

# ENGAGING EFFECTIVELY TO EXPAND ACCESS TO SAFE ABORTION

## A POLICY COMMUNICATION GUIDE



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## Introduction

Around the world, unintended pregnancies are common, and more than half of all unintended pregnancies end in an induced abortion, the intentional termination of a pregnancy. While abortion is more common in some countries than others, there is no country where it does not occur.<sup>1</sup> An abortion can be performed safely when performed according to World Health Organization (WHO) guidelines: with a recommended method appropriate to the pregnancy duration and under the supervision or care of a trained health care provider.<sup>2</sup> Additionally, abortion medication can be safely taken outside of a clinical setting: WHO recommends that individuals in the first trimester can self-administer abortion medication without direct supervision of a health care provider.<sup>3</sup> In all cases, individuals should have access to accurate information and trained health care providers, should they need or want it at any stage of the process. However, almost half of all induced abortions worldwide do not meet these conditions and are carried out unsafely, endangering the lives of approximately 25 million women each year.<sup>4</sup>

Research shows that unsafe abortion is a leading cause of maternal death—accounting for about one in seven pregnancy-related deaths—and is responsible for countless cases of illness and disability.<sup>5</sup>

**Reducing deaths and injuries related to unsafe abortion requires a policy environment that supports equitable access to sexual and reproductive health and rights (SRHR)—including contraception, safe abortion, and postabortion care—for all people.**

## About the Guide

This policy communication guide is an action-oriented resource for engaging in evidence-based discussions around expanding access to safe abortion. It expands on PRB's longstanding experience and numerous resources focused on policy communication in addition to referencing various external sources. The guide contains information, examples, and exercises to help you build a policy communication strategy grounded in data and tailored to your country's context. After using the guide, you should be able to effectively share knowledge, interact with policy stakeholders, and frame participatory processes for discussing the decisions, plans, and actions that impact safe abortion access at local and national levels. Seven sections will support you in developing a cohesive, coordinated, and compelling policy communication strategy for expanding access to safe abortion:

1. **Understanding Safe Abortion as a Policy Issue**
2. **Setting a Policy Goal**
3. **Identifying Policy Audiences**

### NOTE

The SAFE ENGAGE Project recognizes that access to safe abortion is critical for all individuals regardless of gender identity. The guide uses “women” and “people” interchangeably, acknowledging that any gender identity can experience pregnancy and abortion.

### NOTE

Abortion medication can be safely taken by a woman outside of a clinical setting. WHO recommends that individuals in the first trimester can self-administer abortion medication without direct supervision of a health care provider. To learn more about self-management of medical abortions, review [WHO recommendations on self-care interventions](#).

4. **Planning a Roadmap for Action**
5. **Crafting Evidence-Based Messages**
6. **Engaging in Policy Communication and Dialogue**
7. **Continuing the Conversation and Measuring Impact**

Anyone can use this guide to learn how to clearly and accurately communicate with policy audiences about expanding access to safe abortion in their country—whether you are new to working on safe abortion issues or have extensive experience with this topic. Ultimately, the guide aims to help you ensure that the necessary resources, policies, and political will are available to support, scale up, and sustain SRHR efforts.

## How to Use the Guide

You can use this guide as a step-by-step process to develop a policy communication strategy focused on abortion policy change, or you can use specific sections to enhance your existing SRHR policy change efforts. Each section includes exercises that will help you apply what you've learned. Many exercises build off of each other and will require you to use information from previously completed exercises.

It is recommended that you and your partners engage with this guide in small group settings to encourage cooperative learning, constructive brainstorming, and consensus-building as you develop your policy communication strategy. You should reference the section content and your completed exercises regularly as you plan and implement your strategy.

A strong policy communication strategy is ultimately only one part of the process for successfully changing policy. Regardless of how you decide to use the guide, you can still explore the additional tools, resources, and information linked throughout to help you complement your policy communication strategy and activities.

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## About the SAFE ENGAGE Project

This guide was developed as part of the SAFE ENGAGE (Strengthening Evidence-Based Policy to Expand Access to Safe Abortion) Project, which supports access to safe abortion by providing decisionmakers with the latest data on abortion and maternal health, building the capacity of advocates and decisionmakers to use evidence to achieve policy goals, and working with journalists to improve evidence-based reporting on abortion and related topics. In the three years of the project, [numerous global and country-specific communication resources](#) were developed in collaboration with experts and local stakeholders. This guide connects these real-world examples and experiences with policy communication frameworks and exercises to provide an actionable tool for enhancing policy communication around safe abortion. If you are new to working on safe abortion, you can watch [Within Reach: Expanding Access to Safe Abortion](#), produced by Population Reference Bureau under the SAFE ENGAGE project. The 16-minute video and accompanying key messages handout use reliable data and evidence to illustrate how policy changes can decrease maternal mortality by improving equitable access to safe abortion services.

## SECTION 01

### Understanding Safe Abortion as a Policy Issue

Section 1 helps you view safe abortion access through a policy lens and identify a specific issue you want to address through your policy communication strategy.



Supportive policies and financial commitments to provide comprehensive SRHR information and services—including access to safe abortion—are key for preventing unintended pregnancies and unsafe abortions. Comprehensive sexual and reproductive health includes a full continuum of services that consists of safe abortion care alongside contraception, prenatal, labor and delivery, postpartum, and postabortion care, among other services. **Evidence shows that policy change can make a difference to save lives and ensure that women and girls who need abortion have access to safe, legal procedures.** To improve women's health, policymakers need to understand that:<sup>6</sup>

- Restrictive abortion laws do not stop abortion from occurring, but they do make it less safe.
- Unsafe abortions incur high costs for women, their families, and health systems.
- Public health experts agree that increasing access to contraception, safe abortion, and postabortion care can help protect women's health.

## Background Research

The World Health Organization defines **health policy** as the “decisions, plans, and actions that are undertaken to achieve specific health care goals within a society.”<sup>7</sup> Policies can exist in many different forms, such as policy documents, laws, contracts, partnerships, or funding priorities. Understanding abortion-related policies in your country will help you identify existing gaps or problems to address. Additionally, using evidence-based information from reliable sources and including professional citations throughout your policy communication efforts will support your public credibility. The first step towards developing your policy communication strategy is thoroughly researching and analyzing **data and policies** focused on contraception, abortion, and postabortion care in your country.

**COMPLETE EXERCISE 1A: BACKGROUND RESEARCH → [PG. 31]**

## Focus Issue

When women and girls experience unintended pregnancies and cannot access safe abortion, they may resort to unsafe abortion.<sup>8</sup> Research has shown that abortion occurs among women and girls of all ages and socioeconomic backgrounds: rich and poor, married and unmarried, with and without children.<sup>9</sup> Even though abortion is a common occurrence globally, opinions and policies regarding it differ from country to country—and even community to community. Because abortion is a complex issue, no single policy solution exists. However, focusing on too many issues can dilute your strategy’s impact and make your communication confusing. To increase your likelihood of success, you should narrow your **focus issue** to one barrier related to accessing safe abortion. Barriers to safe abortion can include: restrictive laws, poor availability of services, high cost, stigma, health provider objection, and unnecessary requirements that delay care.<sup>10</sup>

When selecting your **focus issue**, be sure that it:

- Is specific and clear.
- Is supported by research and data.
- Fills a gap that policy change or policy implementation can address.

You should also make sure that your organization has the resources—skills, time, money, and influences—to address the problem. If you identify multiple issues your organization has the resources to address, you can use this guide to develop a strategy for each one.

