CAMPAIGNING FOR CHANGE IN DEVELOPING COUNTRIES

The SEATCA Advocacy Fellowship Programme in Tobacco Control

Southeast Asia Tobacco Control Alliance (SEATCA)
July 2008
INTRODUCTION

Advocacy is inexpensive. When there is only a little money available, an advocacy campaign on a shoestring budget can still help move policy. Tobacco control advocacy in Southeast Asia has not reached the desired level, often leaving gaps between best practices, policy development and engaging with policy makers. There is also a tendency to confuse advocacy with public education. Many assume by simply creating public awareness or conducting public education, policy makers will automatically develop and implement stringent tobacco control measures. Meanwhile the tobacco industry’s efforts to delay, dilute, and undermine strong tobacco control measures are often not exposed and hence go unchallenged. The industry’s powerful influence on governments is also underestimated and best practices are not offered to policy makers in a timely manner. The tobacco industry with its enormous marketing budgets, buys large amounts of media coverage, thereby frustrating under-resourced governments and NGOs. But the availability of media advocacy – without cost – can be further utilised by those engaged in tobacco control.

In 2003 the Southeast Asia Tobacco Control Alliance (SEATCA) sought to meet these needs by conducting an advocacy fellowship programme aimed at training and pooling together a cadre of advocates. Through this programme, new advocates have been trained to carry out cost-effective advocacy to better utilise media, challenge the tobacco industry, effectively engage with policy makers and move tobacco control policy forward.

Over the year, forty-five advocates from seven ASEAN countries have completed the 1-year SEATCA advocacy fellowship programme, many of whom continue to actively conduct tobacco control in their respective countries. Several have risen to become key local advocates who are themselves now mentoring others in their countries. This report will describe the fellowship programme, outline cost-effective advocacy principles and relate some experiences of the advocates in the ASEAN region.

MAIN OBJECTIVE

To identify, train and mentor tobacco control advocates (fellows) and equip them with basic skills to carry out advocacy activities on a specific policy-related tobacco control project at the national level. The training and mentoring also enables the advocates to participate in tobacco control activities at the regional level.
SPECIFIC TRAINING OBJECTIVES

- To familiarise fellows with the basic principles of advocacy;
- To learn how to conduct a press conference, prepare for a media interview, meet with government officials;
- To address various tobacco situations - counter industry arguments with evidence, keep abreast with the latest industry tactics in the region, and be updated on the key tobacco control issues;
- To be able to search for the latest information on various tobacco control issues online services

QUALITY, NOT QUANTITY

The fellow is part of the larger international tobacco control community and participate in the overall activities being conducted there. SEATCA’s fellowship programme provides quality training through three face-to-face training sessions, opportunities to travel to international conferences, and online communication throughout the fellowship period to respond rapidly to urgent needs by the fellow.

Since 2003, SEATCA has trained three batches of advocates in the following countries:

- Myanmar
- Lao PDR
- Thailand
- Cambodia
- Singapore
- Indonesia
- Malaysia
- Philippines
- Brunei
- Vietnam
**SELECTION OF FELLOWS**

Potential fellows were identified from among tobacco control staff of local NGOs from the 7 ASEAN countries, namely, Cambodia, Indonesia, Lao PDR, Malaysia, the Philippines, Thailand and Vietnam. The final selection mechanism is based on consultation with tobacco control experts in the region and the SEATCA core group.

**RESOURCE PERSONS**

The fellowship has utilised resource persons from Asia and Australia to raise the profile of the region’s strength to develop its own advocates. The SEATCA team conducts the training often inviting selected experts from Thailand, Bangladesh, India, and Australia to act as resource persons:

**SEATCA Resource Team**

- Ms Bungon Ritthiphakdee, Director
- Dr Mary Assunta, Policy Development Advisor
- Dr Ulysses Dorotheo, FCTC Program Manager
- Ms Menchi G Velasco, Research Manager
- Ms Joy F Alampay, Communication Manager

