GIVING VOICE TO CHILDREN:
Strengthening Advocacy for Child Health and Well-Being
A Workshop Report

Proceedings of a Workshop held January 12-13, 1993
at Rockefeller University’s Seven Springs Conference Center
Mt. Kisco, New York

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January 1993

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Agency for International Development

UNICEF
Erratum

Cover illustration credit should read
"A child advocacy poster by Katie Rush, age 10."
ACKNOWLEDGEMENTS

The workshop sponsors would like to express their appreciation to the following people and organizations for their assistance in the preparation and follow up to the meeting.

The staff of the sponsoring organizations listed on the front cover, and especially to Susan Muir of the Rockefeller Foundation for her help with logistics and smooth communication.

The staff at Rockefeller University’s Seven Springs Conference Center for their hospitality and excellent meals.

W. Henry Mosley of The Johns Hopkins University, Peggy Curlin of CEDPA and Petra Reyes of the Agency for International Development for their thoughts and insights during the planning of this meeting.

We are extremely grateful to STATISTICA INC., under contract to AID, for their assistance in the planning and coordination of the meeting and the preparation of the final report. In particular we would like to thank Kamran Grasselly for his work in preparing the information packets; Nada Brice for her outstanding work in coordinating travel arrangements for U.S. and developing country participants; Aaron Bowles for his assistance with the graphic design; and Ellyn Ogden for editing the workshop report, supervising the preparation and logistics for the meeting and for working with children on advocacy posters for the cover art.

To the children of Highland View Elementary School in Silver Spring, Maryland, USA and their art teacher, Margaret Guerin, we offer a special thank you for creating the beautiful and provocative child advocacy drawings submitted for the cover of our report. We’re sorry we could only select one.

The Agency for International Development
Rockefeller Foundation
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April 29, 1993
When I pretend that I'm looking at the present from some place else, I can easily see RESULTS!, the Children's Defense Fund, Bread for the World, and other groups here writing under the pen name of Euripides, because social justice was the underlying theme in almost everything that he wrote.

The value studying history is that we realize that everything, every idea, every product, every person, every problem has a history, and that it's a cause-and-effect reaction that we can trace all the way to the present time. It is this realization that this is a cause-and-effect world that gives us the responsibility for the future.

That is the reason to study history — to understand our responsibility to the future—because everything we do individually or collectively is going to determine what happens tomorrow.

— William Foege
INTRODUCTION

Advocacy: the act or process of pleading a cause
Advocate: one that defends or maintains a cause or proposal

For the last decade, there has been a highly successful global effort to increase the survival of children. A coalition of countries, organizations, and donors have worked together to increase immunization, improve basic child health services and strengthen other programs designed to reduce child mortality. International awareness of and commitment to solving the problems of children have increased.

There is increasing agreement that the technical means to improve children's lives exist; what is needed is the political will and social mobilization to deliver them on a sustained basis. The World Declaration on the Survival, Protection and Development of Children (Annex A) adopted at the World Summit for Children lays out specific goals that have been agreed to by 139 heads of state and include: reducing child mortality by one-third, ensuring that 80 percent of children complete primary education, universal access to safe drinking water and reducing child malnutrition by one half by the year 2000. Advocacy is required to make sure that these promises are kept.

The Plan for Action calls for all forms of social mobilization and for,

"non-governmental organizations, social, cultural, religious, business and other institutions...to play an active role in support of the goals."

The purpose of this retreat was to identify ways that advocacy efforts can help sustain commitment to child health and well-being, especially through local and national efforts, and advocacy by non-governmental organizations. To that end, the Rockefeller Foundation, the Agency for International Development and UNICEF sponsored this retreat to assess the current global status of advocacy for child health and explore ways to strengthen and sustain it. Participants were leaders concerned with the health and well-being of children from both developed and developing countries.

The meeting and this report were structured to: 1) introduce the issues surrounding children, document successes so far and indicate areas still needing attention; 2) describe the lessons learned with working with governments on advocacy thus far; and 3) look at the advocacy process and successful approaches (See Annex B for meeting agenda). The meetings focused on six key areas:

I. Developing Leaders and Mobilizing Communities for Advocacy and Action
II. Policy Advocacy
III. Monitoring the Status of Children
IV. The Role of Communication
V. Resource Mobilization
VI. Forging Alliances.
Discussions followed the panel presentations and allowed all participants (See Annex C for list) to offer personal insights, make suggestions and ask questions. We have included as much of the discussions as possible to give the reader a sense of the complexity and depth of thinking that has already taken place and highlighted particularly inspirational quotations. The meeting summary provides recommendations on how to create an "absolutely astounding advocacy association."

We expected the meeting to be stimulating, but we had not expected that so much practical wisdom on how to advocate for children would be shared. One outcome of the meeting was that we all left feeling that we had tools to become better advocates. Each of the six key topic sections of the meeting report presents practical “how-to” information followed by discussion highlights. We think you will find them useful as well, as we work together to strengthen national advocacy in developing countries on behalf of children and their families so that the goals laid out at the World Summit can be realized.

