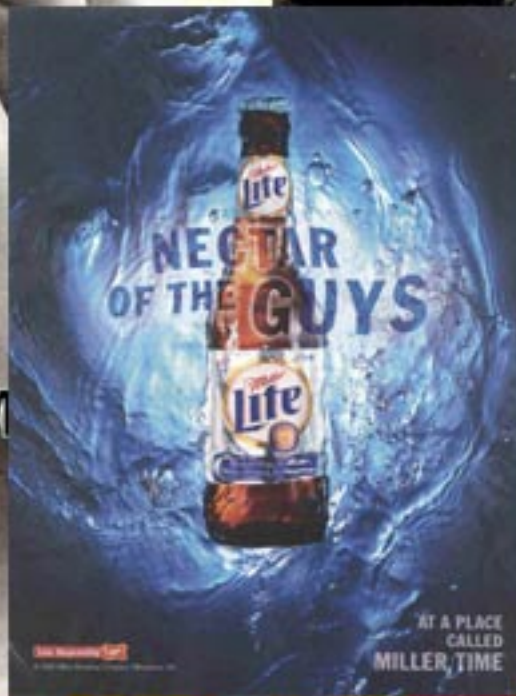


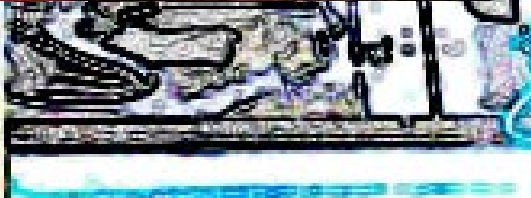
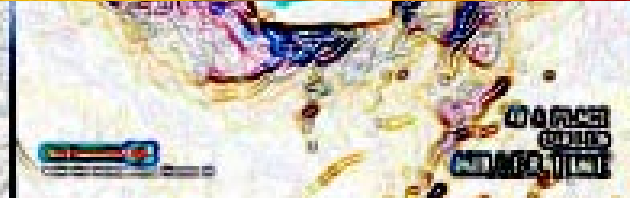
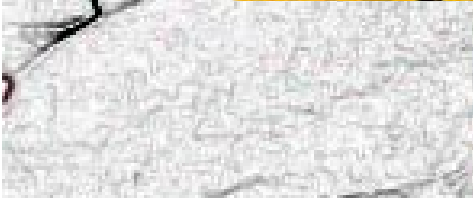
# Media Advocacy



UR DAYDREAM



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# Media Advocacy

*Sandra A. Hoover, Ph.D., M.P.H*

## Technical Assistance Research Publication

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# Media Advocacy

*"...the news is far too powerful a force to be ignored. Unless we use our creativity and commitment to participate in the public debate, our perspectives will be left out. Our diverse voices will not be heard, and our faces not seen. Our issues will be shaped by others, and our goals will remain a private dream harbored by a select few rather than a coherent vision that can be understood and shared by others." Lawrence Wallack, News for a Change, 1999.*

## Introduction

The purpose of this publication is to assist prevention professionals in developing strategies to address the problems associated with high-risk and underage drinking in their communities. This paper describes key concepts in media advocacy, how media advocacy fits in the framework of a systems approach, and practical media advocacy techniques.

Media advocacy is the strategic use of media to gain public and policymaker support for policy goals. Media advocacy also contributes to community norms change. It sets the public agenda and advances policy-based solutions. Media advocacy frames issues to emphasize that problems are a shared community responsibility, and as such are amenable to change. Finally, it empowers community members to take control of conditions affecting public health.

Media advocacy should not be confused with social marketing, public education, or public relations. Social marketing targets the individual based on the premise that if individuals have appropriate information, they will change their behavior. Thus, social marketing in public health uses the media to deliver public education/awareness messages that inform people about health risks and healthy behaviors.

The goal of public relations is to create a positive public image of a person or organization and their activities. Public relations goals may conflict with public health goals, particularly when an organization considers that it is not in their best interest to discuss problems; e.g., a university's binge drinking rate.

Media advocacy's goal is not individual change, but community change. The focus is less on increasing knowledge about personal risk factors and more on changing risky social conditions through public policy. Media advocacy stresses social accountability, while public education approaches focus on individual responsibility (Wallack and Dorfman 1996).

## Environmental Prevention

A social marketing/public education approach was the predominant conceptual model in 1964 when the first Surgeon General's report on the health risks of smoking was published. The expectation was that, armed with this information, smokers would quit, few would start, and cigarette smoking would soon be a thing of the past. To paraphrase Matt Myers of the National Center for Tobacco-Free Kids, public health



professionals went home, thinking their job was complete; the tobacco industry went to Congress. Thus, the tobacco industry ensured they could continue to market and sell their product with few regulations. True, smoking rates in the general population did go down, for a while. However, the tobacco industry aggressively marketed tobacco to youth and succeeded in stopping any significant tax increase or serious congressional debate on tobacco; the decline in adult smoking rates stalled, and youth smoking rates rose.