**External Resource Team**

- Prof. Dr Prakit Vathesatogkit
  ASH Thailand
- Prof. Simon Chapman
  University of Sydney, Australia
- Ms Deborah Efroymsen
  Healthbridge, Bangladesh
- Ms Shoba John
  Healthbridge, Mumbai, India
- Mr Todd Harper
  VicHealth, Melbourne, Australia

**FACE-TO-FACE TRAINING**

Three face-to-face training workshops are held at the start, middle, and end of the project, starting with basic overall core training, leading to more intensive sessions based on feedback from advocates. Each training workshop is conducted over 2 days. Below is a description of the contents of the training programme.
A. Core Training

A1. Basic Principles of Advocacy

What is advocacy?
Public education is not advocacy. “Advocacy is used to promote an issue in order to influence policy-makers and encourage social change. Advocacy in public health plays a role in educating the public, swaying public opinion or influencing policy-makers.”

A2. Tobacco Control Basics

Best Practices in Tobacco Control

The scene is set by providing an overview of main tobacco issues in the region and globally. This is followed by specifying best practices in tobacco control:
- High, uniform taxation of tobacco products (65% – 80% of retail price).
- Comprehensive ban on tobacco advertising, sponsorship and promotion.
- Comprehensive smoke-free policy in public places.
- Specific, large graphic health warnings.
- Tobacco Control law (with penalties) is better than voluntary guidelines.

There are several tobacco control measures that can be adopted to reduce tobacco use, an integrated comprehensive approach produces the best outcome.

Countering tobacco industry argument

Participants are then briefed on tobacco companies’ strategies to delay, dilute, and oppose effective legislation. Some examples of these are:

1. Fighting comprehensive advertising, promotion, and sponsorship bans by:
   - maintaining they have a right to advertise to smokers, and insisting they don’t advertise to minors
   - maintaining point-of-sale advertising
   - sponsoring philanthropic activities under the guise of corporate social responsibility (CSR)

2. Opposing prominent graphic health warnings on 50% of pack surfaces with excuses that pictures are unnecessary, violate trademark laws, are costly, take more than 18 months to implement, and pose administrative problems.

3. Opposing ban on smoking in public places such as restaurants and night spots, by promoting “Courtesy of Choice” programs, ventilation solutions, and designated smoking rooms, and mobilizing third parties (e.g. hoteliers/restaurant association, media, tourism board) to argue on their behalf.

4. Opposing tax increase with the threat that it will increase smuggling.
The tobacco industry offers many more myths on why not to adopt stringent tobacco control measures. However these arguments are challenged and dispelled using evidence from best practices.

**Case scenarios and strategic responses to tobacco industry strategies**

Advocates are presented with scenarios comprising of tobacco industry tactics, and they are requested to respond with a strategy for advocacy activity. Some of the scenarios illustrating tobacco industry tactics are as follows:

- Circumvent advertising ban through brand stretching activities, and sponsorship of cultural, music and sports events.
- Maintain Point-of-Sale advertising as a right to communicate.
- Philanthropy activities / CSR among vulnerable communities – donations to victims of natural disaster and conduct reforestation programme.
- Create TV campaigns on Industry-sponsored Youth Smoking Prevention program, and get support from Ministers.
- Lobby government to delay and dilute strong legislation.
- Introduce innovative product and pack design to frustrate government action to ban misleading descriptor.
- Oppose ban on smoking in public places by introducing ‘Courtesy of choice’ thereby promoting accommodation of smoking, or introduce ventilation.
- Argue that tax increase will result in increased smuggling.
- Provide technical support to farmers and argue tobacco crops reduce poverty and are a source of livelihood for poor farmers.
- Set up meetings with government agencies to establish friendly relations, influence the tobacco control agenda and frame issues in industry favor.