A second outcome of the meeting was the recommendation to create a sub-committee on child advocacy within the Task Force for Child Survival and Development. Originally formed in 1984 with support from WHO, UNICEF, UNDP, The World Bank and The Rockefeller Foundation, the overall mission was to assist its sponsors and others in accelerating global immunization and other child survival efforts. In 1990, it was recommended that the health goals resulting from the World Summit serve as the basis for continued efforts by the Task Force. The establishment of an advocacy committee offers NGOs and bilateral agencies a forum to contribute to the work of the Task Force.

During this meeting, larger, more fundamental questions came under discussion: Why is child advocacy necessary at all? Is it because society does not value children? Are other things more important to parents, communities, governments? Are children not a scarcity? What are the perceived trade-offs to society or individuals if we invest in children? If we do not? Does the increasing demand for short-term, identifiable results cloud our eyes to the long-term investment in our children? Are the dividends from investments of this sort too nebulous or intangible for today's sound bites? Who is accountable? Can the hopelessness and cynicism most people feel be overcome? How do we empower people to think they can make a change?

We did not answer these questions completely, but the two days of discussion recognized the need for action. We invite you to thoughtfully read the proceedings of our retreat and hope it prompts you to act. Quoting James Grant, "Ours is the first century — actually the first generation — which can think about bringing progress to mankind as a whole... We have the means to affect the survival of children in our hands." The real questions for today are not WHAT? or WHY?, but HOW? and WHEN?

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Welcome and Highlights of Opening Remarks

The session was opened by Dr. Nyi Nyi of UNICEF, Dr. Ann Van Dusen of the U.S. Agency for International Development, and Dr. Scott Halstead of the Rockefeller Foundation. A common theme in their remarks was that the revolution for children's survival and well-being has not been secured despite the extraordinary progress of the last decade. Assuring attention to the problems of children requires a sound base and a sense of ownership by people. The essential ingredient of child survival, indeed the turning point in the war for children, will be how to assure advocacy on their behalf.

Anticipation of a peace dividend, the success of the World Summit, and the ratification and support for the Convention on the Rights of the Child by most governments, indicate an increase in the political will to focus on children's needs. Signals from the new U.S. administration indicate that children are high on the political agenda.

The fight for child survival and well-being has been compared to running a marathon or climbing a mountain: one does not stop half-way but pushes on to the top. The fact that EPI has achieved 80%-plus immunization coverage indicates things are do-able. Regional meetings have reached a good degree of consensus and support of common goals. These goals now include a broad range of development issues too, not just survival.

We have learned that intermediate goals can motivate and stimulate continued activity. Goals reachable within the political life of decision-makers have a greater chance for support. Thus, UNICEF plans to embark on a series of regional meetings to look at intermediate goals. This movement needs both advocacy and operational capacity to be effective and more than money or a human resource base to be sustainable. Social mobilization is key to sustainable strategies. There has been growth in institutionalized capacity in many areas, but not yet advocacy.

The issue before us is how to maintain the socio-political commitment that lead to gains in the 1980's. Gains are fragile and we are starting to see some decline. How do we build the ability to monitor changes and make changes at the local level? We need to re-examine our resource needs. Have we under-utilized or underestimated the role of communities and NGOs? What mechanisms exist to broaden the goals of NGOs? Now we see more clearly the strong role communities must play and the need for access to information and people.

In many ways advocacy brings on a wide range of social improvements.
The International Challenge

Henry Mosley, Professor and Chairman of the Department of Population Dynamics at Johns Hopkins University School of Public Health, described population and health trends, the implications of these data for children's health and well-being, and opportunities for improvement (see Annex D).

In the past 15 years there have been extraordinary improvements in the international health status. Global recession has not stopped progress of the curves. Nonetheless, there are regional differences and today, the leading causes of mortality — pneumonia and diarrheal diseases, peri- and neonatal complications — are about 90% preventable by applying technological solutions that are readily available. The numbers speak clearly: 2.1 million vaccine-preventable deaths; 2.5 million from dehydration; 40 million could be positively affected by Vitamin A supplementation; iodine supplementation could prevent 6 million cretins and 20 million cases of mental retardation; 10 to 20 million cases of low birth weight are preventable; 1 million cases of blindness, deafness, retardation are preventable by treating congenital syphilis and gonorrhea; and 2 million deaths could be prevented with available contraception leading to better birth spacing.

Today there are approximately 148 million births worldwide per year. This is not going to change much over next few years, peaking at 157 million per year in 2020. Of all births, 90% will be in the developing world, as well as 98% of deaths. Replacement fertility has been reached or will be reached soon everywhere — except Sub-Saharan Africa. There will be an increase in the number of under-fives up to 2020 (the result of increased child health, not increased births).

What will change is the older population, which will double in the next decade; the world's over-65s will grow to over a billion in next decade and to 1.4 billion by 2050. Contrary to intuition, the vast majority of over-65s will be in developing countries. In all countries the future holds increased competition for medical care and health resources.