As the above example illustrates, the best efforts to help people change unhealthy behaviors are undermined by countervailing forces in the environment. Changing individual substance use behavior through public awareness campaigns, school health education, counseling, and treatment is not sufficient. These approaches do not address the social and cultural conditions that encourage or facilitate unhealthy and unsafe behavior. Clearly, people need to have good information on which to base their choices, but adopting healthy behavior is much more complicated than that.

Thus, while underage and binge drinking education campaigns stress the dangers of alcohol use, advertisements and the media portray drinking as “cool,” fun, sexy, and glamorous. Young people report they have easy access to alcohol, either buying it themselves or getting it from adult providers. Social attitudes and behavior that treat youth drinking as a rite of passage, place a lower priority on enforcing alcohol policies, and equate socializing with alcohol consumption, often to excess, send mixed messages and weaken prevention efforts.

Community conditions that increase the risk for underage and binge drinking fall into four basic categories:

- **Price.** Low taxes, price discounts on drinks, and sales all keep the price of alcohol low, encouraging heavy drinking and making alcohol easier for young people to afford.
- **Access and availability.** Underage drinkers report that alcohol is easy to get, whether they purchase it or an adult provides it to them. Alcohol is available in a wide variety of places in the community. Certain areas have a high density of off-sale and on-sale alcohol outlets (often in low income or ethnic minority neighborhoods or college areas). Off-sale outlets, where alcohol is consumed off the premises, include supermarkets, convenience stores, and gas stations. On-sale establishments refer to those places where alcohol is sold and consumed on the premises such as restaurants, bars, and nightclubs. Alcohol may also be sold and consumed at sports stadiums, concert and other entertainment venues, fairs, parades, festivals, recreational settings, and many other places – even laundromats in some communities. The time at which alcohol may be sold also affects availability; thus, some communities have determined whether to allow alcohol sales on Sundays and holidays or after certain hours.
- **Advertising and promotion.** Alcohol advertising is widespread through a wide variety of broadcast and print media. The entertainment media enhance social acceptability of alcohol and tobacco use, and frequently portray their use as more extensive than in reality (ONDCP 1999). Sponsorship of sports, community festivals, and arts events is another vehicle for reaching various audiences. Advertising content, as noted above, glamorizes drinking and



reinforces the concept of alcohol as intrinsic to social interaction. Advertisers also use product placement in movies and television and music videos to promote their products by paying or offering products free of charge to be displayed.

- **Community norms.** Norms include weak and/or unenforced laws and social norms that promote high consumption and minimize the risks associated with underage and abusive drinking.

Those who have a stake in the status quo already use public policy to protect their interests such as keeping taxes on alcohol low, challenging restrictions on advertising, and promoting legislation that increases the availability of alcohol (e.g., permitting gasoline stations to sell alcohol). Likewise, community members can also advocate for changes in laws, regulations, and other policies, in this case to improve health and safety. Public health advocates, for example, have sought policies to restrict or ban price discounts; limit the number of alcohol outlets; require server and retailer training; limit placement of alcohol advertising near schools, churches, and day care centers; and increase the number of alcohol-free settings, events, and activities. They have advocated for stronger enforcement of alcohol regulations and made prevention of hazardous drinking a high priority on the public agenda.

Despite perceptions that the public opposes additional laws or restrictions, there is a great deal of public support for alcohol policy. The University of Minnesota's Alcohol Epidemiology Program, the Center for Science in the Public Interest (CSPI), and the American Medical Association have all conducted public opinion polls concerning public attitudes towards alcohol policies. These polls consistently report high levels of public support for policies restricting public drinking, requiring responsible beverage service training, penalizing adult providers, and raising taxes on alcohol, among others.

## **Integrating Media Advocacy into the Environmental Prevention Model**

*"You can't have a media strategy without an overall strategy." (Wallack et al. 1999)*

A valuable tool in creating environmental policy change, media advocacy is part of a comprehensive approach to community change. The environmental prevention model provides a framework for communities to create effective and sustainable change. Key elements of an environmental prevention model are community organizing, data collection and application, policy, media advocacy, and enforcement.

While media advocacy is an essential element in the environmental prevention model, media advocacy is a strategy, it is not the strategy. It is a tool to help achieve public health policy solutions. The next section offers suggestions on how to integrate media advocacy with other components in the environmental prevention model.



## Data

This component of the environmental prevention model focuses on the strategic use of data to identify the problem, develop strategy, plan and implement interventions, and monitor progress. Data collection and analysis should be ongoing throughout the project. Initial collection of data to establish baseline will be invaluable in measuring outcomes later, but as the project unfolds, you can use data to fine tune strategy, craft media messages, and support the rationale for policy options.

Media advocates use data as the basis for their “story,” to help visualize the seriousness of the issue, its scope, and impact. However, the recitation of data can be deadly. To bring the story alive and make it more compelling, use “social math” or “creative epidemiology,” – creative in the sense of translating statistics into something people can relate to. The following classic examples from the ATOD field illustrate the use of creative epidemiology.