**What’s out there: Accessing information on the Internet**

There is a large body of information available on the Internet on a variety of tobacco issues that can help advocates obtain information speedily. It is unnecessary to reinvent the wheel; new advocates don’t have to start from scratch. Some helpful sites are:

- SEATCA - www.seatca.org
- FCA - http://fctc.org/
- Globalink - www.globalink.org
- Tobacco Control Supersite - http://tobacco.health.usyd.edu.au
- WHO-Tobacco Free Initiative - www.who.int/tobacco/en/
- Economics of Tobacco (World Bank) - http://www1.worldbank.org/tobacco/
A3. Media advocacy

Media advocacy is a vital component of the training. It is important for tobacco control advocates to learn how to get the media’s attention and ensure the media runs stories that effectively delivers the public health message. Advocates should know as much as possible about precisely which media are the most likely to influence the key decision makers who need to hear their message. They must then develop strategic approaches to those media outlets.

The training provides basic tips on understanding the media, how to effectively utilise media, and working with journalists to increase coverage of tobacco control. Advocates are taught to make themselves visible to the media, frame their issue, make their issue newsworthy – advocates should be thinking, “How can I present the journalist with a good ‘newsworthy’ story?” Advocates should be proactive, creative and informative.

Tips on understanding the media

1. Media mapping, know which newspaper to send – relevant section
2. Maintain a contact list of journalists’ phone numbers, and strengthen personal contact with journalists
3. Proactive approach, choosing the right time
4. Choose the right media outlets
5. Information must be provided in a timely manner and the sources credible
6. Make yourself visible to the media

Practical guidelines for writing for the press

1. Your press release should follow the inverted pyramid style of writing, where the paragraph, (the lead), should be the most powerful followed by supporting information to illustrate; use quotes if possible; finish your press paragraph about your organization.

2. Keep your sentences and paragraphs short and use plain language, avoid acronyms or jargon; keep your press release short, one or two pages.

3. Assign responsibility to the corporate and government.

4. Localise the issue and present local situation. Give a human interest angle that will get public response: “Something must be done!”

5. Present a solution: highlight one main recommendation.

6. Use media bites or sound bites, for example on the light and mild issue, you can say: “Smoking lower tar and nicotine cigarettes is like jumping out the window of a building on the 14th story instead of the 19th story”.

7. Keep the press deadline; you may want to call the reporter to make sure that he/she has received your press release.

Preparation for a TV/radio interview

1. Be prepared: know your audience.

2. Stay on the message: know what you want to say and say it concisely.

3. Keep it simple: make only 2-3 main points.

4. First impression counts: dress smartly, and start the interview by stating your conclusion first.

5. You control the interview: If you do not wish to answer a question by the interviewer, agree with the interviewer that the issue is important, but go back to your key point.

6. Play it straight: If you don’t know the answer to a question, say it is not your area of expertise, and do not comment on areas outside your expertise.

7. Project positive body language: appear confident and composed and make direct eye contact with the interviewer.
Practical simulation exercise

Internal tobacco industry documents reveal that the tobacco companies too coached their executives on how to respond convincingly to public health arguments with pet answers. As recent as 2005, Philip Morris was training its executives in Manila how to respond to the following:

- Philip Morris’ marketing practices and the company’s desire for reasonable marketing restrictions.
- A government who believes that all tobacco marketing should be banned, and the WHO recommendations for a ban on all tobacco advertising.
- Children playing with Marlboro branded Formula 1 toy car and why this was allowed in Asia.

Simulation exercise for advocate include the following:

a. ‘Press conference’: Practical training is provide to help advocates frame their arguments in a convincing manner when speaking to the media. A simulation exercise is conducted where participants participate in a ‘Press Conference’.

b. ‘Communicating with government’: Often the Ministry of Health is challenged by other departments on its intentions to pass tough tobacco control measures. In such situations advocates need to present suitable evidence to challenge such opposition. Simulation exercise to help advocates prepare for such meetings is also conducted.

