Some examples of process evaluation questions include:

Don't be fooled by evaluation methods that only measure output. Meaningful evaluation is more than numbers of words or length of articles. Remember that the goal is not just coverage, but policy advancement, so evaluation should include examining the content of coverage received.

- Did you get news media coverage?
- Was your piece front page cover, or an eight second reference on the evening news?
- Were the facts mentioned and were they correct?
- Did your issue get framed in the policy advocacy perspective? (i.e., in a way that met your goals?)
- Did the writer/speaker use positive or negative words when referring to your organization?

Summary

When done effectively, media advocacy can result in healthy public policies that support long-term behaviour changes in large portions of the population. Doing media advocacy effectively means having a thorough understanding of the issues and the people who have the power to change public policy. It involves knowing how to get noticed by and how to interact with news media personal, as well as having an acute awareness of current events.

Though many of the skills needed for effective media advocacy require practice, there are ways to prepare for media advocacy work that can increase the chance of being noticed in such a way that advances policy.

This info pack is designed to be a starting point for those interested in learning about media advocacy as a sustainable behaviour change strategy. The references and additional resources listed below are excellent “next steps” for planning or improving a media advocacy strategy.

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Additional Resources

Listserve

OTRU-NET

OTRU-Net is an electronic mail forum, which automatically distributes email messages to every subscriber. It provides a convenient opportunity for tobacco investigators to participate in discussions on priority areas in research, project development, funding issues, and any other relevant topic. To join, send an e-mail to: LISTSERV@LISTSERV.UTORONTO.CA. In the message, put ONLY the following: **SUBSCRIBE OTRU-NET YOUR NAME** (where Your Name is the name you normally use). Your subscription will be confirmed by return email. For more information:

Mel Martin (416) 535 8501 ext. 6047, e-mail: melm@gpu.utcc.utoronto.ca

International Tobacco Control Listserve

Intl-tobacco is a moderated listserve which distributes information related to international tobacco control, including news articles, analysis, updates on legislative developments in the United States related to international tobacco control, and reports from tobacco control advocates around the world. To subscribe to intl-tobacco, send an e-mail message to listproc@essential.org with the following, all in one line:

subscribe intl-tobacco <your name>

Tobacco News Online

Tobacco News Online (TNO) is a daily digest of articles published on the Internet in the last 24 hours that relate to tobacco and tobacco control, whether in social, political or scientific terms. Though there is an emphasis on Canadian news (in both English and French), TNO has a strong international component. To sign on, send an e-mail to Stan Shatenstein at shatenstein@vif.com. Articles are also available on the web at <http://www.tobacco.org/Today/newsites.htm>

GLOBALink

GLOBALink is the International Tobacco Control Network, managed by the International Union Against Cancer. Its aim is to serve all those active in Tobacco-Control, Cancer Control and Public Health, using instant modern technology. To join the GLOBALink listserve, fill out the membership application form at <http://www.globalink.org/globdemo/>

Print

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Provincial Resource Centres

Council for Tobacco-Free Ontario (CTFO)

The Council for a Tobacco-Free Ontario (CTFO) is a volunteer-directed, not-for-profit organization whose mission is to eliminate tobacco use in Ontario. It was established in 1975, and its members consist of organizations, associates, individuals and local councils on smoking and health. CTFO is also a Resource Centre of the Ontario Tobacco Strategy. The Council for a Tobacco Free Ontario supports local councils on smoking and health, World No-Tobacco Day, National Non-Smoking Week, public issues and advocacy. It produces materials on prevention, cessation and protection and is a promoter of the 'Smoke-free class of 2000' campaign.

If you want information on the local council in your area, please e-mail CTFO or call at.