*The annual death toll from smoking exceeds the combined annual death toll from all accidents, suicides, drug use (both licit and illicit), homicides, murders, and AIDS. It is as though two fully loaded jumbo jets crashed every day of the year with no survivors. (National Cancer Institute.*

<http://dccps.nci.nih.gov/TCRB/TRIP/html/intro.html>

*More children ages 9-11 know the slogan associated with the Budweiser frogs (“Bud-weis-er”) than that for Smokey the Bear (“Only you can prevent forest fires” or “Don’t play with matches”) or Tony the Tiger (“They’re Grrreat!”) (Laurie Lieber quoted on the Alcohol-Related Injury and Violence Project-ARIV website).*

A more recent example shows Budweiser’s continuing impact, in this case in the next older age group.

*Teens aged 12 to 19 ranked ads for Budweiser and Bud Light as number one when asked to choose their favorite television commercial in a spring 2004 study. Among the other brands ranked behind Budweiser in popularity in teens’ top 10 were GEICO, Pepsi, M&Ms and Nike ads. Ads for Miller Lite were eighth on their top ten list, and were favorites for more teens than ads for NFL, Blockbuster, Mountain Dew or McDonalds. (Center on Alcohol Marketing and Youth, 2004).*

These examples provide memorable comparisons that people can easily grasp, and, particularly with the first example, have an emotional impact. Using local references and statistics makes it even more meaningful; for example, a statement such as “the number of youth in Centerville who have used alcohol in the last 30 days would fill the Center High School bleachers.”

## Community Organizing

Research studies show that community coalitions are effective in addressing substance abuse. Coalitions serve several functions in bringing about community change. They



increase credibility by involving key stakeholders and community opinion leaders. Coalition members bring different perspectives, skills, and access to various community sectors and individuals who can help create change. Furthermore, having a broad-based community coalition counters concerns that a special interest group, one that does not truly represent the community, desires change. Community coalitions facilitate the adoption of changes in community norms.

In addition to enhancing credibility and access, community coalitions provide a wealth of talent and expertise that is invaluable in media advocacy. Typically, coalition members include prevention and public health professionals, youth, community-based organization members, public officials and law enforcement officers, members of the business, education, and faith communities, and military officials (in those communities with a military presence). It is important to ensure that the coalition reflects the ethnic and racial diversity in the community, is sensitive to cultural differences, and uses culturally appropriate communication strategies.

### **Policy/Strategy Goal**

Media advocacy does not occur in a vacuum. It is part of an overall community advocacy approach to advance a social or public policy initiative. Policy development is the heart of environmental prevention. Be sure you are clear about how policy will help you make the changes you need, whether and what kind of political action it will require, e.g., mandatory (laws, ordinances), or voluntary, the advantages and disadvantages of each type. Develop a strategic policy plan that addresses the following questions (adapted from Wilbur et al., 2003):

1. Who can make the change (city council, planning board, business owner)?
2. Who influences their decisions?
3. Why should this change be made?
4. What kinds of data and other information are needed?
5. What are arguments in favor? Against?
6. Who is likely to oppose?
7. How can you counter their arguments?
8. Do you have a media plan?
9. What actions will be taken?
10. Who will do them?
11. When?

Develop a media plan that integrates media advocacy activities with the strategic policy plan. The section on planning below provides more information on components of a media advocacy plan.



## Enforcement

Enforcement of policy is key to changing community norms and making long-lasting change. Media stories reporting enforcement and penalties applied can support the expectation that violators will experience consequences and at the same time reinforce community norms and values regarding public health policy.

In the Community Trials Project, researchers documented media coverage of alcohol-related issues, particularly drinking and driving. They found that media advocacy increased news generated by community members, in both print and broadcast media, and increased coverage of DUI enforcement, changing the public perception of likelihood of arrest for drinking and driving (Holder and Treno, 1997).

## Media Advocacy Techniques: Getting the Message Right

### Framing for access and content

According to Wallack et al., “the frame is the package in which the main point of the story is developed, supported, and understood” (1996:299). There are two types of framing: framing for access and framing for content. Framing for access is shaping the story to get media attention. This is important for two reasons. One, the media influence each other and together they influence the public. Second, the media are a major means to reaching key decision makers such as community opinion leaders, public officials, or other policymakers. Media advocacy experts suggest several ways to get media attention: the story is controversial, has a local angle on a national story, relates to the anniversary of a significant local or national event, or is of seasonal interest (Wilbur 2003:23-24).

Framing for content is shaping the story from the policy advocacy perspective with the goal of promoting the policy solution. This type of framing is more challenging. The media are already interested in public health issues and report them regularly so access is not generally a problem. How they typically frame their stories is the challenge. Media stories on public health or other social issues often focus on the individual, stressing personal accountability, and blame the victim for the problem. For example, college binge drinking stories are frequently in the media, particularly when there is an injury or death involved—visuals include partying students chugalugging alcohol. Focus is on the victim’s and his/her friends’ behavior, and college binge drinking generally. Reporting on issues like this tends to follow a formula, blaming the victim with the implication that only the individual needs to change, and offering no other solution.