A4. Planning an Advocacy Project

A small seed grant is given to the fellows to carry out an advocacy project over a 1-year period, with an emphasis on conducting cost-effective activities. Advocates are encouraged to select projects that will advance policy focused on priority tobacco control issues that will strengthen national activities in his/her country. For example, projects that focus on main priority policy areas are: ban on tobacco advertising & sponsorship activities, establishing smoke-free public places, adopting graphic health warnings on cigarette packs, strengthening tobacco control legislation, and FCTC ratification. Proposals must have advocacy elements – such as utilizing the media, lobbying government to advance tobacco control, and mobilizing support from other NGOs.
To help plan an advocacy project, there are 9 questions that will point fellows in the right direction:

• **What** is your policy objective?
• **Who** is your target?
• **What** is your message?
• **Who** is your messenger?
• **How** to ensure your message reaches the policy maker?
• **How** can you utilise the Media effectively?
• **What** are the strengths and weaknesses of your opposition’s position?
• **Are** there other voices you can use to support you?
• **What** is your time frame?

**B. Advanced Training**

The second training is more focused on specific issues that advocates are working on, and aims to provide them with additional information, advocacy tools, and ideas to further improve local efforts. At the training workshop each fellow presents how they are conducting their activity, the outcome, the difficulties or obstacles they are facing, and what further assistance they need. The group discusses whether their campaign has hit or missed the target, and if their activities are getting the attention of the policy makers. The group also addresses ‘emerging’ issues, how to deal with these and how to maximise media opportunities.

The training focuses in greater detail on the issues that cover the fellows’ projects. It addresses challenges facing fellows and includes media training. Some of the specific discussions include the following:

1. Achieving Smoke-free public places: Complete ban vs Accommodation – the legal arguments and practical solutions.
3. Specific advocacy effort needed for moving tobacco control legislation.
4. Tackling industry Interference in advancing tobacco control.
5. Developing Media skills.

A fellow presenting an update of her project.
C. Fine Tuning Advocacy

The objective of the third and final training workshop is to:

- Showcase fellow’s advocacy project
- Provide additional skills on specific areas
- Exchange ideas
- Learn from each other’s experience

The training focuses on analysing in greater detail the issues which cover the fellows’ projects, future challenges and further media training:

- De-mystifying complex tobacco control issues, such as addressing what compromises can be made for various issues, eg: in smoke-free public places – how to apply incremental steps to achieving this control measure.
- Next steps in advertising ban – such as display bans
- De-mystifying legal language in tobacco control law, such as compulsory Vs optional, should Vs shall, may Vs must
- Tackling specific industry interference strategies in individual countries

FROM FELLOWS TO LEADERS

Through the course of the fellowship programmes, advocates have emerged as local leaders. They have also participated in subsequent training programmes as resource persons relating their experience as fellows.

Harnessing the Vietnamese Media for Policy Change

Dr Pham Thi Hoang Anh, HealthBridge (previously PATH Canada), Vietnam Advocate, 2003

Policy Objective: Media advocacy in supporting FCTC ratification and implementation in Vietnam, March 2004

The Fellowship supported PATH Canada to run an effective media advocacy campaign for the implementation of FCTC in Vietnam. All planned activities were successfully carried out.
“I had the chance to attend many workshops where leading tobacco control experts provided a comprehensive introduction to tobacco control advocacy. We also had the chance to learn from the experiences of other countries in the region.”

“The fellowship enabled me to organize my own media workshops where I had to make presentations to the journalists and editors. This helped me to further develop an in-depth knowledge in tobacco control and improve my own advocacy skills. I had to develop fact sheets for the media; so my colleagues and I learned to select appropriate topics and information; putting them in a format and a language that easy to be digested by the media and the public.”

**Activity 1: Organising media workshops and seminars**

We worked together with the Communist Party’s Commission for Ideology and Culture and organised two training workshops for media personnel in Hanoi (with 50 participants) and Ho Chi Minh City (40 participants) in May and June, 2004. We also held a meeting with editors-in-chief of newspapers, magazines, radio and TV stations on the occasion of the National Tobacco Control Week 2004. The workshops and meeting covered various topics of tobacco control such as the burden of tobacco on health and economics, introduction of the FCTC, advocacy for FCTC ratification and clarification of “myths and facts” in tobacco control.