**COMPLETE EXERCISE 1B: BARRIERS TO ACCESS → [PG. 32]**

### NOTE

Quantitative data focuses on what can be counted, measured, or expressed using numbers. Qualitative data focuses on descriptions, examples, or other concepts that can be observed but not measured. Using both together can enhance the effectiveness of your policy communication.

### TIP

For additional assistance on understanding the policy context of abortion in your country, complete “Section One: Identifying Problems and Understanding the Current Context” from [“Roots of Change: A Step-by-Step Advocacy Guide for Expanding Access to Safe Abortion”](#) by Ipas.

### FOR MORE INFO

For more information on legal and other barriers to safe abortion access, review [“Access to Safe Abortion: A Tool for Assessing Legal and Other Obstacles”](#) by IPPF.



## POLICY LANDSCAPE IN BURKINA FASO

# CASE STUDY

In Burkina Faso, one-third of all pregnancies are unintended or unplanned and one-third of those unintended pregnancies end in abortion. In 2012 alone, over 100,000 induced abortions occurred in Burkina Faso. Data indicate that most of these abortions were clandestine and potentially unsafe, performed outside the formal health system.

The 2005 Reproductive Health Law and the 2018 Penal Code in Burkina Faso govern access to safe abortion. Even though the 2018 Penal Code allows for access to safe abortion under certain circumstances (to protect the health of the mother, in the cases of rape and incest, and due to fetal abnormalities) the Reproductive Health Law and the implementation guidelines do not reflect the modifications made to the Penal Code in 2018.

Because of this gap between policy and implementation, doctors, nurses, and other health providers do not know the circumstances under which they can provide safe abortion—preventing women in Burkina Faso from receiving potentially life-saving care.

This policy implementation gap was identified by a group of SRHR experts when they conducted background research into policies and data around abortion in Burkina Faso. Due to this discovery, they built a policy communication strategy focused on ensuring the implementation of the law, rather than expanding or changing the law itself.

*Data and information for this case study was sourced from [SAFE ENGAGE Burkina Faso](#).*

## SECTION 02

### Setting a Policy Goal



Section 2 helps you develop a clear goal for addressing abortion barriers through policy change. Your policy goal will be the foundation that drives your policy communication strategy.

Abortion has become safer over time as policies, programs, and practices have improved due to the collaborative efforts of individuals and organizations around the world. From 2000 to 2017, 27 countries made abortion legal altogether or under certain health and socioeconomic circumstances, and 24 countries have expanded legal conditions to allow abortion for cases of rape, incest, or fetal anomaly. However, where the most restrictive abortion policies persist, millions of women continue to experience the potentially dangerous consequences of unsafe abortion.<sup>11</sup>

### Policy Goal

Setting your policy goal is the most foundational step of your policy communication strategy. **You should come back to it regularly throughout the planning process.** A policy goal identifies your organization's vision for expanding access to safe abortion. It focuses on high-level changes in policies, programs, or resource allocations and represents the long-term impact on public health that you hope to achieve.



It can focus on modifying existing policies, getting new policies passed, or even ensuring that policies are implemented appropriately. Unlike program goals, policy goals do not focus on changes in community behaviors or measures.

To write a policy goal, you will need to identify four components:

1. **What:** The policy change you want to see happen.
2. **How:** The specific action or decision that will make your change a reality.
3. **Who:** The individuals/organizations that can influence and enact the change.
4. **When:** The timeframe by which the change will happen.

Combining these elements together into one, short sentence will give you a clear goal that addresses your selected abortion issue through policy change. Even if more than one policy solution exists for addressing your selected issue, success is more likely if you narrow your focus. Set aside any additional policy goals you identify for now, as they may become useful if you need to adjust your strategy to adapt to unexpected changes or challenges; they may also be the next steps after you achieve your initial goal.

**A strong policy goal builds on information you have learned through researching and narrowing your safe abortion access issue. It should be:**

- Specific and clear.
- Supported by evidence.
- Solutions-oriented.
- Connected to your organization's unique experience, expertise, and partnerships.
- Feasible within your country's current political environment.

[COMPLETE EXERCISE 2A: POLICY GOAL → \[PG. 33\]](#)

## Partnerships and Coalitions

Strategic partnerships and coalitions can increase your likelihood of success by improving your ability to reach new audiences, reinforcing the strength of your efforts, and demonstrating far-ranging, diverse support for your policy goal.

[COMPLETE EXERCISE 2B: PARTNERSHIPS AND COALITIONS → \[PG. 34\]](#)



## POLICY GOALS IN LAGOS STATE, NIGERIA

Restrictive abortion laws, prohibitive costs, poor access to safe health services, and intense social stigma are barriers that prevent women from accessing safe and legal abortion in Nigeria. Data show that unsafe abortions account for around 6,000 maternal deaths every year in Nigeria, or on average, 16 maternal deaths each day.<sup>12</sup> Recently, the Lagos State Ministry of Health began disseminating the 2011 Criminal Code—which allows for legal abortion to protect the physical health and life of a woman—and required that safe abortion services be provided within the full extent of the law. Within Lagos State, opportunities also exist to adopt the nationally approved clinical guidelines on safe abortion for legal indications and the 2015 Violence Against Persons Prohibition (VAPP) Act. The VAPP Act protects girls, women, and marginalized communities from abuse, and ensures comprehensive medical services for victims of rape and incest.

To support expanded access to safe abortion in Nigeria and avert preventable maternal deaths, a partnership of advocates, experts, and decisionmakers came together to engage in policy communication in Lagos State. Through the policy communication process, the group decided that the greatest positive impact could be achieved through full implementation of current laws and guidelines, rather than pursuing an expansion of laws.

Based on this analysis, they focused their policy goals on ensuring that the current law is fully implemented by health care providers and that the national clinical guidelines for safe abortion and the VAPP Act are adopted by Lagos State.

The four components of their policy goal are:

- **What:** Expand access to safe abortion and reduce unnecessary maternal deaths in Lagos State in line with existing policies.
- **How:** Fully implement the 2011 Criminal Code and adopt the VAPP Act and national clinical guidelines for safe abortion in Lagos State.
- **Who:** Health care providers and state policymakers.
- **When:** Within the next two to three years.

And combined into one cohesive sentence their policy goal is:

**“To expand access to safe abortion and reduce unnecessary maternal deaths in Lagos State by ensuring health care providers fully implement the 2011 Criminal Code and state policymakers adopt the VAPP Act and national clinical guidelines for safe abortion within the next two to three years.”**

*Data and information for this case study was sourced from [SAFE ENGAGE Nigeria](#).*

## SECTION 03

### Identifying Policy Audiences



Section 3 helps you identify, analyze, and understand the different individuals and organizations who can bring about the safe abortion policy change that you want.

Expanding access to safe abortion requires support from many different types of people and organizations. **Policy audiences** are those who can directly or indirectly help achieve a policy goal. Many types of policy audiences exist, including but not limited to: political leaders, government officials, program managers, educators, advocates, business leaders, news media, donors, religious leaders, and women's groups. Policy audiences are not only high-level politicians but also decisionmakers and influential people from all walks of life.

### Primary and Secondary Audiences

There are two categories of policy audiences: primary and secondary.

- **Primary audiences** are people who have direct control and authority to affect policy change.
- **Secondary audiences** are individuals or groups who can indirectly influence or motivate primary audiences to act.

Both types can exist at global, national, or subnational levels, but it is important to select only audiences that you can realistically reach and engage.

**COMPLETE EXERCISE 3A: PRIMARY AND SECONDARY AUDIENCES → [PG. 35]**

## Audience Power, Support, and Knowledge

Moving forward, you should plan to narrow your audiences as much as possible to tailor your messages and efforts for maximum impact. Think critically about who you “need to reach” and who would be “nice to reach” and keep in mind your organization’s unique networks and connections. Ultimately, the number of audiences you focus on will depend on the amount of time and resources you are able to dedicate to policy communication.