The challenge, then, is to “reframe” the story to depict the social/environmental conditions that contributed to the problem and offer a solution to changing those conditions. Wallack et al. (1996:300) describe key steps in creating a public health frame. These steps are listed below, using the binge-drinking example cited above to illustrate how media advocates might reframe the story with the policy goal of ending the discounting of drinks.

- **Emphasize the social dimension of the problem.** Cheap alcohol is an invitation to drink more.



- **Shift primary responsibility away from the victim to those whose decisions affect these conditions.** Who has control? Bar owners who offer drink discounts. If the bar owners won't regulate themselves, who can regulate them? What about the role of the college newspaper that accepts ads that promote discounts?
- **Present policy alternatives as solutions.** There are several possible policy solutions in this example: bar policies against discounting drinks, newspaper policy to refuse ads offering alcohol discounts, City Council could pass an ordinance banning drink specials. Although there are several policy implications, it is important to focus on one policy goal to avoid conflicting policy solutions (voluntary vs. legislated) and subsequent dilution of efforts.
- **Make a practical appeal to support the solution.** Depending on the policy goal, call on either bar owners, newspaper management, or City Council members to implement the policy.

There are other policy outcomes in this story that would affect how the story is framed. For example, if the goal is to change advertising practices, media advocates could reframe the story to point out the high number of bar ads offering "all you can drink" specials in the college newspaper and urge the newspaper to eliminate ads for bars and drink specials. Alternatively, advocates could highlight the problem of adults who either sell or provide alcohol to underaged youth, advocating for better enforcement of sales to minors laws, responsible beverage service practices, or social host laws, depending on the policy goal.

Wilbur et al. (2003:19) provide examples of framing a message to eliminate tobacco company sponsorships of a community rodeo. Notice the themes for each of the frames:

**Sport, Not Spit**

This is an athletic event and the focus should be on the athletes, not on a product that stands as the antithesis of good health and physical fitness. Sports and tobacco just don't go together and the board needs to drop the tobacco contract.

**Industry Manipulation**

Big Tobacco is using our community to get more publicity and sell more products. We don't have to tolerate this — we should find new sponsors and drop the tobacco contract.

Frames should always define the problem, explain why it is important, and state the policy solution. In the rodeo example, the frame included the action they wanted the board to take.

Some communications experts recommend developing a message box or diagram to help visualize the key message points. The diagram can be in the form of a square or triangle representing the key message elements. The format facilitates the development of concise and clear messages that the speaker and audience will more likely remember. This is a good tool to prepare spokespersons and help them stay "on message."



## **Channels for Media Advocacy**

This section summarizes the various means advocates can use to get their message to the public and policymakers. Refer to the Reference section for sources that provide more details, strategies, worksheets, and templates that will help you create media advocacy materials for your issue.

### **Letters to the editor**

The editorial page is one of the most widely read sections of the newspaper. Writing a letter to the editor is an excellent way to communicate ideas to the public and policymakers and show support for an issue. If the letter is in response to a recent story, event, or editorial, it should be faxed or e-mailed within a day or two of the story's appearance.

### **Op Eds**

Op Eds are opinion pieces appearing in the editorial section of the paper. Local people who have some professional expertise or personal experience with an issue and who can provide a more in-depth analysis often write them.

### **Editorial Board Meetings**

Another way to get your issue on the public agenda is to meet with the newspaper editorial board to present your group's perspective on a problem, the proposed solution and its rationale. The goal is to get the newspaper to publish an editorial supporting your perspective. Meeting with an editorial board also provides additional contacts and can establish the group's credibility as a resource on this issue for future articles or commentary.

### **Media conference/event**

Holding a media conference or event is an effective means of drawing public attention to an issue, when used strategically. You can use events to announce a new initiative or present research findings or new data on your issue. Rallies and demonstrations are staged events that highlight the community's concern about problems in a more dramatic form, as a protest against action or inaction on a particular policy issue.

Content, speakers, timing, and location are all critical factors in a successful press event. If no media come to your event, this would be embarrassing to your coalition and a waste of time and resources. It could also damage your credibility.

Ensure that the event is newsworthy. Elements that stimulate media interest include controversial issues, a milestone event, anniversaries, seasonality, celebrity appearance, local connections, ironic situations, and injustices. Provide good visuals and media packets containing contact information, fact sheets, graphs/charts, photos, whatever is appropriate to help the journalists understand and present your perspective accurately and convincingly.



Choose speakers carefully. Include “authentic” community voices (“people who have experienced or have special knowledge of the problem”) as appropriate; e.g., a community leader who supports your policy, a youth who can speak about easy access to alcohol, a law enforcement officer, or others who can lend credibility to your issue and attract media interest.