**Activity 2: Developing a media network**

We have developed and maintained regular relations with the Press Department of the Commission for Ideology and Culture and have in record about 80 media personnel, and about 50 media organizations located in Hanoi and Ho Chi Minh City. To date, we have produced and delivered 13 factsheets on tobacco control and updated information on FCTC ratification and implementation to media personnel. We also collaborated with reporters collecting information on tobacco control to produce news articles and TV programs on tobacco control. As a result, more than 120 articles were produced using our information, half of which referred to FCTC ratification and implementation. Almost all of the articles were published free of charge.
Activity 3: Media Surveillance
Media surveillance was conducted on a daily basis. The media officer has developed a database containing more than 400 articles on tobacco control issues and the tobacco industry. About 10% of the articles referred to activities of the tobacco industry and their philanthropies which are considered negative to tobacco control in Vietnam. About 3% of the articles showed neutral attitudes toward tobacco control and tobacco industry.

Activity 4: Media Alert and Communication
Based on the daily media surveillance, we were able to quickly detect any articles negative to tobacco control and respond. Whenever we found articles violating the regulations on banning cigarette advertisement or tobacco sponsorship, we informed to the National Committee on Smoking and Health, the Vietnam Public Health Association and the Press Department of the Commission for Ideology and Culture. These agencies will issue warnings or work with the Ministry of Information and Culture to fine the violating newspapers. Regarding incorrect reports, we sent letters to chief editors of the newspapers, clarifying that such kind of articles could have negative effects to tobacco control efforts in Vietnam. We also reported negative articles to the Vietnam Tobacco Control Working Group in the bi-monthly meetings.

We were able to achieve our objective and the fellowship programme has assisted us in the following way:

1. Provide more information on FCTC and its value to tobacco control in Vietnam to media and public.
2. Improve the quantity, quality and accuracy of reporting on tobacco issues by the media.
3. Respond to opportunities to advocate for tobacco control through the media.
4. Improve the understanding and support for tobacco control issues by members of the press.
5. Increase public awareness and understanding of tobacco control issues.

Dr Hoang Anh says, “The work started through this fellowship project will continue into the future as a vital part of HealthBridge’s activities in providing support for journalists. The building up of the network of journalists and ongoing industry surveillance has been an important way to educate the public, support progressive government policy and keep tabs on the tobacco industry.”

According to Dr Hoang Anh, “Participating in tobacco control advocacy will help the leaders in our region become aware about the size of the tobacco problem, issues in the region so that they can develop policies that can be easily agreed between countries. The success in one country will put pressure on the leaders of other countries to adopt the right policies.”
The Messenger is the Message in Indonesia

Dr Widyastuti Soerojo, LM3
Advocate 2005

Policy objective: Smoke-free policy in Cirebon City, through development of Local Government Regulation on Smoke Free Area in West Java Province

Dr Soerojo participated in the second fellowship programme, July 2005-Dec 2006] A step by step course of action is provided to illustrate the flow of this project in obtaining a local government order/regulation for a smoke-free city.

August-September 2005
- Internal meeting and prepared the materials
  Phone conversations with Provincial Health Officer supervising Smoke Free Policy (1st Messenger).

November 10, 2005
- Meeting with the 1st Messenger who agreed to visit the Cirebon Head of City Health Office beforehand.

December 2005
- Courtesy call to the Head of Cirebon Health Office (2nd Messenger) to advocate for smoke-free policy by linking advocacy message with local pride 2nd Messenger to reach the Mayor.
  - Identify the most influential leader / NGO in town ⇒ Prof. Ali, Chairman of FORKASIH NGO ⇒ prospecting for 3rd Messenger.

January 25, 2006
- Internal health sector meeting to obtain commitment.
- Prof. Ali (3rd Messenger)’s meeting with the Local Parliament (Chairman of Commission E).
- Planning for Inter-sector meeting in February 2006.

February 2006
- Extra ordinary inter-sectoral meeting: organized by Local Government Office – held at City Hall and jointly chaired by Deputy Mayor and Chairman of Commission E of Local Parliament.
* Local policy makers made a public statement committing to Smoke-Free Area in Cirebon by end of 2006.
* Press conference and good media coverage on the announcement.

