

10 tips

for successful
MALARIA
VACCINE
advocacy

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about this BOOKLET

The PATH Malaria Vaccine Initiative, in collaboration with Burness Communications, works with malaria vaccine researchers and scientists in African countries to foster a network of skilled scientist-advocates. This work, part of a program known as the Malaria Vaccine Advocacy Fellowship, aims to bridge the worlds of science and policymaking and to help ensure that policymakers at national, regional, and international levels have the information they need to make timely and informed decisions as soon as a first malaria vaccine becomes available for use.

Slow decision-making can contribute to a substantial lag between the availability of lifesaving interventions, such as vaccines, and developing countries' access to them. Researchers and scientists working on new health interventions can help to close this costly gap by becoming advocates in their own right.

This booklet presents a set of advocacy tips, success stories, and examples of advocacy efforts. These examples demonstrate that while simple actions—whether briefing policymakers, writing an opinion piece, or inserting a paragraph into a key speech—may seem to be small steps on their own, their collective impact can be significant over time.

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10 tips

for successful
MALARIA
VACCINE
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1. Build advocacy into your work schedule.
2. Cultivate relationships within key audiences.
3. Establish alliances with fellow advocates.
4. Draw on your personal connections.
5. Identify a few well-placed champions.
6. Develop finite advocacy goals.
7. Find out how members of the media work and what they need.
8. Take advantage of existing policy discussions.
9. Highlight the costs of action and inaction.
10. Celebrate achievements and progress.

“ Individuals or groups within your network are essential parts of your advocacy tree. ”

1. Build advocacy into your work schedule. Advocacy is a process; it takes time to develop relationships and secure your “ask.” *Don’t approach advocacy as a one-time activity.* You need patience for those periods of little progress. Build advocacy into the definition of who you are and what you do. For a scientist-advocate, setting aside 10 percent of your time for advocacy is a reasonable goal.

2. Cultivate relationships within key audiences. Relationships are everything. Someone who remembers meeting you is more likely to respond to your phone call. Even one-time personal encounters can affect how a policymaker, journalist, funder, or collaborator receives you later.

3. Establish alliances with fellow advocates. Collaborate with other advocates within and across countries. *Don’t act as if you’re alone; your effectiveness will be diminished.* Tap into communities. You will

be far more effective when you include the voices of those who have experienced malaria’s impact.

4. Draw on your personal connections. Individuals or groups within your network are essential parts of your advocacy tree. They may be helpful when you need to plan an activity, share information, or contact a policymaker, funder, or other influential person. *Don’t underestimate the value of your informal network.* A school friend, family friend, or neighbor may be able to connect you to a key contact or valuable resource.

5. Identify a few well-placed champions. A few people from among your audiences often can carry your message more credibly than you can. Choose champions wisely, bearing in mind the three I’s: integrity, interest, and intellect. Your champions must be committed to your issues and must be prepared to endorse them publicly and passionately.

6. Develop finite advocacy goals. Even small policy changes can have a huge impact. Choose a goal that can be attained in the short or medium term with the help of a few colleagues and champions. A hearing in parliament, an opinion piece, or a well-thought-out paragraph inserted into a policymaker's speech are all possibilities. These interim steps are the underpinnings of successful advocacy and can create fertile ground for major changes over time.

7. Find out how members of the media work and what they need. Like you, media professionals are busy people with jobs. If you try to understand how they work, you are likely to be more successful in having them understand your overall story and consider your point of view. *However, don't confuse your relationship with the media with friendship. Reporters are not your friends.*

8. Take advantage of existing policy discussions. Some of your greatest impact will come when audiences are already paying attention. *You don't have to create*

new events to be effective. Meetings of the African Union and African health ministers, or events such as World Malaria Day, provide ready-made opportunities for advocacy efforts.