Try to time the event, usually early in the day, so that journalists can meet their deadlines, particularly for television coverage. Hold the event in a visually interesting and appropriate place, but one that is not too difficult for journalists to get to easily and quickly. Some stories on cross-border drinking, for example, occur at the San Diego-Mexico border crossing.

### **Testimony at public meetings**

Another opportunity to get your message out is to have coalition members testify at city council, planning board, or other community meetings. Often media cover these meetings, allowing the group to reach both policymakers and journalists at the same time.

### **Talk shows/call-in shows**

Participation in a panel discussion or interview helps to get the message out and position your group as an authentic or expert source on this issue. You can reinforce or build on the message by having coalition members call in to support the perspective or present additional information not covered. Radio talk shows are good opportunities to reach different audiences.

### **Internet**

The Internet as a mass communication medium, a source of information, and a mechanism for advocacy activities has flourished in recent years. Refer to the References section for examples of websites that post information on alcohol policy issues, position papers, fact sheets, action alerts, and media advocacy tools.

Advocates also use the Internet to learn more about the opposition; for example, tracking alcohol or tobacco company websites for information on new products that appeal to youth and industry marketing strategies. Do not overlook youth as a resource. They are excellent sources of information on Internet advertising and promotion directed to them.

Media advocates may also use password-protected sites to strategize with each other, share tools and information, plan events, and post strategic plans. Not only is this a good resource for advocates in helping them achieve their own goals, but it can also serve to create synergy in a broader community of advocates. San Diego County established a website for their alcohol prevention providers with the goal of creating stronger regional cooperation and coordination. This website includes a variety of media advocacy tips and tools such as templates for op eds and letters to the editor. It also includes a message board for providers to exchange information on issues and solutions.

Some websites target specific groups. The Institute for Public Strategies in San Diego, for example, developed a website specifically for journalists to provide



information on alcohol policy issues, experts/spokesperson contacts, data, graphics, and video clips.

### **Paid media**

Media advocacy activities emphasize free or “earned” media exposure through news coverage rather than paid advertisements. The disadvantage of earned media is that you cannot control how media will ultimately portray the issue, when or if they cover it at all. Using paid media allows you to present your message as intended, control timing, target a specific audience, and reinforce other advocacy activities.

### **Media Relations**

Inventory the media in your community. Identify the print and broadcast outlets and determine whether they assign specific reporters to a health beat. However, do not ignore other areas that may be relevant to your issue; e.g., education, business, children’s issues, crime. Determine who their audiences are. Be sure to include media targeted to ethnic, neighborhood, business, and other networks relevant to achieving your policy goal. Do an assessment of media coverage and attitudes regarding substance abuse problems. Is the issue covered? In what way? Does the story focus on the problem only, without mentioning solutions? If solutions are proposed, are they environmental policy solutions? Do they blame the individual but ignore community conditions that may have contributed to the problems?

Become a reliable source for the media. Work with reporters to develop feature articles/stories; provide them with data, photos, and other graphics to enhance their story. Use visual information boards (VIBs) with facts, data, and photos as background for speakers at press conferences. Your VIB will appear in the media coverage, reinforcing the message. Prepare press packets with information that reporters can take away. Give them information on your project’s website, if you have one.

### **Spokespersons**

Discussion in previous sections has focused on assessing the media environment, the extent and quality of media coverage, planning and preparation of messages, and media strategies to reach the policy goal. Equally important is selecting the right messengers and helping them succeed. Be strategic when selecting spokespersons. Remember authentic voices. Determine who will speak on this issue. Choreograph an event that has multiple speakers—decide who speaks about what, how much time each speaker will have, and in what order to have the most impact. Avoid “talking heads” syndrome. Limit the number of speakers. Keep the presentations short and to the point.

Conduct spokesperson training to help speakers get the message across effectively. Practice the message frame. No matter how experienced they are as speakers, they still need preparation. If you feel you need professional help, try a communications expert from your local college or organization that has public relations expertise on staff. Someone who does leadership training can be a good source for spokesperson training as well. Communications experts can help you practice techniques to stay on message and avoid interview pitfalls. It is a good idea to videotape mock interviews and give feedback to the speakers, particularly as you begin the process of message development. Anticipate common questions and opposing arguments, and have



responses ready. The Alcohol Policy Solutions website lists some typical questions media direct to community representatives:

- Why are you here?
- What are you trying to accomplish?
- Whom do you represent? Any particular organizations?
- Why are you concerned about this issue?
- How does this issue affect you/your family, organization or business?
- This problem has existed for decades; do you really think it's going to change?
- What's new/different about this approach?
- Aren't you being anti-business?
- What's wrong with businesses that are acting within the law?
- Isn't the answer to just educate people?
- Why are you supporting officials for doing something they should have done anyway?

### **Monitoring progress**

It is essential to monitor progress throughout your project. Evaluation is not a task that should be left to the end of the project. It is critical to plan for evaluation from the beginning. Be specific about what you want to achieve and how you can measure it. You should not only assess the quality of the media advocacy strategies, but also all of the components of the environmental model used in your program or initiative. As you track the impact of media advocacy, you may need to fine-tune your strategy.