**March – July 2006**
* Drafting of the local Smoke-Free Regulation and follow-up discussion.

**August 7, 2006**
* Multi sectoral meeting at Cirebon Health Office to discuss the Draft Policy – to iron out concerns about “total smoking ban” in indoor public and work places.
* The meeting decided to go with the option of a Mayor Order on SF Area because it is faster than having a Local Smoke-Free Act (as proposed by local parliament) which would take longer process.
* Launching was scheduled between Sept 4 and 7, 2006.

**August 21, 2006**
* Deputy Mayor announced through a Press Conference:
  * Mayor Order on Smoke-Free Area was a transitory process to Local SF Act.
  * Confirmed total smoking ban in all public places.
* Initiative from local radio station: conducted interactive dialogue with the public.
* Initiative from several malls to implement Smoke-Free policy ahead of time.
* Local Ministry of Education Office issued Internal Order (SE) on smoke free schools.

**Between September and November 2006**
* Prof Ali and 20 university students followed up with the Mayor’s office to keep up pressure on ensuring the decision is implemented.

**November 13, 2006**
- Public discussion at City Hall

Public discussion at the City Hall Organized by Local Government Office.

- Road show: 60 students of Islamic Institute distributing flyers and posting sticker in public transports.

Students of Islamic Institute participated in distributing flyers/stickers and road shows in 5 cities. Involvement of Vice Mayor.

**Outcome of Project**

Policy objective of the project was achieved: Mayor’s office issued the Letter of Order on Smoke Free Area.

Lessons learned:
1. Getting the right Messenger, at the right stage, for the right purpose.
2. Framing of the advocacy message – linking it with local pride.
3. Intensive monitoring and readiness to provide technical assistance in any form needed by local authorities.
Engaging Cambodian Buddhist Monk in Advocacy

Dr Mom Kong, Tobacco or Health Program, ADRA Cambodia Advocate 2003

Policy Objective: To get Cambodia to ratify the FCTC ratification

Project Activities

1. **NGO Meeting on Advocacy for FCTC Ratification:**
   To garner support from civil society, a meeting was organized which was attended by 30 NGOs and 10 media agencies. The NGOs supported the appeal to call for Cambodia to ratify the FCTC and signed on a letter of recommendation during the meeting.

   Among the NGOs, 3 high profile NGOS played a significant role providing support for greater tobacco control: CNAC (Cambodia NGOs’ Alliance) is a local network mostly working in community; MEDICAM (NGOs Membership Active in Health Sector) is a well-known alliance, and recognized by policy makers in its advocacy works. MEDICAM helped in organizing the meeting for NGOs and advocate them to support tobacco control. Cambodia Defender Project (CDP) specializes in law system and they helped draft the letter of recommendation to the policy makers and also helped clarify the process of ratification at the NGOs meeting.

   More NGOs signatures (29) were later added to the letter on a follow-up activity. The letter of recommendation was sent to the chairman of the National Assembly, the prime minister, and the chairman of Inter-Ministerial Council. Copies of the letter were distributed to well-known media agencies and NGOs for their publication and broadcast and for advocacy.

2. **Advocacy through media:**
   A media advocacy plan over several months was launched and this resulted in at least 10 radio talk-shows and interviews, 3 TV talk-shows and interview being aired. These talk-shows and interview focused on health and social problems cause by tobacco linking tobacco with poverty and public health problems.
3. **Key Messenger for special advocacy**

ADRA conducted three separate meetings with the Supreme Buddhist Monk in Cambodia to enlist his support for tobacco control. Through continued advocacy to him, ADRA was able to obtain his backing for FCTC ratification. This was crucial turn-around for Buddhist monks, as in the past he used to support tobacco farming. He became the key messenger for tobacco control and publicity around his support helped to give tobacco control much higher profile.