There are many constraints and barriers to putting children first. Demographic trends, technological advances, increasing professional sophistication, commercial interests and economic development can all work against child survival. The pressure of society on and by the medical community is for high-tech interventions. Simpler, cheaper interventions for children have a tendency to get pushed aside.

Donor-driven policies have achieved tremendous gains — 80% immunization coverage and a 40% reduction in deaths due to diarrhea — yet these can have a rebound effect: in fact, many programs have re-channelled child-health resources to other programs. A successful pro-child government needs appropriate policies and laws coupled with enforcement, improved resource allocation that gives a fair portion to children, strategic planning, educational transformation, community leadership, private sector involvement, and mass communication.
Working With Governments on Advocacy

Governments have been the recipients of successful advocacy in the past. Accomplishments so far have included the Declaration on the Rights of the Child and Global Plan of Action. Investments in health technology research and development may not initially produce products easily utilized in developing countries at affordable prices, but if we keep making technologies better, these breakthroughs will come.

In thinking about this presentation Margaret Catley-Carlson first asked, "What are the constraints to advocating successfully with government?" Her answers:

1. Lack of conviction that the task is do-able.
2. Not a loud enough voice in the clamor. Successful movements such as those for environmental causes or the elderly have a loud, clear voice.
3. Lack of convinced populations. More research is needed on public attitudes to determine why there is no community support for children's issues.
4. Fear to tread on difficult issues by donors and others, such as the difficult parts of Child Survival like Family Planning. We need the courage to face all parts of the issue.

Once these constraints can be addressed, the next question becomes what are the key elements for influencing governments? It seems that most of these should be readily apparent to anyone who has worked with governments before, but it is important to summarize them.

Margaret Catley-Carlson of the Population Council presented "15 Golden Rules" for working with governments on advocacy emerged, based on three fundamental assumptions:

- Governments have choices.
- Governments make choices.
- Government choices can be influenced.
1. Work from where the government is now, not from where you want them to be.

2. Know Thy Government. Spend as long as you need to understand the systems, structures, procedures and processes you want to influence. Be specific as to which decision you want to influence, when, and by how much. General purpose advocacy usually goes into a general purpose receptacle.

3. Governments are not monoliths on issues. Lots of divergent views are within. Spend as long as you can understanding exactly where various parts of the government are coming from. Form alliances to get the whole picture — one group liaise with the Health Department another the Science Department, another the Finance Department. Work out the angle of vision for each of these. Target accordingly. (Expect sectoral ministries to be somewhat offput, however.)

4. Make it as easy as possible. Confrontation is perhaps useful only to promote long term response and for media coverage; it gets the population sensitized that something is out there, however it is unlikely to promote positive government activity. Confrontation usually accomplishes little in the short term and focuses government attention on how to respond to accusations and how to put as much distance as possible between itself and the accusers.

5. If you ally yourself with the opposition to the government, expect to be treated as part of the opposition. This is neither good nor bad per se, it is just a fact of life.

6. Play fair. If you say it is off the record, make it so. If you promise an off-the-press briefing and bring the rolling cameras, expect the reaction.

7. Make sure what you ask for is at the top margin of the possible. We would like the government to [choose the maximum within the government's possible response]: Establish a whole national program devoted to...? Contribute millions of dollars to...? Increase the contribution to...? Commit themselves to future examinations of the issue...? Hold a meeting...? Speak out publicly in favor of...?

8. Give governments credit — give them a chance to buy in. What does it cost to have a congressman at an opening, a parliamentary deputy turn a key. Help the government out when it is appropriate. Governments in democratic countries are very much pulled by the need to be seen to be giving something to everyone. In times of limited
resources, often this gets down to awfully little to an awfully large group. If there is an attempt to focus down in a direction you find helpful, support that decision vocally and publicly. Offer to do so. Do it.

9. Praise when praise is warranted. Say thank you. People in government have feelings.

10. Key the message to the recipient in the government. Send dissertations to serious students of the problem; send briefs to briefers; send one page letters to one page readers. Send slogans to those who think in slogan terms.

11. Make your message real, understandable, immediate. Marion Wright Edelman, Jim Grant have mastered this.

12. Keep in touch to learn from each other. Promote/use information-sharing mediums such as Global Child Health newsletters and networks.

13. Use profile people — it is effective. And listen to them on how to raise the profile of the issue.

14. Make alliances — if 10 groups have the same product and all want government support, the total effect is weakened. NGOs and PVOs are fiercely independent but the costs of independence can be fierce. (More the case where NGOs depend on governments for financial support).

15. Come to as much agreement as possible on goals. Could we agree that the first call on any national health ministry ought to be the cost of vaccines? And that the next ought to be basic drugs? Is there some reason we cannot? Imagine the power if we could agree that this is the single top goal for children.

Rules 16 - 18 were added after discussion.

16. Set goals within the political life of the decision-maker; we need to set mid-term goals on the way to big goals, in part to note our achievements.