To help you prioritize which audiences to target, you will need to understand how much power they hold and if they support your issue. An **audience power map** is a visual representation of both a policymaker’s level of power and his or her support for your issue. It can help you determine which audiences will be more receptive to your messages, which will in turn help you decide where to direct your communication efforts. Remember that your primary audiences are the ones who will be able to enact your desired change around safe abortion policy, so you should primarily concentrate your efforts on them. Consider factors like voting records, positions on comparable issues, public statements, personal background, support base, self-interest, political risk, or close and influential relationships.

**[COMPLETE EXERCISE 3B: AUDIENCE POWER MAP](#) → [PG. 36]**

Once you have developed a short list of audiences to target, you will need to consider their level of knowledge and how they think, act, and consume information so that you can devise effective strategies for reaching and engaging them. Through this process, you might also realize that one of your selected audiences is not a good fit. If this happens, revisit your audiences list and power map to adjust accordingly.

**[COMPLETE EXERCISE 3C: AUDIENCE KNOWLEDGE MAP](#) → [PG. 37]**

## Opposition Audiences

Abortion can be a divisive issue, and it is likely you will encounter individual actors or organizations who oppose your policy goal. Opposition audiences can range from those who strongly object to abortion to those who may have competing priorities or agendas. To prepare for potential backlash or even relapses surrounding your efforts, you should anticipate how opposition audiences might react to your words, messages, and activities in pursuit of your policy goal. In contexts with large numbers of opposition

### TIP

You will need to continuously go back to your audience power map to update based on ongoing research.

### TIP

For more in-depth assistance mapping safe abortion audiences, partners, and opposition groups in your country, complete “Section Two: Mapping Stakeholders, Power Holders, and Allies,” “Section Three: Coalition Building,” and “Section Four: Opposition Monitoring” from [“Roots of Change: A Step-by-Step Advocacy Guide for Expanding Access to Safe Abortion,”](#) by Ipas.

audiences, keeping your work under the radar—such as by avoiding public announcements or the news media—may be a deliberate strategy you choose to undertake. When engaging with opposition audiences, you should consider if is worthwhile or not to directly address counter arguments. If you do decide to engage, make sure the information you share remains evidence-based, stigma-free, and non-confrontational.

**COMPLETE EXERCISE 3D: OPPOSITION AUDIENCES AND ARGUMENTS → [PG. 39]**



## POLICY AUDIENCES IN CÔTE D'IVOIRE

Most women in Côte d'Ivoire do not have access to safe and legal abortion services, with recent research indicating that more than six out of 10 abortions were unsafe.<sup>13</sup> Unsafe abortion is a major contributor to maternal mortality and disability worldwide and within West Africa is estimated to be responsible for more than one in six pregnancy-related deaths.<sup>14</sup> Côte d'Ivoire has signed and ratified the Maputo Protocol, which outlines provisions related to women's economic and political empowerment as well as health and well-being—including explicitly recognizing abortion as a human right under specific circumstances.<sup>15</sup> However, Côte d'Ivoire's national laws are not consistent with this obligation and its provisions are not being implemented.

To raise public awareness around the causes and consequences of unsafe abortion in Côte d'Ivoire and increase support for better access

to comprehensive reproductive health services, a group of advocates, experts, and program staff convened to engage in policy communication with a variety of audiences.

For their primary audiences, they focused on sharing key information and data with the Ministry of Health, the Ministry of Justice and Human Rights, the Parliament, and the Prime Minister's office because of their ability to vote on and implement new laws concerning access to safe abortion. For their secondary audiences, the group conducted outreach to health care providers, youth, and the media, organizing events focused on demonstrating the health consequences of unsafe abortion, increasing understanding of the impacts of abortion stigma, and supporting fact-based conversations on SRHR issues more broadly.

*Data and information for this case study was sourced from [SAFE ENGAGE Côte d'Ivoire](#).*

## SECTION 04

### Planning a Roadmap for Action

Section 4 helps you identify the steps and processes required to implement your communication strategy and achieve your safe abortion policy goal.



Because both the policy change process and abortion-related views are complex, it is incredibly important to plan a clear roadmap for action before you begin implementing your policy communication strategy. Your roadmap will outline the realistic steps you want others to take to fulfill your policy goal and the specific steps your organization will take to motivate others to act known as policy objectives and communication tactics, respectively. Even though you might want to plan a fixed roadmap, remember that the policy environment is fluid and changes quickly. **It is important to adjust your route along the way if you reach an unexpected roadblock.**

### Strategic Approaches to Influence Policy

Policymaking is complicated. Often, it is not a linear or rational process and it is tied to the many demands on decisionmakers' time. However, communication can influence the policy process when organizations and individuals deliberately engage to create a window of opportunity that aligns problems, solutions, and the political environment. To create this policy opening, three different approaches can be used: policy learning, issue attention focusing, and policy community strengthening.

- **Policy learning** refers to how decisionmakers learn about new information, data, or findings. By repeatedly presenting clear, compelling, and evidence-based information about safe abortion that is tied to a feasible solution, decisionmakers will be more likely to act in support of your policy goal.
- **Issue attention focusing** refers to highlighting the importance of your issue so that decisionmakers prioritize it, especially when many other issues are competing for their attention. Because of differing beliefs about abortion, you may choose to quietly focus attention on your policy goal through smaller exchanges with the media, the public, or policymakers directly. Connecting safe abortion to other widely supported issues, such as maternal health, cost savings, and contraceptive access, can also help focus the attention of decisionmakers.
- **Policy community strengthening** refers to building alliances or networks with different types of organizations that are committed to a common cause, such as expanding access to safe abortion. Within the policy community, not everyone has to contribute at the same level in the same way, so creatively reflect on both your role and the roles of your partners.

#### FOR MORE INFO

For more information on the policy communication process, including how it helps to bridge the gap between research and policy and open windows of opportunity for change, review the [Policy Communication Toolkit](#) by PRB under the PACE project.

## Policy Objectives

**Policy objectives** are the short-term steps to achieve your long-term policy goal and reach your target audiences. They focus specifically on how communicating information can generate an action from someone else, such as one of your target audiences. Your policy objectives will lay out a clear path for communicating effectively to influence the policy process, especially when using the three strategic approaches for policy change.

Policy objectives can use one or more of the strategic approaches for policy change, but collectively they will support the attainment of your policy goal. **They should also be SMART: specific, measurable, achievable, realistic, and timebound.** You should only identify three to four policy objectives to tackle at one time so that your efforts remain feasible and focused. Remember to think of your objectives as a few incremental steps among many (carried out by your organization or others) that will help fulfill your policy goal.

[COMPLETE EXERCISE 4A: POLICY OBJECTIVE](#) → [PG. 40]

## Communication Tactics

Once you have developed your objectives, you can develop corresponding **communication tactics**, or the specific activities you will undertake to motivate your primary audiences to action. Tactics should directly correspond with the objectives you set and should be strategically selected based on their likelihood for reaching and engaging your target audience. The better you understand your audience, the more likely your communication tactics will be successful. Remember, you cannot control where your audiences are going for information, but you can control where you share your information and how often you share it. You should think of your communication tactics as opportunities for sharing evidence-based messages (across a variety of platforms in a variety of formats) in support of your policy goal.