4. **Advocacy to key government official**

A special briefing was conducted for the Under-Secretary of State of Information. He is the representative of the Ministry of Information to the Inter-Ministerial Council. Information and evidence was provided, such as explanation about the FCTC and handout on the research evidence on advertising ban and consumption reduction, and how media agencies in Cambodia now can survive without tobacco advertising revenue.

**Usefulness of the advocacy fellowship**

Dr. Kong said, “The advocacy fellowship was useful to my personal development. I learnt advocacy concepts and strategies in the fellowship training programmes, and I applied them in the real situations. I believe that I have become a more effective advocate through this program. As an advocacy organization, the fellowship program adds more value and effectiveness to the current project activities. It is a synergic effort.”
Philippines: Legal Action for Graphic Health Warning in the Philippines

Atty. Deborah Sy, FCTC Alliance, Philippines

The objective of the project is to create an environment in the legislative department that is conducive to passing a law on Graphic Health Warnings (GHW).

The project was achieved primarily through media advocacy on the filing of criminal cases against Philip Morris for violations of the law on textual pack warnings. Media exposure on the pack warning issue provided advocates with an opportunity to introduce graphic pack warnings that are available in other countries. More importantly, the legal procedure exposed loopholes in the law as well as the tobacco industry interference in the Inter-Agency Committee on Tobacco (IACT) that led to various anomalies in the administration of the law. Since evidence used in the cases form part of public records, these have been successfully used in:

- Confronting the IACT/ challenging IACT to take a position.
- Emphasizing that the graphic health warning bill is a health bill that is exclusively within the Department of Health’s jurisdiction.
- Convincing the House that the proposed graphic health warning bill is a health issue that should be tackled exclusively by the Committee on Health, unlike other tobacco control bills that were heard jointly with other interests, such as trade or agriculture.
- Requesting for the Senate to look into the implementation of the law and to pass a graphic health warning bill.
- Justifying the Senate’s recommendation to remove the tobacco industry from the IACT.

The tobacco litigation also drew the interest of a number of paralegals and lawyers into the advocacy. Notably, the media advocacy skills, the knowledge (about tobacco control and health warnings), and other resources provided by SEATCA prove indispensable in this initiative.
Feedback from 2006 fellows

How helpful has the Fellowship training programme been? Here is what the fellows have to say.

**Cambodia**

Dr Sung Vinntak

I received more information on tobacco control issues and advice from more senior advocates. I am also able to work better with media and conduct advocacy with policymakers, which was a new experience for me. Problems encountered include lack of time for the project (having to divide time between tobacco control and other non-TC work) and the language problem/need for translations.

**Indonesia**

Ms Itsnaeni Abbas

I learned how to conduct advocacy with parliamentarians, reaching them even with their very tight schedules and disinterest, and providing information to educate them on TC issues.

Mr Tulus Abadi

I learned how to conduct advocacy with parliamentarians, reaching them even with their very tight schedules and disinterest, and providing information to educate them on TC issues.

The fellowship helped put the focus on TC among the many issues facing our organization. It provided better in-country networking with other NGOs. The main drawback in my opinion is the language barrier, such that those with a poorer grasp of English, even if they are highly skilled, are unable to maximize the resources made available.

Ms Sri Nurwati

I gained more confidence and support, became more optimistic, realized that I am not working alone, despite the obvious difficulties (tobacco control is not a priority for Indonesia government; Indonesia is very big country, and tobacco agriculture is a major industry. I also developed good personal relationships with SEATCA and the other fellows.
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**Laos PDR**

Dr Khatthanaphone Phandouangsy (Tun)

I learned much, because I had no prior experience with TC advocacy. I think the training program is very good, does not need changes, although the funding may be a little limited.

Dr. Angkha Ounavong

I had no prior advocacy training, so the training developed my knowledge and skill for TC advocacy. I learned how to approach and conduct advocacy with decision makers, learned to frame or translate scientific papers into policy, learned to work with media, ministries, and other NGOs, learned to create a strategic plan.

Suggestions: We need continuing technical support and funding for sustainability and future projects. It would also be nice to be exposed to tobacco control efforts outside the formal setting, to see it in practice (e.g. how it is implemented in Thailand).