17. Don’t start with the toughest and most sensitive issue; but don’t leave it off the long-term agenda.

18. Use proven tactics and techniques; incorporate Richard Reid’s list (see Role of Communications) into our relationships with government.
One goal for advocacy is to empower people to think they can make a change.
— P. Dobyns

Discussion Highlights

Points made:

1. It seems society is at a point where there is a deep hopelessness, cynicism, and denial of many of the problems under discussion. Fatalism, violence and depression can seem overwhelming. Although many people want to make good decisions, most people think they cannot make a difference and find it difficult to get motivated at all — they think that others are equally as indifferent. This is true for people in democracies as well as repressive regimes. If people think there is a chance for success, passionate convictions are awakened and the loud voice begins to emerge.

2. People are influenced by their reference group but there are many cultural differences that may not seem logical to outsiders in other countries the insiders have influence. E.g., Japan, which is more influenced by outsiders; in the U.S., when daughters of CEO's entered the workforce, CEO's become feminists. Need to look for leverage points.

Question raised:

1. What is the role of extremists? Extremism often opens the path for more moderates ideas.
I. Developing Leaders and Mobilizing Communities for Advocacy and Action

Dynamic, enthusiastic leadership has been recognized as a key factor in promoting community participation. Community action occurs most frequently when good leadership is combined with the identification of a common need or cause, a history of success in achieving goals through community action and the existence of an organizational structure through which action can occur. Peggy Curlin (CEDPA), Nathan Robison (PROCOSI/Andean Rural Health Center), and Asrukana Das (YWCA Bangladesh) contributed their insights and experiences to this panel facilitated by Dr. Nyi Nyi (UNICEF).

Leadership Development: Where do leaders come from? Are they born? Made?

a. Leaders are shaped by experience.
b. Leaders listen before leading.
c. Leaders are everywhere; look for them and actively seek them out. Don't ignore existing leaders in the community. Use leaders in churches, mosques, schools, etc.
d. Look for qualities that make people leaders, develop them through training. Networks are key. Provide encouragement and opportunities to prove themselves with gradually expanding role.

Mobilizing Communities for Advocacy

a. There must be a cause, an inherent injustice that needs to be righted. People don’t mobilize around the facts but tend to react viscerally, emotionally. E.g., it is not fair that in America children aren’t immunized.
b. Have quantifiable, clearly stated goals. Monitor progress towards achieving goals and report back frequently (impact-based approach). This is especially important at the regional and local levels.
c. Mobilization can come from outside, they are enablers; change comes from within.
d. Be inclusive. There is more strength in emphasizing common goals than focusing on differences, e.g., some feminists leave people out if they don’t subscribe to all tenets of the ideology. Build trust.
e. Never overlook women as advocates for children; they are not just passive recipients of programs. They must be included in planning and monitoring phases too.

f. Don't underestimate contribution of local networks. This is especially important when working on practical activities.

g. Communities may be illiterate but not ignorant; we need to go listen to them.

h. Don't let up on lobbying in local area. A community that is knowledgeable about its rights and responsibilities is more likely to take action.

i. Try to develop funding mechanisms to sustain activities. This could help the organization grow into a national entity to advocate.

Mobilizing Communities for Action

a. The coalition approach works, each group takes a part. Sectors or organizations may not realize that their area of interest is also a child survival issue.

b. Develop a partnership process. Let people know that they don't have to give up on things they are working on in order to be part of the issue, e.g., SAARC — The Girl Child.

c. Everyone who can contribute is asked to. Need to ask people to do a job and come in with specifics. Recommend extending a hand to three groups already working, encourage them.

d. Small scale community-based, family-oriented efforts are often more effective at mobilizing the larger community than national, mass media campaigns. This can be seen in both vaccine and food distribution programs in Bolivia (90% vaccine coverage for community efforts v. 1% for mass media campaigns).

e. Mobilize from the bottom-up stance; really have to empower in order to hand on permanent capacity for people to meet their own needs. High quality delivery yields sustainable relationships.

f. Information sharing takes expertise and must be developed. Learn what the needs are, communicate the benefits. One-to-one client/practitioner relationships are very powerful. Information at the community level is very important. Share what is happening with the communities and families; talk about issues. Show that the community can share in the changes and that they have been given an avenue to change a bad situation. The need for education/literacy very important.
Discussion Highlights

Points made:

1. Cultivate leaders' abilities to ask the right questions. Results will improve more dramatically than if you simply give people answers. Teach them to ask why.

2. Promote volunteerism as a worthy and valuable pursuit.

3. Build alliances; it can be difficult for members to understand the technical information, the gathering process, and understand the whole issue (it may be out of their realm of experience).

4. Get away from the argument over whose approach is best. Focus on shared outcomes rather than a shared plan of action. Sometimes different groups demand that everyone agrees on the ideology. But success lies in only asking for 1 or 2 items that everyone can agree on, input for shared alliances.