Examples of media advocacy progress indicators include:

- Public awareness and support (opinion polling, unsolicited letters to the editor from other members of the community, calls/letters to public officials)
- Media support (quantitative: the number of media "hits"; qualitative: editorial support, feature articles supporting or at least reporting your proposed solution, editorial cartoons). Channels that have been most effective. Successes and failures with specific types of media.
- Policymaker support for policy change (policies introduced and enacted)
- Drinking behavior/attitudes that have changed positively (self report, observational)

In addition to identifying gaps and strategies that did not work well, look for ways to build on successes and reinforce accomplishments. For example, the City Council passes an ordinance you were seeking. Take this opportunity to provide positive feedback to



the policymakers through letters to the editor and call-in talk shows (particularly if the ordinance is controversial and receiving negative publicity).

You can also anticipate how the media are likely to portray new legislation. When this writer worked in tobacco control for the Maine Bureau of Health, lawmakers passed clean indoor air legislation for public places. Anticipating that the media could portray this new law negatively, as one more restriction on individual freedom, we worked with an advertising firm to develop public service ads. These ads framed the law as expanding people's freedom to shop, play, and enjoy a smokefree environment. Tobacco-free Maine coalition members also worked with the print media to present stories with positive frames. When the law went into effect, more than 50% of the phone calls to the Bureau of Health were positive. In fact, some negative calls complained the law did not go far enough in providing smokefree public places. Of course, we shared this information with legislators.

## Planning

Elements in the media plan overlap with the policy plan and include:

- framing strategies
- message development
- audiences/targets and media channels to reach them
- development of advocacy materials, spokespersons and training
- assignment of responsibility for activities
- an internal communications plan for coalition members and project staff (e.g., a rapid response mechanism to act on issues or media opportunities that may arise)
- a timeline to the extent you can project when activities are likely. It is difficult to predict when your issue may appear on the Council's agenda but you can obtain a general timeframe. You might consider if you want to use media advocacy to move things along faster.

This plan will help you to prioritize and sequence activities; e.g., scheduling a news conference before a public hearing on a rules change or ensuring that you have allowed enough time to prepare materials and speakers.

Allow flexibility in your plan for "opportunistic" media activities—unanticipated events or news to which you can relate your issue. A story on an application for a new liquor license near the local college is a good opportunity to express community concerns about underage and binge drinking and the ready availability of alcohol. A rapid response plan, developing a phone tree for example, is very useful here if you need to move on something quickly.

Finally, develop a crisis management plan for unanticipated negative reactions or outcomes to your activities. You cannot predict all eventualities; however, you can plan for "worst case scenarios." Suppose one of the coalition youth who participated in



compliance checks is hurt in the course of this activity, or you are accused of lobbying, misstating facts, or misusing funds. By anticipating the worst cases, you can actually implement measures that will reduce the risk such as procedures for protection of youth participants, fact checking, ensuring you know the lobbying rules, and careful documentation of how funds are spent.

## **Challenges in Implementing Media Advocacy**

Those of us who have worked on public health issues with community groups have found that the phrase, "media advocacy," conjures up delight and excitement for some and alarm and dismay for others. Either extreme view has its pitfalls.

In the former case, it is important to ensure that the energy and passion is directed strategically to achieve a policy goal. Individuals may be attracted to a certain issue for personal reasons and often are impatient for change. It is difficult for people who have worked on an issue for a long time to hold back. They want action, now! Nike's slogan "just do it" may be effective for grabbing the momentary attention of the media, but does not always translate into long-term media attention, nor more importantly, reframe the debate. Resources are too valuable to waste media capital on episodic activities that garner media attention but do not advance policy goals.

On the other extreme are those who are hesitant to engage in media advocacy. Media advocacy connotes confrontation and negative public attention. They express fears about being controversial for either themselves or the institution they represent. They are concerned about making enemies, being confronted, perhaps even losing their job. Some object, "We have to live in this community after this is over." These may indeed be valid concerns, but there are ways to avoid potential problems and compensate for limitations.

The simple fact is, the goal is to bring about change and that is bound to upset those who benefit from the status quo. We can expect that they will resist, and in some cases, quite strongly, with all of their resources and influence, as those in tobacco and alcohol control have found when they've come up against the tobacco and alcohol industries. On a less grand scale is concern about relationships within the community—the industry with a small "i," neighbors, and colleagues and the impact our advocacy will have on those relationships.

In addition to personal concerns about media advocacy, there are institutional barriers. Some institutions require that all communications with the media go through a gatekeeper department such as an office of media relations, or public relations department. An institution's public relations department is not the place to house media advocacy activities. Their goals will often be in conflict. Public relations is about promoting a positive image of an organization and its activities. Sometimes that means downplaying or withholding information they construe as negative. For example, some colleges do not release data on alcohol use by their students, fearing a negative impact on admissions, alumni donations, and community relations.