**Malaysia**

Mr Yong Check Yoon

I was able to form a regional network and could ask for assistance when needed. I also learned what works and doesn’t work and to think systematically (9 steps). I also overcame my fear of speaking in front of an audience. I did not encounter any problems with the training. I think the program is excellent; it is interactive and not regimental.

Dato Hatijah Ayob

The program updated my knowledge on tobacco industry’s strategies and how to counter them, and this puts the responsibility on fellows to share this knowledge with others without lessening the impact of the message learned. The training also helped lessen my phobia with the press and taught me the proper format for media reports.

I think the program can be utilized by involving younger people with more energy; so that these youth can conduct advocacy with the younger generation.
Feedback from 2006 fellows

How helpful has the Fellowship training programme been? Here is what the fellows have to say.

**Thailand**

Ms Churunee ichayakunmongkul (Yin)

I received more information on tobacco control issues and advice from more senior advocates. I am also able to work better with media and conduct advocacy with policymakers, which was a new experience for me. Problems encountered include lack of time for the project (having to divide time between tobacco control and other non-TC work) and the language problem/need for translations.

**Vietnam**

Dr. Nguyen Tong Khoa

The fellowship helped train me, and gain experience in conducting advocacy, especially with high-level policy workers and other government leaders. The training course is very good, complete.

Ms Tran Thi Kieu Thanh Ha

There was peer-to-peer learning from other fellows, applying some of their strategy to our country. It provided me with advocacy skills (make presentations) and the opportunity, via funds, for applying skills learned. The formal sessions could be given more time, i.e. more time for discussion between participants.

Dr Nguyen Ngoc Bich

Although it is part of my daily work, advocacy seemed new because I had no prior formal training. Training was applicable via the project, so learning by doing, not just theory. Support from SEATCA is also helpful with tobacco control in my own country. Most important thing is that we can learn from other participants, e.g. how to outsmart the tobacco industry because of others’ experience.

The training could be more intensive: in addition to presentations etc, maybe actual visit to Thaihealth or other host country institution. It would also be helpful to learn from pioneers on their starting/pioneering experience.
REFERENCES:

i Best practices have been borrowed from a range of advocates/institutions such as Prof Simon Chapman’s Advocacy training programme, University of Sydney; Mike Pertschuk, The Advocacy Institute, USA, Deborah Efroymsen, Shoba John, Health Bridge, and adapted to suit the ASEAN situation.

ii Smoke Signals II: Strategic Planning for Strategic Communications

iii Ibid

iv Framework Convention Alliance Media Advocacy Tips, http://www.fctc.org


vi DR Tuti Soerojo has since joined the Indonesia Public Health Association, and currently is the Director of the Tobacco Control Support Centre.

vii Cirebon City is 3 hours away from Jakarta where the advocate was located

About SEATCA

The Southeast Asia Tobacco Control Alliance (SEATCA) works closely with key partners in ASEAN member countries to generate local evidence through research programs, to enhance local capacity through advocacy fellowships, and to be the catalyst in policy development through regional forums and in-country networking.

By adopting a regional policy advocacy mission, it has supported member countries to ratify and implement the WHO Framework Convention on Tobacco Control (FCTC). SEATCA has been in existence since 2001 to act as supportive base for government and non-government tobacco control workers and advocates in the SEA region, primarily to Thailand, Malaysia, Cambodia and Vietnam. Currently, the alliance has formally extended to three more countries of Indonesia, Lao PDR, and the Philippines.

SEATCA was awarded the WHO Western Pacific Regional Office’s 2004 World No Tobacco Day Award in recognition of its major contribution to tobacco control in the region. “SEATCA has emerged as a major catalyst for advances made in tobacco control in the South East Asia Region, especially with regard to policy and legislation.” —Dr. Shigeru Omi, Regional Director for the Western Pacific Regional Office at the presentation of 2004 World No Tobacco Day Awards
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“Working together to promote the implementation of effective evidence-based tobacco control measures in Southeast Asia”

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