5. If kids get involved, some people listen better, i.e., mobilize parents, letters to congressman. The key to getting children involved is usually through the teachers and schools. In Brazil, teachers developed projects geared to improving community life — results were good but change in children and in schools was perhaps more important.

6. In large alliances the message tends to be more complicated; need to keep it simple and limit changes (i.e. ORS packets v. home preparation). We need more inter-sectoral overlap to reinforce messages.

7. Empowering leaders and communities is very difficult, we don't really know how this can happen. We are often in the dark, trying different things. There is a big initial investment, sharing experiences and learning to help people see the larger perspective.

8. Do not forget fathers. When women are empowered they ask less of the fathers. Try not to marginalize men in discussing child survival. Encourage families.

9. The 15 golden rules are practical for working with communities as well as governments.

10. Social mobilization looks to change the behavior of people about their own lives; advocacy changes the social climate within which these actions take place.
Questions raised:

1. How can donors avoid the dilemma of top-down and imported goals versus community-based or identified priorities?

2. What can be done in places where governments are not willing to listen or where democracy is not well developed? How should messages be targeted? How can we generalize? Does advocacy/child survival work better in a democracy than other forms of government? Does access to knowledge, skills, freedom etc. hold country leaders accountable? Is it better for long term sustainability?

3. How do we empower leaders and communities? We are often in the dark trying new things. How do we get others to see our perspective?
II. Policy Advocacy

The panel on Policy Advocacy presented and discussed two models for this purpose: those of the Children's Defense Fund presented by Jim Weill, and the Norwegian Ombudsman program presented by Malfrid Flekkøy. Richard Bissell (AID) facilitated the session.

1. The Children's Defense Fund Model

The Children's Defense Fund (CDF) has been a leader in the evolution of child advocacy. It has sought to interject children's concerns into the public consciousness and into the political and policy-making arenas, to change the behavior of all groups and all strata of society towards children.

The arsenal of advocacy techniques used to accomplish this has included: extensive research, surveys, reports, publication of agendas for change; using the mass media and other forms of public education to raise children's needs higher on the national agenda; drafting, testifying, lobbying for legislation, and publishing the voting records of legislators on children's issues; informing, organizing, and training parents, service providers, administrators and child advocates; technical assistance and advocacy to implement legislation at the federal, state and local levels; and organizing demonstration projects (Weill 1990).

The keys to CDF's success:

- Concentrates on policy advocacy.
- Remains very focused — child welfare, health etc.
- Emphasizes early intervention and prevention instead of remediation.
- Non-partisan. Takes no government funds, maintain broad funding base, sides with no political party.
- Relies on accuracy: research and analysis to maintain credibility.
- Uses mass media — TV, radio, posters — ergo simplifies to reach out.
- Reaches out to other groups — even when counter-intuitive — senior citizens, business.
- Follows up on legislative, programmatic results. Technical assistance provided to monitor implementation and impact.
- Places emphasis on local programs that work to defeat cynicism and fatalism.
- Stresses solutions achievable at local level, manageable bits are do-able without great change.

No group is more disadvantaged in the political process than children — they cannot vote, cannot hold political office, do not give money to candidates, and rarely speak publicly for their interests. They have no access to any of the traditional levers of political power.
— J. Weill
• Stays fresh organizationally.
• Remains persistent, patient — long gestation period for wide-spread results to become apparent.
• Is committed to win the fundamental issue — not to get publicity.

2. The Norwegian Ombudsman Model

The purpose of the Ombudsman for Children in Norway is to promote the interests of children vis-a-vis public and private authorities, and to follow-up on the development of conditions under which children grow up. The position is independent and funded by the Parliament. The only prohibition is on handling individual conflicts within the family and cases which have already been brought to court. As a “watchdog,” the Ombudsman must keep an eye on all areas of society, signal any development that may prove harmful to children’s interests, and propose changes designed to improve their condition. In particular the Ombudsman must be alert to the consequences and implications for children of any part of Norwegian legislation and regulation.

Initial reservations about this model have proved to be unfounded. The Ombudsman system has not 1) threatened parental authority, 2) provided an excuse for other organizations and services to renege on their own responsibilities and 3) shown that funds would be better spent on strengthening existing children’s services. This is important to keep in mind as other countries consider the Ombudsman approach.

What an Ombudsman does:

• Receives complaints and requests from individuals (adults and children) who may be helped directly or indirectly by the Office (about 3,000 complaints per year from vast variety of groups and persons; conflicts within family excluded [except violence]).
• Receives and gives information, proposals, referrals to and from local level services and organizations.
• Receives and gives information from and to the administrative branches on the community, county and national levels. May evolve a principle or series of proposals for actions or proposed changes in legal regime. i.e., has looked carefully at changing trends — nutrition, accidents, problems of contemporary Norwegian child.
• Communicates information, proposals for changes of procedures, decision, and rules, regulations, legislation to politicians on the local and national levels. Simplifies the language and concepts. Results include guidelines for video distribution, kids in hospitals, auto safety, physical and psychological abuse.