9. Highlight the costs of action and inaction. Malaria remains a terrible burden. For those who question the value of investing in vaccines and in malaria research and development in general, remind them of the lost lives, jobs, and education, and of the shillings, francs, and dollars spent. Remind them that a dramatic reduction in the disease's impact would be a tremendous boost to both quality of life and the economy.

10. Celebrate achievements and progress. Provide your audiences with examples of success whenever you can. A continuous focus on negative statistics and bad news can be overwhelming. Tell your audiences about the progress that has been made, how they may have helped, and what role they can play to solidify or advance that success.

10

questions for an advocate

1. Who am I trying to help?
2. What is my personal involvement with my topic?
3. What key policy change will make a difference?
4. What are the obstacles to policy change?
5. Who controls the decision?
6. Who are my potential allies or partners and who supports them?
7. Who are my potential detractors and who supports them?
8. Who are my key audiences?
9. What are my key messages?
10. What is my “ask”?

stories from THE FIELD



CO

Dr. Ramadhani Abdallah Noor TANZANIA

I am a Tanzanian physician with public health training from the Harvard School of Public Health. My experience is in malaria vaccine research. Working with the African Malaria Network Trust, I actively contributed to a number of malaria vaccine trials in Africa. I received training as a Malaria Vaccine Advocacy Fellow in 2009. This training provided me with the advocacy skills needed for the fight against malaria.

Since my advocacy training, I have delivered messages on the tools available for malaria control and elimination and showcased the potential role of a malaria vaccine. Through media interviews, national technical committees, malaria control forums, academic lectures, and funders' and policymakers' meetings, I have provided updates on the clinical development of malaria vaccines and implications for programs, national governments, donors, and the public.

I am a member of a technical advisory group that brings on board different stakeholders for malaria vaccine development and deployment in the country. This committee works closely with the PATH Malaria Vaccine Initiative on adoption of the Malaria Vaccine Decision-Making Framework, a tool that is necessary for timely introduction of a malaria vaccine into the existing malaria control tools matrix, once a vaccine becomes available.

In close collaboration with malaria control stakeholders in Tanzania and under the leadership of Dr. Salim Abdulla of the Ifakara Health Institute, we put together an annual Tanzania Malaria Control Forum, which began in 2010. This forum brings experts from the scientific field, programs, services, academia, media, parliament, and the public to discuss comprehensive malaria control efforts, and to share results, challenges, and opportunities for individual malaria interventions and tools.

My advocacy on the need to prepare early for malaria vaccines included presentations in 2011 to the Africa Caribbean Pacific – European Union Joint Parliamentary Assembly Committee on Social Affairs and Environment in Brussels; a Friends of the Global Fund meeting on vaccines in Paris; and the Parliamentary Forum for Eastern and Southern Africa in Lusaka, sponsored by the Roll Back Malaria Partnership.

My take-home messages are that:

- Malaria vaccines are potential tools for control and eradication.
- Progress has been made in malaria vaccine research; we have hope for a first-generation vaccine.
- Ensuring accessibility of a vaccine is nearly as challenging as developing the vaccine itself.
- Timely introduction of malaria vaccines needs early country-level planning.

I have learned that:

- Many endemic country and donor country parliamentarians and other policymakers are not up to date on the progress in malaria vaccine development or on the implications of this progress for their national governments.
- Scientists need advocacy training in order to communicate ongoing efforts in malaria vaccine research and development.
- A critical mass of African malaria scientists advocating for malaria vaccines and working closely with national technical, policy, and operational or programmatic implementers will make a difference.
- Frequent interaction with policymakers and with representatives from the political and social sectors in Africa and at the international level will advance the agenda for malaria vaccine development and deployment.



stories from **THE FIELD**

con

Dr. Felicia Owusu-Antwi **GHANA**

I work with the World Health Organization Ghana country office

as the National Professional Officer for Malaria. My work entails technical support to the National Malaria Control Program (NMCP) in collaboration with other health and development partners in malaria control.