Examples of specific communication tactics under each of the three approaches include:

POLICY LEARNING	ISSUE ATTENTION FOCUSING	POLICY COMMUNITY STRENGTHENING
Hosting a policy dialogue with local leaders, delivering a SRHR policy brief to decisionmakers, or sharing a video with evidence-based policy recommendations for expanding access to safe abortion.	Sharing studies focused on maternal mortality, participating in an international awareness day on social media, or hosting a public event on increasing contraceptive access.	Forming a coalition on abortion policy, supporting youth SRHR policy champions, or working with researchers to quantify the costs of unsafe abortion.

Examples of communication formats and platforms include:

- **Print materials:** fact sheets, posters, policy memos, letters, flyers.
- **Presentations:** graphics, audio, visual aids, elevator speeches.
- **In-person and virtual events:** meetings, webinars, briefings, town halls.
- **Media spotlights:** TV and radio, news releases, interviews.
- **Digital channels:** websites, blogs, social media, SMS groups, emails, online petitions.

### TIP

You should be careful when engaging with the media around abortion given the differing viewpoints that exist. When possible, you should work with small groups of journalists or editors to enhance their understanding of abortion, share fact-based information, and reflect on personal values related to abortion and SRHR.



Increasingly, you may want to consider engaging in digital communication tactics as the Internet and social media reach new communities or security and health events prevent in-person gatherings. Using digital tactics can be a low-cost, high-impact way to reach new audiences, make information more accessible, and quickly organize large numbers of people across the world in support of your issue. Given that technology for online engagement is constantly evolving, you should research (probably online!) what digital platforms and devices are commonly used by the individuals and communities you are trying to reach.

**COMPLETE EXERCISE 4B: COMMUNICATION TACTICS → [PG. 41]**



## POLICY COMMUNICATION PLANNING

To strengthen evidence-based policy on expanding access to safe abortion, the SAFE ENGAGE project set a **policy objective** for each of the three strategic **approaches** to policy change:

- **Policy learning:** Advance policy dialogue on safe abortion by creating compelling, evidence-based global and country-specific materials to be used by advocates and journalists.
- **Issue attention focusing:** Increase the quality and quantity of evidence-based news coverage on reproductive health, including safe abortion.
- **Policy community strengthening:** Build country-level individual and institutional capacity to use and produce evidence for policy advocacy to promote safe abortion and reduce unsafe abortion.

These three objectives were fulfilled through a variety of communication tactics. For example, to increase evidence-based news coverage of safe

abortion, the SAFE ENGAGE project held in-country media trainings and engagement dialogues with journalists.

These workshops focused on clarifying myths around unsafe and safe abortion, discussing the links between unsafe abortion and maternal mortality, and talking about the different types of abortion, such as medication abortion.

Many of the trainings also included country-specific components on existing laws and policies and used values clarification exercises to consider the issue of abortion from different perspectives. To provide journalists with evidence-based sources and help sensitize them to the issue of abortion, the workshops also included site visits to clinics where they were able to see first-hand the importance of a SRHR continuum of care in their country.

*Information for this case study was sourced from the [SAFE ENGAGE project](#).*

## SECTION 05

### Crafting Evidence-Based Messages



Section 5 helps you effectively communicate the importance of expanding access to safe abortion and establish your credibility through compelling, evidence-based messages.

Communicating about abortion can be difficult because some people view abortion as a controversial issue. Even organizations with experience advocating for and providing safe abortion services can struggle to overcome common myths and misconceptions about abortion that persist in their communities. To normalize conversations and combat misinformation about abortion, you will need to make sure the messages you share are characterized by credible evidence and stigma-free language.

### Policy Messages

**Policy messages** are brief, solutions-oriented statements that help you tell a clear and compelling story for changing existing policy around abortion. You should support your messages with data and evidence and tailor them to your target audience so that they will be more likely to act in support of your issue.

#### TIP

Before creating your policy messages, review ["How to Talk About Abortion: A Guide to Rights-Based Messaging"](#) by IPPF and ["Freedom of Choice: A Youth Activist's Guide to Safe Abortion Advocacy 2nd Ed."](#) by the Youth Coalition for Sexual and Reproductive Rights. Both guides provide comprehensive information on the specific, non-stigmatizing language to use for abortion-related messaging.

Because there is no “one size fits all” message, you will need to create a message for each type of audience you intend to engage in pursuit of your policy goal. Effective policy messages contain three consecutive parts:

- **Evidence:** Using data (quantitative and qualitative) makes key messages more credible and convincing to your audience. Start your policy message by **defining the problem** around safe abortion access in your country and support it with the most relevant key findings.
- **Context:** Interpreting evidence and outlining the implications of a problem helps audiences understand why an issue matters and why they need to act. The context portion of your policy message should clearly and simply **state the importance** your abortion-related issue using an approach that motivates your audience.
- **Call to Action:** Providing clear recommendations to an audience helps them take the appropriate steps in support of a policy goal. After convincing your audience with evidence and context, you should end your policy message with a **call to action** that is SMART. Make sure the intervention or action you suggest is solutions-oriented and supported by the data and research you share.

**NOTE**

**SMART stands for specific, measurable, achievable, realistic, and timebound.**

[COMPLETE EXERCISE 5A: EVIDENCE-BASED POLICY MESSAGES](#) → [PG. 42]

## Messengers

Once you have drafted your key messages, you will need to decide who delivers them. **Messengers** are the individuals, groups, or organizations that deliver a policy message to a specific audience. Secondary audiences, partnerships, and coalitions are good candidates for messengers, as they can leverage their connections, spheres of influence, and expertise to help access your primary audiences. The right message delivered by the wrong person is likely to go unheard, so select messengers based on who will most effectively engage your target audience.

[COMPLETE EXERCISE 5B: MESSENGERS](#) → [PG. 43]



## POLICY MESSAGES IN ZIMBABWE

Although Zimbabwe has achieved many public health successes in areas that were once deemed controversial and challenging, many Zimbabwean women are still dying from one of the leading causes of maternal deaths: unsafe abortion. Approximately 25 percent of unintended pregnancies in Zimbabwe end in abortion and in 2016 alone more than 65,000 induced abortions occurred in Zimbabwe.<sup>16</sup> Most of these abortions were clandestine, meaning they were performed outside the formal health system and therefore potentially unsafe.<sup>17</sup>

To raise awareness about unsafe abortion in Zimbabwe, its health and financial costs, and the challenges to reducing unsafe abortion created by current laws, a task force of experts, advocates, and decisionmakers developed a video and discussion guide calling for expanded access to safe abortion. Both materials use evidence-based policy messages to define the problem, state its importance, and provide a call to action for decisionmakers. For example, the materials contain the following policy message focused on the 1977 Termination of Pregnancy Act (TOP):

- **Evidence:** In a 2016 survey, only 25 percent of health providers knew all the conditions under which abortion is legal in Zimbabwe.<sup>18</sup>
- **Context:** The 1977 TOP is the main legal

document in Zimbabwe that guides access to abortion. The TOP as it is currently written creates many challenges by requiring a long chain of complex steps. Because of its complexity, not everyone is aware of the TOP and what it allows. This lack of awareness leads to confusion and fear, which can prevent women and girls from seeking an abortion and prevent providers and others from helping them access services.

- **Call to Action:** Policymakers should acknowledge that the 1977 TOP is not suited to the current realities of Zimbabwe and that it should be reformed to be in line with WHO guidelines in the near future.

In addition to developing evidence-based policy messages and materials tailored to their various audiences, the task force also identified who would be most effective to deliver them. For example, the group engaged a practicing midwife and obstetrician/gynecologist to discuss the maternal health impacts of unsafe abortion in Zimbabwe and worked with a lawyer to present and clarify information on existing abortion laws in the country.

*Data and information for this case study was sourced from [SAFE ENGAGE Zimbabwe](#).*

## SECTION 06

### Engaging in Policy Communication and Dialogue

Section 6 helps you effectively engage in policy communication and dialogue by outlining steps for comprehensive preparation and practice.