**Keys to the Ombudsman's success:**

- In creating the Office, Parliament gave official recognition to the necessity and legitimacy of child advocacy. The Ombudsman has official status and is permanent regardless of shifting political majorities.
- Although funded by and set within the Government, the Office is independent. By legislative consent, the Ombudsman has an obligation to criticize any administrative level, organization or person (except in their role as parents) disregarding or minimizing the interests of children. Independence was very important especially when focusing on comparing monitoring mechanisms.
- The right to relieve others of their oath of confidentiality combined with the Ombudsman's right to protect sources of information. Children account for as much as 20% of information; do focus groups with different ages of children, it provides an interesting angle.
- Absolute rule against intervening in parent-child disputes. However, broader principles and procedural issues may be addressed.
- The Office has no other interests at heart other than those of children. The Ombudsman must not be suspected of serving any other purpose. The Ombudsman became a direct communication channel between children and government.
- The staff of the Ombudsman's Office is multidisciplinary.
- Keep facts and information absolutely reliable. The situation requires constant monitoring.
- Collaborate wherever possible.
- Bark loudly to the right level. Try to find a way to negotiate wide differences.
- Simple language is more important than a simple message.

**Discussion Highlights**

**Points made:**

1. There is difficulty in mobilizing or conducting advocacy in a non-democratic society. However, even dictators want to be liked, respected. Important thing is to key an idea to a reasonable political time span in which leader will be seen to respond.
2. In Brazil 2 slogans were developed: “Children are Beyond Party Politics” and “The Issue of Children is a Question of National Honor” in the impeachment of a President (Brazil) which leads us to ask whether democracy is necessary or can be a consequence.

3. Lobbying for Child Survival has been among the most successful within the US (R. Bissell). The reasons include: 1) the main issue is the welfare of children, not turf; 2) a good recruitment of allies — CDF domestically, UNICEF abroad; 3) things have been seen to be do-able — perhaps underscores the possible dichotomy between policy advocates and program advocates and, 4) the program was not abstract like a law.

4. The role for outside organizations is generally to provide access to policymakers, to make connections and to provide tools to communities.

5. Everyone who has ever been a child has a role and responsibility.

   Ask for a little entry but be prepared for large involvement.

6. The other side of injustice is a dream — and dreams can motivate.

**Question raised:**

1. Do we wait for communities to organize to do something?

   Suggestion 1: There may be the occasional need for international top-down advocacy, especially in countries where governments are hard to find, such as Somalia.

   Suggestion 2: There is always some angle to gain entry. E.g., increased funding for education after military recruits were failing the basic entrance exam.
III. Monitoring the Status of Children

There are two types of problems. Tame problems have a beginning, middle and end. Monitoring is good and not too difficult. Wicked problems go on and on — monitoring is essential and not easy. Assuring child health and well-being is a wicked problem.

Monitoring systems are a fairly recent phenomena, since the 1950's, and are still evolving. Originally archival in nature, data monitoring passed through an "Academic Collection and Analysis" phase that ended in the generation of a publication. Real monitoring, however, is used. We are currently in a "Public Health" phase where data are collected, analyzed, assessed and used for decisions and evaluation. We are also overwhelmed with data and information, the science of information technology is developing new efficiencies to utilize what we collect and how it is stored and processed.

Panel members Bill Foege (Carter Center), Tony Augustin (Child Health Institute [CHI], Haiti) and Jessica Jitta (Child Health and Development Center, Makarere University, Uganda) shared their experiences in the development and use of monitoring systems. For advocacy purposes their experiences were summarized by panel facilitator Pamela Johnson (AID) as follows:

- Start where you are; data will catch up.
- Collect the information you use; use the information you collect.
- Data creates an obligation to act.
- Tell a story; give faces to statistics.
- Keep the fire going — monitoring can help.

What have been the experiences of developing country information and monitoring systems and how have they been used for advocacy?

a. Often the task is to develop a system that will serve and to increase the level of sophistication later.

b. In an effort to regain the research capacity lost in the 1970's, Uganda is developing a system to build research capacity with the communities, universities and government which are available and interested. Central capacity evolved from a university base and dependence on outsiders was discouraged. A local perspective with a multi-sectoral approach was envisioned, with strong community involvement.

c. Makarere needed to look at and change some of the incentive systems to include applied research. They also needed to develop some authentic local indicators for child well-being and not just health/growth family
planning projects were more successful in increasing contraceptive prevalence rates.

d. CHI determined that the Haitian government(s) had not consistently mobilized and managed programs for children, and frustrated by the lack of interest by the government, the gap has been filled by donors, while attempting to prod the government into action.

e. For better information use and credibility, CHI has split its data gathering function from its advocacy institute. Systems and indicators at the national and operational level need continued refinement.

f. Challenges to strengthening policy advocacy capacity on the ground include interdisciplinary collaboration and training. Increased experience working with the private sector is needed as well. Feedback to the beneficiary community is a good method of promoting further dialogue and increasing community involvement.

g. Advocating domestically would benefit from internships with CDF, RESULTS, Ombudsman and others to strengthen advocacy-related skills.