I also coordinate the Malaria Vaccine Decision-Making Framework process in Ghana, together with the NMCP. The Decision-Making Framework is a tool that assists countries in identifying data needs and processes required for use of a successful malaria vaccine candidate. Information-sharing, facilitation of policy dialogues, advisory support, and advocacy are the main requirements for this coordination.

My training as a Malaria Vaccine Advocacy Fellow in July 2010 in Accra provided me with good communication and advocacy skills, particularly for on-camera interviews, and has enriched my messages, making sure the problem, the solution, the progress, and the call to action are clearly delivered.

In June 2011, our technical advisory group meeting had the participation of parliamentarians for the first time, something I attribute to the advocacy skills I acquired. This development led to positive political engagement with the parliamentarians and a greater willingness on their part to assist in solving some of the challenges faced by the trial teams. The parliamentarians also expressed interest in participating in working group sessions.



I have learned a number of lessons as an advocate:

- We assume that our policymakers understand scientific language the way we do; however, they need information to be delivered in a simplified, rational manner.
- Advocacy skills are important for scientists. These skills ensure that some of the important research findings are translated into policies and interventions—and in good time.
- Policymakers will never endorse an initiative with which they are not comfortable. It is important to engage them early enough for their buy-in.
- Scarcity of resources makes policymakers very pragmatic. Therefore, the cost-effectiveness of any initiative or intervention should be the advocate's major focus, clearly demonstrating that saving lives also translates into wealth.



10 excerpts

Malaria vaccine advocacy

1. *The Citizen (Tanzania)*

September 25, 2011

Search for malaria vaccine intensifies.

CHARLES WANGA

We don't have a malaria vaccine. Yet malaria is the number one killer among children in Tanzania, contributing to more than a third of all deaths of children below five years of age. *Kwanini hakuna chanjo ya malaria*—Why is there no malaria vaccine? This is the question mothers—indeed thousands of people—are asking in Tanzania. And this is the same question scientists and the malaria research community have been grappling with over the past two decades. Finally, and for the first time in the history of our war against this deadly scourge, there is hope.

2. *The Guardian (Tanzania)*

September 1, 2011

That hole in immunisation cards in Tanzania must go.

CHARLES WANGA

There is no sense in waiting years to make decisions about the use of malaria vaccines. Our policy leaders should begin these deliberations now, in time to act if—and when—a malaria vaccine candidate becomes available. This time, we have an opportunity to do it right and prepare ahead of time. The Tanzania Food and Drug Authority, the National Malaria Control Program, the Expanded Programme on Immunization, the Medical Stores Department, scientists, technocrats—all stakeholders—should put all hands on deck and work together to prepare our systems and sort out finances, logistics and distribution, today.

3. *The New Vision (Uganda)*

August 24, 2011

Uganda: Government should prepare people for a malaria vaccine.

NOAH R. NYENDE

Malaria is preventable and treatable, and progress has been made, using tools like insecticide-treated nets, artemisinin-based combination therapies (ACTs) and indoor residual spraying, but despite this, malaria remains a leading cause of illness and death among young children in Uganda.

We must do everything we can to bring a vaccine into our arsenal. We know that polio, smallpox and measles have been reduced to rare occurrences worldwide, only because a vaccine was created to combat these diseases.

4. East African Business Week

April 26, 2011

Malaria fight needs new tools.

TINTO HALIDOU AND SALIM ABDULLA

Across the continent, in the small town of Nanoro, Burkina Faso, a fully equipped research center was built on the grounds of the San Camillo District Hospital. Although Nanoro had been identified as a sentinel site for malaria drug resistance surveillance, research was severely limited by a lack of electricity and adequate infrastructure to support a permanent team. Investment for the vaccine trial encouraged the government to extend the electric grid to the site and town.

The center grew from two projects and 10 staff in 2009, to 20 grants providing professional employment for 150 clinical and support staff today.