When communicating about access to safe abortion, you may experience abortion-related stigma, or the negative associations towards people involved in seeking, providing, or supporting access to abortion. Stigma about abortion can perpetuate false beliefs and misconceptions about abortion, and may cause you to experience public shaming, harassment, or even personal attacks when sharing your policy messages.<sup>19</sup> This risk makes it necessary to plan and practice for engaging in policy communication and dialogue, so you can keep the conversation focused on data and evidence.

### Communication Entry Points

To ensure that the right message is sent at the right time to the right person, you should strategically time your communication tactics with communication entry points. **Communication entry points** are the internal and external events, critical processes, and decisionmaking time periods for engaging with your target audiences. They can occur in physical or virtual spaces. Coordinating the delivery of your messages with entry points will allow you to amplify your work at opportune moments. Examples of communication entry points include:

- Budgeting processes.
- In-person and virtual public dialogues.
- Conferences, meetings, and training sessions.
- Current events and media coverage.
- Awareness days, such as International Safe Abortion Day on 28 September.
- Policy meetings and evaluations.
- Elections.

You can leverage existing entry points or create new ones, whether it is simply requesting a meeting with a decisionmaker or hosting a large-scale policy dialogue. As you implement your policy communication strategy, prioritize entry points according to anticipated impact, organizational connections and experience, and level of effort. Your partnerships, coalitions, and networks will be key for engaging effectively through entry points and cultivating short-term relationships into long-term ones.

#### FOR MORE INFO

If you are interested in planning a large-scale event that brings together different audiences to engage in dialogue, you can use the WHO's [“Policy Dialogue Preparation and Facilitation Checklist.”](#) The checklist outlines each step for preparing, executing, and learning from a high-level policy dialogue event.

**[COMPLETE EXERCISE 6A: COMMUNICATION ENTRY POINTS](#) → [PG. 44]**

## Timeline and Workplan

Successful implementation requires detailed advance planning. Before taking any action, you should have a clear timeline and workplan that divides responsibilities within your organization, harnesses the entry points you have identified, and gives you time to prepare to implement. You should also consider any skills, expertise, or resources your organization might need to carry out your communications tactics.

Remember, you will likely need to connect with your audience multiple times, through multiple tactics, within a defined period before your policy message becomes memorable. Do not get discouraged if your target audience does not act on the first try! Continue tailoring your messages and strategically sharing until you find success. This approach will be much more effective than sending a generic message once a month.

**[COMPLETE EXERCISE 6B: TIMELINE AND WORKPLAN](#) → [PG. 46]**

## Dialogue Practice

Once you have planned and discussed every detail, it is time to practice your communication and dialogue! Delivering your policy messages professionally is a crucial part of engaging your audience.

You should practice:

- Sharing your policy messages with clarity and confidence.
- Communicating succinctly and simply.
- Facilitating conversations focused on knowledge exchange and calls to action.
- Answering and asking questions supported with facts.
- Remaining calm and evidence-based when responding to opposing viewpoints, hostile questions, personal attacks, or other negative reactions.

As mentioned previously, abortion can sometimes be viewed as controversial or ideological, rather than an essential component of health and well-being. As such, you should be prepared to always direct your communication and dialogue back to information from reputable sources when engaging with differing viewpoints. To prepare for this, you should practice answering all types of questions, even personal attacks, with data and evidence.

### FOR MORE INFO

For more information and practice on how to respond to different audience questions about abortion, review the “Frequently Asked Questions” section on page 20 of the presentation guide [\*Within Reach: Expanding Access to Safe Abortion\*](#) by PRB.

**[COMPLETE EXERCISE 6C: POLICY DIALOGUE PRACTICE](#) → [PG. 47]**



## POLICY COMMUNICATION AND DIALOGUE IN THE DEMOCRATIC REPUBLIC OF CONGO

# CASE STUDY

Historically, access to safe abortion in the Democratic Republic of Congo (DRC) has been limited due to political instability, a weak health sector, low use of contraception, and restrictive laws. These barriers contribute to high rates of unsafe abortion, which in turn contribute to high rates of maternal deaths. However, concerted efforts by the Coalition de Lutte Contre les Grossesses Non Désirées (CGND) and others resulted in the Congolese government publishing the text of the Maputo Protocol in the country's national legal journal in March 2018, a critical step to expanding the conditions under which abortion is legal in the DRC.

To spread awareness of this change to legal and medical authorities across the vast and politically decentralized country, CGND is using tailored fact sheets and videos to consistently engage judges, police chiefs, doctors, associations of medical professionals, and other decisionmakers over time. For example, the group is distributing a fact sheet focused on the legal implications of the law and next steps for complying with the Maputo Protocol during their key meetings with judges and legal representatives.

*Data and information for this case study was sourced from [SAFE ENGAGE Democratic Republic of Congo](#).*



## SECTION 07

### Continuing the Conversation and Measuring Impact

Section 7 helps you measure short- and long-term progress toward your policy goal focused on expanding access to safe abortion.



Since the 1990s, significant gains have been made to expand access to safe abortion, with almost 50 countries reforming their restrictive abortion laws in incremental or transformative ways. Today, approximately 59 percent of women of reproductive age live in countries that broadly allow abortion, translating to 970 million women who possess the right to a safe and legal abortion. However, partial or total prohibitions on abortion still prevent millions from accessing safe abortion services, and 41 percent of women currently live under these restrictive laws.<sup>20</sup> **Even though policies and implementation often change slowly, working to expand access to safe abortion is essential to the health and well-being of women everywhere. Investing time and energy to continue conversations and track progress toward your policy goal is an important last step for every policy communication strategy.**

## Monitoring, Evaluation, and Learning

Monitoring, evaluation, and learning (MEL) efforts are critical to the value, success, and credibility of your policy communication strategy. Regularly engaging with your policy audiences, following up on progress toward your policy goal and objectives, and recording successes (and failures) can help you to:

- Measure improvements in your policy communication tactics and messaging.
- Determine how and to what extent your policy communications are making a difference with key audiences, including holding policy audiences accountable.
- Mobilize additional resources and expand the reach of the conversation.
- Adapt your strategy in real time and inform future policy communication initiatives.
- Demonstrate your organization's unique value add and key successes.
- Increase the communications skills and expertise of staff and partners through continuous learning.

## Outputs and Outcomes

The MEL efforts you undertake do not have to be costly or complicated and can focus on simple output and outcome metrics.

- **Outputs** measure productivity and represent the direct results of your policy communication tactics. They demonstrate how much effort you put toward your policy goal and objectives and are often countable, such as the number of workshops held or the number of advocacy materials developed.
- **Outcomes** measure effectiveness and capture the effects and changes resulting from your policy communication tactics. They indicate if you are successfully influencing and generating change, such as when a policymaker declares public support for your policy goal or when individuals use the information, tools, or skills provided by your organization.

Make sure to build MEL efforts into your workplan to understand what is working (and what is not) throughout your policy communication. Taking the time to focus on MEL will ensure that your strategy is on track to achieve your policy goal.

**COMPLETE EXERCISE 7A: MONITORING, EVALUATION, AND MEASUREMENT METRICS → [PG.52]**



## MONITORING, EVALUATION, AND LEARNING INDICATORS

Local SAFE ENGAGE partners developed MEL frameworks for measuring the impact of their policy communication strategies on country-level policies, strategies, and budgets related to expanded access to safe abortion.

For example, a common policy dialogue output identified by country partners was: The number of spaces (virtual and in-person) created for facilitating policy dialogue on safe abortion and the full continuum of care. Partners recorded details about this output when hosting events, meetings, and other discussions related to safe abortion in their countries.