Use of data — a new and intriguing example:

Similar to CNN's coverage of the Environment Summit in Rio that provided an opportunity for world leaders to give their perspective on the issue, CNN was asked by the Task Force for Child Survival if they would be willing to take the World Summit goals and come up with a 10 year monitoring plan. One objective would be to find countries that have had successes and interview those responsible, including heads of state. The hope is to get international leaders more involved and give them deserved global recognition. A second objective is to fulfill an almost insatiable desire by countries for health-related information. A third objective is to have advocacy spots on child survival. The Task Force would supply the video and come up with a list of stories illustrating the complexity of the child survival revolution. Providing CNN with editorial rights will help ensure the validity of data and make child survival issues transparent to a large audience.

Discussion Highlights

Points made:

1. When UNICEF first began issuing the “State of the World's Children Report” there was very little available data and a lot of discussion on appropriate “data use.” As these publications came out, countries became more interested and this lead to readjustments in immunization rates (India) and population data based on new census information (Nigeria). Innovations and the use of proxy data have also been useful in building coalitions to improve immunization coverage rates.
2. There is a need to use data even if you have to cover it with qualifiers — it will provoke data production.

3. Data should follow programs.

4. Statistics are the result of international discussion. We need to select data needs based on programs. We have to demand new data sets that reflect what needs to be done.

5. Foster partnerships between people with good data and people with good experience and the ability to tell a story. However, be sensitive to not exploit those you are trying to help.

6. Interpret or comment on the meaning of data to those who may not understand.

7. When raising funds from non-health professionals, the anecdotal approach may not be as well received as the use of a contrived number such as “the number of children immunized with our money”. This is very popular and it works.

8. Don’t let often time-consuming data collection activities obscure the achievement of the fundamental purpose of the effort. Balance the workload of field staff.

9. Nearly half of the world’s population are children under 18, they do not vote, and they are truly disenfranchised. Who will represent their needs?

Question raised:

1. As data moves towards success and marginalized groups are more clearly identified, how do we deal with stigmatization?
IV. The Role of Communication

Communication is more than just advertising. Conveying the appropriate message to the right person at the right time to encourage action is both a science and an art. Peggy Dulany (Synergos) facilitated the panel where Richard Reid (UNICEF), Sam Harris (RESULTS!), and Bill Novelli (CARE) showed us that good advocates are persuaders and energizers, have imagination, timing and are knowledgeable about their subject. While coalitions and alliances can help change attitudes and policies on a large scale, sometimes it is a single voice — a mother, teacher, doctor, Jim Grant — that have the most influence of all.

The UNICEF Experience:

To get away from inertia and plain implementation of the vaccine programs of the 1970's, UNICEF began to realize more was necessary than just delivering “things.” The need was to bring solutions, not problems, to heads of state. In its experiences, such as those with Nigeria —which offered the Head of State assistance to set goals, identify available resources, and a plan for mobilizing them — Richard Reid of UNICEF has found that if you: a) find the way to capture leaders with a vision of good within which they can see their role and, b) use targets that have quantifiable deadlines and numbers (cluster surveys, focus groups, or census data), the advocacy approaches listed below have substantially more power to influence the person you are targeting.

Mr. Reid shared the keys to advocacy he has learned at UNICEF. (See facing page.)

The RESULTS! Experience

Policy advocacy can take either a hard hat (targeting legislators and active lobbying) or a soft hat (supporting Candlelight Vigils and activities in schools and places of worship). Entirely a grassroots effort, RESULTS! has no media director or special staff — all activities are generated by volunteers.

Advocacy activities have a high focus at the local level:

a. Encourage volunteers to write op-eds and letters to the editor for local newspapers or prepare media pieces based on RESULTS! and other materials.
Eleven Tried and True Advocacy Techniques

1. Advocacy by *vision* — by *specific target*

2. Advocacy by *feasibility*: proof that the programme can work.

3. Advocacy by *praise and public recognition* — of one of the country's connected accomplishments.

4. Advocacy by *en-route accomplishment* — recognizing intermediate attainments once the challenge has been accepted.

5. Advocacy by *fear of isolation and embarrassment*.

6. Advocacy by *identification with admired others*.

7. Advocacy by *persuasion of political safety and benefit*: no political or financial risks; become "father of your country."

8. Advocacy by *competition*: within the country and among countries.

9. Advocacy by "*highjacking*": using (and reviving) an ongoing national programme or movement to carry child survival/development programmes.

10. Advocacy by *religious or traditional impulse*.

11. Advocacy by *role model*. 
b. Worldwide launch for the State of the World's Children Report — groups were briefed and then asked to push for political support for goals. Letters appeared in TIME magazine and the Washington Post newspaper as a result.

c. Mass mobilization techniques such as candlelight vigils in support of the World Summit and the Keeping the Promise campaign are excellent ways to mobilize kids and adults to exert pressure wherever they can.