Another consideration is the multiple relationships that occur among community institutions and organizations. Thus, an organization clashing with City Hall on one issue may have legitimate concerns about the impact this disagreement will have on



their ability to work together on other issues. Nonprofits concerned about losing public funding may not want to engage in a public challenge.

Those who work in the public sector and for corporations are generally barred from making public or company policy. For example, a public health employee may not publicly support an increase in alcohol taxes if it is not the policy goal of the current administration.

Careful planning and sound community organizing can overcome many of these barriers. A strong, broad-based community coalition including key stakeholders lends credibility and support, and provides a diversity of skills, talents, and expertise, as noted previously. Government agencies, nonprofit organizations such as faith-based, health, and social service organizations can take on various roles or alternate leadership depending on the issue. In the example above concerning increasing taxes, one of the nongovernmental organizations can take the lead; the public health agency could still provide information on the issue.

Not everyone needs to be in the spotlight, if that is a concern. There are a variety of ways that people can contribute: public speaker, strategist, writer, graphic artist, community organizer, media relations specialist, event organizer, etc. With that said, leadership commitment and ability to direct an advocacy campaign is critical. Some who are effective leaders in certain areas may not have the desire or temperament to do media advocacy.

It may be beneficial to conduct a stakeholder analysis with coalition members. This exercise encourages group members to express their hopes and fears—what they have the most to gain, or lose, for themselves and their organizations because of participating in the project. They frequently find they share the same concerns such as loss of reputation or fear of failure, and conversely, similar hopes or ideals. While it will not resolve all of the challenges inherent in group dynamics, the process of doing the exercise can alleviate tension and strengthen group relations.

Community members and public health advocates have much to gain by learning and applying media advocacy. As history has borne out, public health and community advocates have won some stunning victories using media advocacy to change unhealthy and unsafe community conditions. Not only have they created positive change in their communities, they have increased their capacity to apply these strategies and techniques to a broad range of public health and social issues.



## Resources

There are many resources available to help prevention professionals and community members who would like to use media advocacy in their communities. Web sites listed at the end of this document offer a wealth of information on this topic and other environmental strategies. An outstanding resource is *News for A Change* (Wallack et al., 1999). This publication is a handbook for advocates that includes tips for developing media advocacy strategies, checklists, worksheets, and sample media materials. The case study, *Bucking Tobacco Sponsorships at Rodeos*, (Wilbur et al., 2003) is another excellent resource that you can download through the Berkeley Media Studies Group website -- [www.bmsg.org](http://www.bmsg.org). Whether or not tobacco is your issue, this guide provides a good one-stop shop on media advocacy skills and techniques.

This Technical Assistance Research Publication was brought to you by the Community Prevention Institute (CPI). CPI is a project funded and directed by the California Department of Alcohol and Drug Programs and administered by the Center for Applied Research Solutions. CPI offers the Prevention Extension Workshop Series, which aims to make state-of-the-art research and practices in the field of alcohol and other drug (AOD) prevention more accessible to communities throughout California. The series addresses emerging issues and proven practices in the AOD prevention field. Take advantage of these workshops and the on-site technical assistance provided at no cost through CPI. You may specifically request training in how to implement media advocacy strategies in your community at [www.ca-cpi.org](http://www.ca-cpi.org).



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## Websites

### **Alcohol Policy Solutions**

<http://www.alcoholpolicysolutions.net/>

Website for the Robert Wood Johnson Foundation-American Medical Association national projects, A Matter of Degree: Reducing High Risk Drinking among College Students and Reducing Underage Drinking through Coalitions. Policy and media advocacy materials and tools; college binge drinking case study, media kits; public opinion polls; policy papers.

### **Berkeley Media Studies Group**

[www.bmsg.org](http://www.bmsg.org)

Media advocacy case studies, training, issue briefs, framing memos, content analyses of TV and newspaper coverage of various public health topics, including alcohol, youth and violence, children's health.

### **Center for Applied Research Solutions**

[www.cars-rp.org](http://www.cars-rp.org)

Home of the Community Prevention Institute and other no-cost technical assistance and training projects, including Safe and Drug Free Schools and Communities, Mentoring and the State Incentive Grant.

### **Center for Alcohol Marketing and Youth**

[www.camy.org](http://www.camy.org)

Reports and data on Alcohol Advertising, news releases, fact sheets, and action alerts.

### **Center for Science in the Public Interest (CSPI). Alcohol Policy Project**

[www.cspinet.org](http://www.cspinet.org)

Action alerts, public opinion polls, fact sheets, publications, special projects (e.g., college binge drinking, taxes).



### **Centers for the Application of Prevention Technologies (CAPT)**

[www.captus.org](http://www.captus.org)

A program of the Center for Substance Abuse Prevention (CSAP). Provides resources and technical assistance regarding the translation of substance abuse prevention research to practice. Contains planning and best practices tools.