And for outcomes focused on policy dialogue, the partners collected information on: Instances where policymakers used data or messages to strengthen the enabling policy environment for safe abortion and the full continuum of care. Partners followed-up with those who attended their events (outputs) to see if the information shared not only reached policymakers but was also used by them (outcomes).

*Information for this case study was sourced from the [SAFE ENGAGE project](#).*

## Conclusion

Your policy communication strategy is only one part of the process for successfully enacting evidence-based policy change around access to safe abortion. Hopefully this guide serves as a strong starting point to help you effectively engage others, and we thank you for your commitment to creating a data-driven policy environment that ensures equitable access to comprehensive health services for all people. Together, we can support the sexual and reproductive health and well-being of people everywhere and reduce unnecessary deaths and disability related to unsafe abortion.

## Additional Resources

- [SAFE ENGAGE Project Country-Specific Resources](#)
- [PACE Project Policy Communication Toolkit](#)
- [SAFE ENGAGE Project Abortion Facts and Figures](#)
- [SafeAccess Hub](#)
- Guttmacher Institute [International Abortion Resources](#)
- Ipas [Roots of Change: A Step-By-Step Advocacy Guide for Expanding Access to Safe Abortion](#)
- Youth Coalition [Freedom of Choice: A Youth Activist's Guide to Safe Abortion Advocacy 2nd Ed.](#)
- IPPF [How to Talk About Abortion: A Guide to Rights-Based Messaging](#)

Found this guide helpful to your organization's work? Have suggestions on how to improve it?

Please let us know by emailing [communications@prb.org](mailto:communications@prb.org) so that we can ensure the guide remains up-to-date and reflective of real-world experiences.

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## Exercise 1A

# Background Research

Research the data and policies related to abortion in your country. Once you finish your background research, list the data and sources on the left. Then, list the policies and sources on the right. Draw lines between data and policies that directly connect to one another to help you identify possible focus areas for your policy communication strategy.

*Note: If you are using Adobe Acrobat Reader, you can draw lines by selecting Tools>Comment. In the Comment toolbar, click Drawing Tools and select the Line tool.*

	Data	Policies
EXAMPLE	<b>Data:</b> 412 maternal deaths per 100,000 live births in 2016. <b>Source:</b> Central Statistical Agency/CSA/Ethiopia and ICF. 2016. Ethiopia Demographic and Health Survey 2016. Addis Ababa, Ethiopia, and Rockville, Maryland, USA: CSA and ICF.	<b>Policy:</b> Abortion is permitted in cases of rape, incest, or fetal abnormalities; if the woman's life or physical health is in danger; if the woman has physical or mental disabilities; or if the woman is a minor who would be considered physically or mentally unprepared for childbirth. <b>Source:</b> The Criminal Code of Ethiopia, 2005, Articles 545-552
	<b>Data:</b>  	<b>Policy:</b>  
	<b>Source:</b>  	<b>Source:</b>  
	<b>Data:</b>  	<b>Policy:</b>  
	<b>Source:</b>  	<b>Source:</b>  
	<b>Data:</b>  	<b>Policy:</b>  
	<b>Source:</b>  	<b>Source:</b>  
	<b>Data:</b>  	<b>Policy:</b>  
	<b>Source:</b>  	<b>Source:</b>  

## Exercise 1B

# Barriers to Access

List the different types of barriers related to safe abortion access in your country. Consider the background information you gathered in [Exercise 1A](#) to ensure that the barriers you identify are supported with evidence. Once you've listed all the barriers in your country, choose one barrier to focus on to increase your likelihood of success.

### Legal (Restrictive laws and unnecessary requirements)

EX. Medical abortions are administered in health facilities and women must come back to the facility for their second medication.

- 
- 
- 
- 

### Financial (Costs of service provision or access)

EX. Cost of medical abortion drugs are paid for by clients, even when they are meant to be free.

- 
- 
- 
- 

### Medical (Poor availability or quality of services)

EX. Refusal of providers to perform abortions.

- 
- 
- 
- 

### Rights-based (Stigma, judgment, and objection)

EX. Religious-cultural norms oppose abortion on a morality basis.

- 
- 
- 
-



## Exercise 2A

# Policy Goal

Outline the four elements of a policy goal that address your selected issue regarding expanding access to safe abortion. Next, combine the elements together into a concise statement that clearly articulates your policy goal.

### What?

The policy change you want to see happen

EX. Increase access to safe abortion and achieve the Sustainable Development Goal (SDG) 3 target of reducing the global maternal mortality ratio to less than 70 per 100,000 live births by 2030.

### How?

The specific action or decision that will make your change a reality

EX. Revise the Technical and Procedural Guidelines for Safe Abortion Services to include self-administration of abortion medication.

### Who?

The individuals and organizations that can influence and enact the change

EX. Ministry of Health

### When?

The realistic timeframe by which the change happens

EX. Within the next two years.

## Policy Goal Statement

EX. To increase access to safe abortion and achieve SDG 3, the Ministry of Health should revise the Technical and Procedural Guidelines for Safe Abortion Services to include self-administration of abortion medication.

Exercise 2B

# Partnerships and Coalitions

List any partnerships, coalitions, or networks that could aid you in carrying out your policy communication strategy and achieving your policy goal. Consider your existing partnerships and coalitions as well as new ones you may want to seek out to help you achieve your policy goal.

Existing	New

## Exercise 3A

# Primary and Secondary Audiences

After reviewing your policy goal from [Exercise 2A](#), list primary and secondary audiences who can help you achieve your goal. It is best to be as specific as possible, noting individuals instead of agencies, where possible. Indicate individuals' names, titles/positions, and even contact information, if known.

### Primary Audiences

Who are the individuals or organizations that have formal power to make policy change related to your policy goal?

EXAMPLE

Name: Dr. Lia Tadesse

Title/Position: Minister of Health

Contact information: n/a

Name: \_\_\_\_\_

Title/Position: \_\_\_\_\_

Contact Information: \_\_\_\_\_

Name: \_\_\_\_\_

Title/Position: \_\_\_\_\_

Contact Information: \_\_\_\_\_

Name: \_\_\_\_\_

Title/Position: \_\_\_\_\_

Contact Information: \_\_\_\_\_

Name: \_\_\_\_\_

Title/Position: \_\_\_\_\_

Contact Information: \_\_\_\_\_

Name: \_\_\_\_\_

Title/Position: \_\_\_\_\_

Contact Information: \_\_\_\_\_

### Secondary Audiences

Who can influence the actions, opinions, or behaviors of the primary audiences?

