

Towards an advocacy evaluation framework: measuring the impact of submission writing

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There are few if any greater threats to the determinants of health than the actions of large corporations who produce unhealthy commodities. These entities are generally very powerful, well-resourced and highly skilled at influencing public policy.^{1,2}

We have seen countless examples of the unhealthy commodities industries opposing health policies in Australia and internationally. Some examples include the tobacco industry co-opting researchers and using duplicitous means to access policymakers,^{3,4} the alcohol industry campaigning against effective interventions such as higher taxes on alcohol,⁵ elements of the food industry threatening to withdraw funds from international bodies when policies do not support their products,⁶ the gambling industry's recruitment of political and community leaders to support its further development,⁷ and the gun lobby undermining attempts at regulation to increase gun safety.⁸

Addressing the environmental and commercial determinants of health through policies that seek to reduce our exposure to – and therefore our consumption of – unhealthy commodities will potentially reduce the profits of these companies. Unsurprisingly, when faced with this prospect, history has shown that the unhealthy commodities sector employ all resources possible to delay or subvert policy change, including lobbying, utilising front groups, providing generous political donations, and using advertising campaigns to ensure their voices are heard and the status quo is maintained.^{9,10}

In comparison, health advocacy that aims to improve the health of the population is usually done by advocates with limited resources, often from civil society, health services or academia, who are trying to

squeeze advocacy work in on the side. It is an uneven playing field. Given this, we as public health professionals need to ensure our advocacy time is spent in the most productive and efficient way, but there are few tools available to evaluate our work.

So how does public health overcome this challenge?

Health advocacy, which we define as 'active attempts to influence policy related to health' can take many forms including: direct lobbying of policymakers, building alliances, signing petitions, mobilising the public, engaging the media, writing submissions and protesting. Many of these are very resource-intensive activities. As most health advocates have limited resources, it is essential to understand what works and what doesn't when it comes to advocacy strategies. However, to date, there have been few empirical studies examining advocacy, and in particular, examining which strategies are most effective in influencing policy decision-making.

One reason for the lack of studies examining this issue is that policymaking is a dynamic and often complex process that can take a long time. Furthermore, it often involves a range of advocacy strategies, rather than one measure in isolation. These elements make it difficult to determine the effectiveness of individual advocacy strategies.¹¹ In particular, it can be difficult to pinpoint whether there was one specific component or a number of components that led to policy change. Adding to the complexity are the many different actors involved in trying to influence this process. Due to the nature of policymaking, no single actor can typically take responsibility for an outcome. Advocates may therefore need to focus on contribution rather than attribution and pinpoint where

they supported or added to an outcome.

In an attempt to address this challenge, we have commenced on a project to develop a framework that can be used to evaluate the effectiveness of one commonly used advocacy strategy – submission writing. This is a strategy that many readers will have undertaken at some point in their career and they will know that it can be a time-consuming process. The framework has been developed with advocacy groups with limited resources in mind, as we know their capacity to undertake evaluation can be limited. It incorporates Shumaker's Levels of Responsiveness,¹² which categorises determinants of political responsiveness to the demands of interest groups.

The framework is intended to evaluate whether submission writing is an effective strategy and to highlight how it can be improved. It has the following components:

- **Context analysis:** How likely the government, or relevant body, is to respond to the policy issue based on indicators in the policy domain, and how influential the organisation is in providing the submission.
- **Content analysis:** The level of agreement or support for recommendations shared by other submission writers, and the inclusion (or otherwise) of recommendations in the corresponding response to submissions.
- **Other positive outcomes:** Whether there were additional benefits, such as improved relationships between organisations gained from the submission writing process and overall engagement with the policy issue.

We hope measuring and evaluating the impact of submission writing will help public health practitioners better understand the effectiveness of this component of the public health advocacy process. We intend to feed back the results of our piloting of the framework as they come to hand, and we invite public health practitioners to consider how they can contribute to this agenda through evaluating their own advocacy practice and advocacy more broadly. By beginning this process, we hope to contribute to a longer-term plan to arm advocates with more effective and highly targeted strategies, enabling them to be collectively better positioned to influence policy and improve health outcomes globally.

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