### **Higher Education Center for Alcohol and Other Drug Prevention**

[www.edc.org/hec](http://www.edc.org/hec)

Environmental Risk Assessment Guide. Publications, statistics, and news clippings. See especially *Raising More Voices than Mugs (media advocacy in the college environment)*.

### **Institute for Public Strategies**

[www.publicstrategies.org](http://www.publicstrategies.org)

Media advocacy materials and tools, public opinion polls, fact sheets, and issue briefings on environmental prevention strategies and programs. IPS has developed several websites for ATOD projects and a website targeted to journalists.

### **National Clearinghouse for Alcohol and Drug Information (NCADI)**

[www.health.org](http://www.health.org)

This is the website for the Clearinghouse—a variety of publications and statistics and information about programs.

### **The National Survey on Drug Use and Health (formerly the National Household Survey on Drug Abuse)**

[www.DrugAbuseStatistics.samhsa.gov](http://www.DrugAbuseStatistics.samhsa.gov)

### **University of Michigan Institute for Social Research, Monitoring the Future (MTF), National Results on Adolescent Drug Use**

[www.monitoringthefuture.org](http://www.monitoringthefuture.org).

This report, tracking behavior and perceptions of 8<sup>th</sup>, 10<sup>th</sup> and 12<sup>th</sup> graders, appears annually in December. MTF has also collected data on college students.



## About the Author

### **Sandra A. Hoover, Ph.D., M.P.H**

Sandra A. Hoover, Ph.D., M.P.H. has approximately twenty years of experience in the alcohol, tobacco and other drug (ATOD) prevention field including work in program design and strategic planning, policy change and advocacy, training and technical assistance for community-based programs, publications, and program management.

Since February 2003, Dr. Hoover has been consulting for national, state, and local organizations, including The Center for Applied Research Solutions in Folsom, California, Johnson, Bassin & Shaw, Inc, in Silver Spring, MD, as well as public and community agencies. Activities include participation in state assessment review teams on ATOD prevention systems, content research and preparation of prevention training courses, issue briefings, fact sheets, and other program materials, and training.

Dr. Hoover's experience includes working for the Institute for Public Strategies (IPS) where she has served as Director of Policy Development, working in the Border Project to Reduce Underage and Binge Drinking along the San Diego-Tijuana border, coordinating the Southern California Prevention Exchange, and the Technical Assistance and Training Project. Prior to returning to California, Dr. Hoover worked five years as Deputy Director for a Robert Wood Johnson Foundation-funded initiative, A Matter of Degree: Reducing Binge Drinking Among College Students (AMOD) in the American Medical Association's Office of Alcohol and Other Drug Abuse. Previous employment includes ten years at the Maine Bureau of Health as Director of the Community Health Promotion/Chronic Disease Prevention Unit and subsequently, Director of the Tobacco Prevention and Control Unit and Project Manager for the Americans Stop Smoking Intervention Study (ASSIST).

Dr. Hoover is co-author of *Binge Drinking Among College Students*, a chapter in [Principles of Addiction Medicine, Third Edition](#) (April 2003). Dr. Hoover has a doctoral degree in cultural anthropology from Indiana University and a Masters in Public Health from the University of Pittsburgh. She has also taught graduate and undergraduate courses in medical anthropology, applied anthropology, and African Studies at the University of Maine, Orono and Duquesne University (Pittsburgh).

## APPENDIX A STRATEGIC ACTION PLAN TEMPLATE

**Problem statement (What is the problem? Develop a concise issue statement):**

**Solution (What is the best way to achieve change?):**

Target	Data	Who needs to be involved?	Message	Actions	By Whom	When
Who has authority to implement change?	What data are needed to describe the problem and support the solution?	Who must be mobilized to apply pressure for change?	What message would convince those with the power to act for change?	What needs to be done?	Who will take action?	When does this need to be done?

Adapted from L. Wallack et al. *News for a Change, an Advocate's Guide to Working with the Media*, Sage Publications, 1999.

## APPENDIX B MEDIA ADVOCACY PLAN TEMPLATE

**Problem statement (What is the problem? Develop a concise issue statement):**

**Solution (What is the best way to achieve change?):**

Target	Media Channels	Message	Materials	Actions	By Whom	When
<p>A. Who has authority to implement change? e.g. City Council</p> <p>B. Who must be mobilized to apply pressure for change? e.g. voters</p>	<p>What are the best channels to reach targets and those who can apply pressure for change? e.g. newspaper-op ed, radio</p>	<p>What message would convince targets to act for change?</p> <p>Frame for content</p>	<p>What materials need to be created? e.g. fact sheets, media packet, photo, issue brief</p>	<p>What needs to be done? e.g. write op ed, arrange interview with x radio station</p>	<p>Who will take action? e.g. staff, coalition member</p>	<p>When does this need to be done?</p>

Adapted from L. Wallack et al. *News for a Change, an Advocate's Guide to Working with the Media*, Sage Publications, 1999.