EXAMPLE

Name: Dr. Mekdes Daba

Title/Position: President of Ethiopian Society for Obstetricians and Gynecologists

Contact information: n/a

Name: \_\_\_\_\_

Title/Position: \_\_\_\_\_

Contact Information: \_\_\_\_\_

Name: \_\_\_\_\_

Title/Position: \_\_\_\_\_

Contact Information: \_\_\_\_\_

Name: \_\_\_\_\_

Title/Position: \_\_\_\_\_

Contact Information: \_\_\_\_\_

Name: \_\_\_\_\_

Title/Position: \_\_\_\_\_

Contact Information: \_\_\_\_\_

Name: \_\_\_\_\_

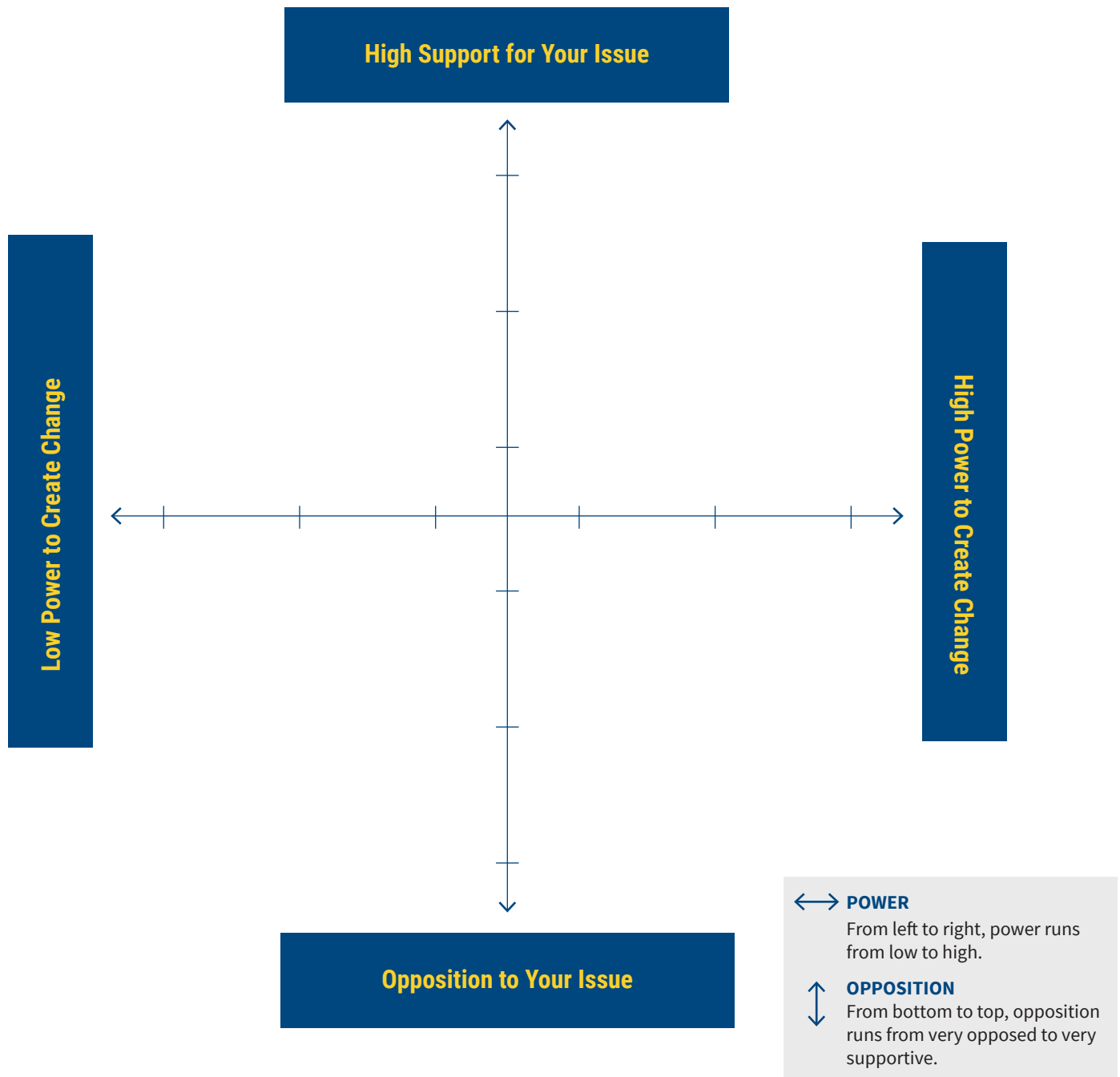
Title/Position: \_\_\_\_\_

Contact Information: \_\_\_\_\_

## Exercise 3B

## Audience Power Map

Plot the primary audiences you identified in [Exercise 3A](#) on the audience power map below based on the level of power and degree of support. The vertical axis represents how powerful the decisionmaker is to create your desired change and the horizontal axis represents their level of support for your issue. Go back to Audience Power, Support, and Knowledge in Section 3 to remind yourself of factors you should consider to plot your primary audience; you may need to conduct additional research. **Focus on those with the most power and support.** Revisit this map and update it continuously as you learn more.



## Exercise 3C

# Audience Knowledge Map

Select **at least two** primary audiences from [Exercise 3B](#) that you plotted in the upper right-hand quadrant (e.g. high power to create change and the high support for your issue). Research these selected audiences in-depth and list the information you find for each category.

	Primary Audience A
	<p>EX: <i>Dr. Lia Tadesse (Minister of Health)</i></p>
<p><b>Awareness</b> What do they already know about the issue?</p>	<p>EX: <i>May consider self-administration of abortion medication as out of her domain of responsibility.</i></p>
<p><b>Sourcing</b> How do they get information?</p>	<p>EX: <i>National newspapers, Twitter, National Health Management Information System, and meetings with staff.</i></p>
<p><b>Motivation</b> What motivates them to act?</p>	<p>EX: <i>Being seen as action-oriented and a humanitarian.</i></p>
<p><b>Influence</b> To whom do they listen? <i>(Think: This is where your secondary audience comes in.)</i></p>	<p>EX: <i>Media, religious leaders, medical associations, political leaders.</i></p>
<p><b>Accountability</b> What constraints or commitments do they face?</p>	<p>EX: <i>Conservative advisors and program managers who may be opposed to abortion.</i></p>

	Primary Audience B
<b>Awareness</b> What do they already know about the issue?	
<b>Sourcing</b> How do they get information?	
<b>Motivation</b> What motivates them to act?	
<b>Influence</b> To whom do they listen? <i>(Think: This is where your secondary audience comes in.)</i>	
<b>Accountability</b> What constraints or commitments do they face?	

### Exercise 3D

## Opposition Audiences and Arguments

List any opposition audiences and corresponding arguments that could potentially hinder or combat your progress toward your safe abortion policy goal. Make sure to be as specific as possible, noting down names and titles/positions if known. You will have a chance to develop evidence-based counterarguments in [Exercise 5A](#).

Audiences	Arguments
<b>EX.</b> Religious leaders	1. Having an abortion is morally wrong.
	1. 2. 3.
	1. 2. 3.
	1. 2. 3.
	1. 2. 3.
	1. 2. 3.

## Exercise 4A

## Policy Objectives

Review your policy goal from [Exercise 2A](#) and primary audiences from [Exercise 3A](#) and develop **only one** policy objective for each strategic approach to policy change. Make sure each objective is SMART (specific, measurable, achievable, realistic, timebound) and starts with an action verb. Your policy objectives should support your policy goal and contribute to incrementally attaining it. Reference the Policy Communication Planning case study in Section 4 if you need an additional example.

## Policy Learning

How you will get policymakers to learn about the problem and solutions related to your issue.

EX. Share evidence with national leaders in the next 12 months about other countries' experiences with self-administration of abortion medication and its impact on reducing costs.

## Issue Attention Focusing

How you will highlight the importance of your issue to decisionmakers so they prioritize it.

EX. Help journalists in the next 12 months to understand the barriers that women face in accessing safe abortions in Ethiopia.

## Policy Community Strengthening

How you will build alliances or networks with different types of organizations that are committed to a common cause.

EX. Collaborate with the Consortium for Comprehensive Abortion Care (an advocacy group led by the Ethiopian Society for Obstetricians and Gynecologists) to build consensus in the next 12 months among other advocacy coalitions working to expand access to safe abortion.



## Exercise 4B

# Communication Tactics

Review the policy objectives you developed in [Exercise 4A](#) and create corresponding communication tactics for each objective. It is likely you will need multiple tactics to achieve one goal, so list as many as you plan to undertake.

### Policy Learning

How you will get policymakers to learn about the problem and solutions related to your issue.