Alwyn Robertson, Executive Director
60 St. Clair Avenue West, Suite 604
Toronto, Ontario M4T 1N5
Tel. (416) 962-2424 / Fax. (416) 962-6464
E-mail: ctfo@web.net
<http://www.opc.on.ca/ctfo>

The Program Training and Consultation Centre (PTCC)

The Program Training and Consultation Centre (PTCC) is a resource centre of the Ontario Tobacco Strategy and is funded by the Health Promotion Branch, Ontario Ministry of Health and Long Term Care. It provides training and consultation services to enhance the capacity of Ontario communities to implement effective community-based tobacco use reduction strategies. Training and consultation supports cover a variety of topics, including: program supports for the Ontario Tobacco Control Act, environmental tobacco smoke and bylaw development, strategic planning, smoking cessation and stages of change, implementing community awareness campaigns, reaching the hard-to-reach tobacco user, teen smoking cessation, women-centered smoking cessation, and environmental tobacco smoke in home environments.

For more information call 1-800-363-7822 (Ontario only) or contact:

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E-mail: nevalaja@rmoc.on.ca
<http://www.ptcc.on.ca>

Other Tobacco-Focused Organizations

National Clearinghouse on Tobacco and Health

The National Clearinghouse on Tobacco and Health is a program of the Canadian Council on Smoking and Health in partnership with the National Strategy to Reduce Tobacco Use in Canada. It has an advisory committee structure with partners and experts as members. The Clearinghouse mandate is to provide information and networking services relevant to tobacco use prevention and reduction programs, projects, resources, and advocacy provides information and referrals relevant to Canadian tobacco and health initiatives to advocates, health educators, policy makers, program planners, resource developers and health professionals working to prevent and reduce tobacco use. The clearinghouse can be found on the web at <http://www.cctc.ca/ncth> or can be reached by phoning (613) 567-3050.

Smoking and Health Foundation (SHAF)

SHAF plays a primary support role in creating a supportive environment for the development of healthy public policy in Ontario related to tobacco use. SHAF and its partner organization, the Non-Smokers Rights Association, pursue their objectives by collecting background information and initiating primary research on key tobacco issues, such as fiscal policy to reduce consumption, tobacco industry economics, and tobacco industry misinformation techniques. This research is used to educate the public and shape public opinion on the tobacco issue, by providing data to the print and electronic media. SHAF research is also published in background memoranda, brochures, manual or pamphlet form for distribution among editorial boards, other news media, policy makers, the health community, concerned professionals, SHAF members and donors, and the public (as appropriate). They can be reached by phoning (416) 928-2900.

The Ontario Campaign for Action on Tobacco

The Ontario Campaign for Action on Tobacco (OCAT) was founded in 1992 to support passage of Ontario's *Tobacco Control Act* in order to reduce tobacco sales to minors, eliminate tobacco sales from drug stores and vending machines, and make more public places smoke-free. Since the Act's passage in November 1994, which accomplished many of these goals, OCAT has worked toward the passage of smoke-free workplace and public place by-laws throughout Ontario, does research on the costs of smoking and the impacts of second-hand smoke, and has assisted national health agencies in developing and implementing national tobacco control policies. They can be found on the web at <http://www.ocat.org/>, or can be reached by phoning (416) 340-2992.

The Ontario Tobacco Research Unit (OTRU)

The Ontario Tobacco Research Unit (OTRU) is a unit of the Centre for Health Promotion, University of Toronto, and a partner in the Ontario Tobacco Strategy. OTRU was established by the Ontario Ministry of Health and Long Term Care in 1993 to undertake a program of research, development and dissemination of knowledge about effective tobacco control programs and policies. The unit tries to ensure that existing knowledge is critically evaluated, summarized appropriately, and made available in the most useful form. It plays a key role in monitoring the Ontario Tobacco Strategy. They can be found on the web at <http://www.arf.org/otru> or reached by phoning (416) 595-6888.

The Advocacy Institute

The Advocacy Institute provides strategic guidance and counseling to health and tobacco control advocates in the United States. Their Tobacco Control Project serves as a laboratory for testing new advocacy skills and strategies. They develop and maintain SCARCNet, an electronic network for professional tobacco control advocates. Their website contains a wide variety of documents including resources and publications to assist with tobacco control advocacy. They can be found on the web at:
<http://www.advocacy.org/pub.htm>