Such strengthening of research capacity bodes well for the battle against malaria and other health challenges facing the continent.

5. Africa Review

April 25, 2011

African researchers on the move against malaria.

TINTO HALIDOU AND SALIM ABDULLA

Malaria is not something we usually celebrate. It is something we overcome. Day in and day out, too many of us struggle against its insidious threat to our children. As scientists studying ways to defeat malaria, we witness the toll all too often. However, on this World Malaria Day, while reflecting on the burden of the disease, we should pause to celebrate the strides made in the fight against it.

6. FasoZine (Burkina Faso)

April 25, 2011

Chercheurs Africains en marche contre le paludisme.

TINTO HALIDOU AND SALIM ABDULLA

Récemment, on a vu deux phénomènes se conjuguer dans la quête d'un vaccin antipaludéen efficace: les efforts menés pour élaborer de nouveaux outils de prévention et une campagne de renforcement des capacités africaines dans le domaine de la recherche clinique. La vaccination constitue l'une des meilleures interventions possibles en matière de santé publique, mais un vaccin antipaludique semblait hors de portée. Aujourd'hui pourtant, un candidat prometteur a progressé plus loin que tout autre au stade des essais cliniques.

7. GaboNews (Gabon)

April 25, 2011

Chercheurs Africains en marche contre le paludisme.

TINTO HALIDOU AND SALIM ABDULLA

De l'Afrique de l'Est à l'Afrique de l'Ouest ou dans des centres situés entre les deux, nous voyons des chercheurs et des personnels de santé africains, des décideurs politiques et des collectivités locales qui travaillent dur pour mettre des mesures de contrôle en place aujourd'hui et créer de nouveaux outils pour demain. Si nous persévérons, nous pourrons un jour réellement commémorer l'éradication de la maladie lors de la Journée mondiale de lutte contre le paludisme.

8. ONE (online)

April 27, 2010

Closer than ever.

JOHN LUSINGU

Malaria has a devastating impact on African communities. A vaccine against malaria has been a long-held goal and could save thousands of lives every year. It would complement existing tools such as bed nets, spraying and treatments.

This morning, as I spoke to the families who are partners in our work, I couldn't help but think how lucky I am to witness history in the making. I hope to keep all of you updated as we move forward and make the malaria vaccine a reality.

Here at Korogwe, a team of researchers and clinicians have been collaborating closely with community leaders, families and local and national governments for nearly a year to conduct this trial to the highest standards.

9. Capitol Hill briefing

April 25, 2009

New tools in the fight against malaria.

RUTH OWUSU

One day, three weeks into my internship, I held a little girl in my arms, a child who had been brought to us too late to be saved. I was at the breaking point. For my own sanity, I knew I had to make a choice—either to see each young child's death as an ordinary, everyday event so I could stop caring so much, or to see each death as a tragedy that did not have to happen.

I chose the latter, and that is why, for me, today and any day and any year is a good day and a good year to talk about malaria vaccines, because an effective malaria vaccine would be a tool with the potential to save lives, like that of the little girl whose face I still see every day.

10. NPR – Tell me more

October 25, 2007

Doctor: Malaria vaccine is within reach.

FRED BINKA

The vaccines we have today, most of them are against either viruses or bacteria. We actually haven't had a vaccine against a parasite like malaria. Number two, the amount of resources that have been channeled to really address this problem until recent years has been very piecemeal, and so we've not really made the progress that we expected.

We have to test these vaccines in the populations in which they will be used. So that's why we have to work hard to overcome challenges like electricity, water, trained personnel, laboratories, equipment, maintenance and so on.

Unfortunately, if we were to take this to where these conditions are ideal, this will not represent the real-life situations in which we're going to use these drugs.

ADVOCACY TREE

contacts
friends of the family
colleagues relatives
friends of friends family members
neighbors **network** friends
acquaintances **formal** **informal**
connections

RELATIONSHIPS

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