EX. *Hold a brief meeting with policymakers.*

- 1.
- 2.
- 3.
- 4.

### Issue Attention Focusing

How you will highlight the importance of your issue to decisionmakers so they prioritize it.

EX. *Organize a journalist training on more options for women to access safe abortion care.*

- 1.
- 2.
- 3.
- 4.

### Policy Community Strengthening

How you will build alliances or networks with different types of organizations that are committed to a common cause.

EX. *Revitalize the existing coalition of medical and legal professionals.*

- 1.
- 2.
- 3.
- 4.

## Exercise 5A

## Evidence-Based Policy Messages

Select one of your audiences from [Exercise 3A](#) (it can be primary or secondary) and outline the three parts of an effective policy message tailored to this audience. You might also review the opposition audiences and arguments you noted in [Exercise 3D](#) to develop evidence-based counter messages.

## Target Audience

EX. Dr. Lia Tadesse (Minister of Health)

## Evidence

What is the issue? What facts and examples support the problem? What evidence exists in favor of your proposed solution?

EX. In 2016, for every 100,000 live births, 416 women died while pregnant or within 42 days of pregnancy termination.

## Context

Why should this issue matter to your target audience? How is the issue impacting the community and what approach will you use to motivate your audience?

EX. Restricted access to safe abortion services leads women to obtain abortions in ways that endanger their lives and lead to increased maternal mortality. Achieving SDG 3 to reduce maternal mortality is a national priority for Ethiopia that will support its social and economic development.

## Call to Action

What is your proposed solution to the problem? What do you recommend your target audience do about it? What immediate actions can they take to support the solution and address the problem?

EX. Revising the Technical and Procedural Guidelines for Safe Abortion Services to include self-administration of abortion medication will help achieve SDG 3 and reduce maternal mortality.

Next, combine the elements together into a concise and compelling statement: your policy message. Repeat this exercise as many times as needed to develop messages for audiences you intend to target with your policy communications.

## Policy Message

EXAMPLE In 2016, for every 100,000 live births, 416 women died while pregnant or within 42 days of pregnancy termination. Restricted access to safe abortion services leads women to obtain abortions in ways that endanger their lives and lead to increased maternal mortality. Achieving SDG 3 to reduce maternal mortality is a national priority for Ethiopia, that will support its social and economic development. Ethiopia can achieve SDG 3 and reduce maternal mortality by revising the Technical and Procedural Guidelines for Safe Abortion Services to include self-administration of abortion medication.

## Exercise 5B

# Messengers

Identify potential messengers to deliver the policy messages you created in [Exercise 5A](#). There may be multiple messengers who can deliver the message but prioritize the one that is the best choice. Make sure you indicate which of your target audiences from Exercise 5A each messenger will be responsible for.

Audience	Messenger
EX. Dr. Lia Tadesse (Minister of Health)	Ethiopian Society for Obstetricians and Gynecologists

## Exercise 6A

# Communication Entry Points

List possible entry points for engaging the target audiences you identified in [Exercises 5A](#) and [5B](#) to drive conversation around expanding access to safe abortion. Consider reaching out to your partners and networks to identify entry points or plan to create new ones. Include a description of the entry point, the estimated date when it will take place, and the target audience you will reach through it. **Use the check boxes to the left to mark your top priority entry points.**

	Entry Point	Estimated Date	Target Audience	
EX.	Journalist round table on International Safe Abortion Day	28 September	Media	
				TOP PRIORITY? <input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

## Exercise 6B

# Timeline and Workplan

Review your communication tactics from [Exercise 4B](#) and develop a workplan for each tactic. Make sure to consider the target audiences and communication entry points you noted in [Exercise 6A](#). As much as possible, you should aim to create a workplan that is specific and realistically reflects what your organization is capable of doing within your implementation timeline. You will have at least three planned tactics, so you will need to repeat the workplan as many times as needed to cover them all.

Tactic	
	<p>EX. <i>Journalist training on more options for women to access safe abortion care, culminating with a public roundtable on International Safe Abortion Day.</i></p>
Target Audience	<p>EX. <i>National and subnational print and broadcast journalists.</i></p>
Persons/Partners Responsible For Carrying Out the Tactics	<p>EX. <i>Our organization's communication officer.</i></p>
Possible Partners	<p>EX. <i>Members of the Ethiopian Society for Obstetricians and Gynecologists.</i></p>
Required Resources/ Costs and Who is Providing Them	<p>EX. <i>Press packets, venue, refreshments.</i></p>
Entry Points	<p>EX. <i>International Safe Abortion Day (28 Sept).</i></p>
Timeline	<p>EX. <i>July – September.</i></p>

Tactic	
Target Audience	
Persons/Partners Responsible For Carrying Out the Tactics	
Possible Partners	
Required Resources/ Costs and Who is Providing Them	
Entry Points	
Timeline	

## Exercise 6C


# Policy Dialogue Practice

Complete the blank flashcards below to anticipate and practice answering common questions you might receive about abortion, including personal attacks, so you will be ready to keep conversations solutions-oriented and focused on data and evidence. You may find it helpful to review the opposition audiences and arguments you noted in [Exercise 3D](#) and any evidence-based messages to address these arguments you developed in [Exercise 5A](#). An example is provided to get you started.

Question	Answer
<div data-bbox="152 760 175 865">EXAMPLE</div> <p>How accurate are your data?</p>	<p>The data that we have shared are from the most accurate sources available. We used direct language from Article 534 - Termination of Pregnancy on Medical Grounds of The Penal Code of Ethiopia 1957, which was revised by the Federal Democratic Republic of Ethiopia in 2005. We also used a report called Making Abortion Services Accessible in the Wake of Legal Reforms: A Framework and Six Case Studies, which was published in 2012 by the Guttmacher Institute, a leading research and policy organization committed to advancing sexual and reproductive health and rights in the United States and globally.</p>


Question	Answer


✂


  
FOLD


Question	Answer


✂


  
FOLD





Question	Answer

FOLD





Question	Answer

FOLD




Question	Answer

FOLD



Question	Answer

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Question	Answer

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Question	Answer

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Question	Answer

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Question	Answer

✂

FOLD

## Exercise 7A

## MEL Metrics

Review your policy objectives from [Exercise 4A](#) and add them below. For each objective, develop corresponding outputs and outcomes to monitor and measure success for each. It may be helpful to review your communication tactics from [Exercise 4B](#) to help develop your outputs. You should use your MEL metrics created here to measure the overall success of your policy communication strategy!

<b>Policy Objective</b>	<b>EX.</b> <i>Help journalists in the next 12 months to understand the barriers that women face in accessing safe abortions in Ethiopia.</i>	
	<div data-bbox="282 680 909 806"> <b>Outputs</b>  Short-term results generated directly from your policy communication tactics. </div> <div data-bbox="282 806 909 1199"> <b>EX.</b> <i>Number of news articles produced by journalists over 12 months.</i> </div>	<div data-bbox="919 680 1549 806"> <b>Outcomes</b>  Longer-term results generated indirectly from your outputs that capture broad changes or effects. </div> <div data-bbox="919 806 1549 1199"> <b>EX.</b> <i>Number of decisionmakers that used data or messaging from news articles in their public statements or documents in the last 12 months.</i> </div>
<b>Policy Objective</b>		
	<div data-bbox="282 1415 909 1541"> <b>Outputs</b>  Short-term results generated directly from your policy communication tactics. </div> <div data-bbox="282 1541 909 1908"></div>	<div data-bbox="919 1415 1549 1541"> <b>Outcomes</b>  Longer-term results generated indirectly from your outputs that capture broad changes or effects. </div> <div data-bbox="919 1541 1549 1908"></div>





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## Acknowledgments

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