The RESULTS! approach for developing good advocates:

a. Contact interested people. Ask them to find others to form a group of 15 people, including 4 who will agree to be supertrained. Friends will then do supporting work with the media.

b. A series of high level, disciplined training techniques is used to get ordinary volunteers to be sufficiently articulate to become community leaders.

c. Working through the techniques makes people feel that they can practice and improve their personal skills to be better advocates. Essentially, 2 methods of “Programmed Learning” are used to reinforce people’s knowledge of the issue and their confidence that they can speak to the issue.

- BONES technique. Develops the ability to strip things down and identify a.) the problem, b.) the issue and, c.) the opportunity for action. Collectively the basics are pulled out of an article, a piece of legislation, or educational material.

- LASER TALK. Takes the Bones skeleton, add additional information to make a polished presentation.

The William Novelli Experience

With a background in pure marketing (cars, pet food, etc.) and social marketing (ORT, teachers’ salaries, etc.), Bill Novelli’s experience goes beyond that of his work with CARE. Over time he has identified some rules, a process, for communications in support of behavior change.

a. Domestic and foreign issues can usefully be linked.

b. Always stress progress — chronic problems aren’t news.

c. Be opportunistic — use breaking news, and also human interest.

d. Target policy influentials — grandparents around the world, kids as anti-smoking advocates.

e. Create long-term opportunities — longitudinal study on birth class of 1990 smoking habits.
f. Pretest your materials.
g. Media can raise awareness, stimulate trial, promote one-time behavior, generate controversy.
h. Use intermediaries — associations, people.
i. There is a process and it is learnable.

Discussion Highlights

Points made:

1. Although there has not been much of a focus on advocacy in schools, it is a non-degreed profession; some programs do exist. Explore opportunities.

2. Positive persuasion advocacy works. It is non-confrontational and shows the degree of support on an issue.

3. We often feel that this work ought to speak for itself. This assumes that advocacy is not necessary. This assumption is not valid because it is not a perfect world.

4. Communication skills equip us to swim in this shark-filled pool.

5. You may need to prove there is a problem; many people will not believe it.

6. There is great empathy towards children but not for children. Put yourself in the policy-maker's position. If you can do his job and make it easier for him, things will happen.

7. Communication skills are necessary for participation in a democratic society. As communication skills are a learned behavior, so too is democracy a learned behavior.

8. Learning how to function in a democratic society starts right after birth. Children learn that others have a point of view. It begins with the parents ... if we wait to teach this during their teens, it is too late.

9. Need sustainable training programs.

10. Competing view are often presented to Ministers of Health by different international organizations. Need cooperation to make it smoother.
Learning how to function in a democratic society starts right after birth. Children learn that others have a point of view. It begins with the parents... if we wait to teach this during their teens, it is too late.

— M. Flekkøy

**Questions raised:**

1. When have we won? How can the same groups mobilize for those who are left out?

2. What is the cost-effectiveness of various techniques?
V. Resource Mobilization

Are needs for advocacy different for policy-makers and fund raising? Are issues for children different than those for development? Resource mobilization is always more effective when there is a clear purpose, clear objects of expenditure, and transparent systems which allow timely reporting. Periodic reports of success and announcements of achieving milestones maintain enthusiasm and encourage people to work harder toward the ultimate goal.

Ted Trainer shared the lessons learned from one of the most successful resource mobilization efforts aimed at an international health intervention — Rotary International’s PolioPlus Program. Phyllis Dobyns of Save the Children provided insights into mobilizing concerned individuals and corporations. Wanda Engel Aduan described the difficulty of mobilizing resources in a developing country for her “Projeto Roda Viva”. Terrell Hill (UNICEF) shared his insights as he facilitated this discussion.

Rotary International

Rotary International is a large world network. Active in more than 100 countries with over one million members, local chapters function as NGO’s and the small core staff at headquarters functions more like a donor. Since 1897, the PolioPlus campaign has raised over $240 million dollars from its members which in turn has leveraged more than $6 million in funding through a challenge grant with the Agency for International Development. In addition to fund raising, in many countries, Rotarians are trained in immunization tasks and work with political and health leaders to organize immunization drives.

Lessons learned

a. Advocacy for policy-makers targets political will, advocacy for fund raising goes after income. Try to find a simple dramatic message that will appeal to both. Try to identify the common ground.

b. Membership has different degrees of interest in the globality of the problem. Rotarians are not professionally involved in the problem and may not have an interest, but contribute because it is an organizational goal.
c. Find leadership that can hold the coalition together; fund raising activities may make strange bedfellows and this should be accepted.

d. Members want to know what their money has done. Contrived numbers may be useful to describe this. Members do not want to support overhead or administrative costs. Rotary has a 3-year lag time between fund raising and spending, allowing the interest earned to cover administrative costs.

e. Prove that you are accomplishing something and do this on a constant basis.

f. Develop a strong, simple motivating goal, a dream; provide clear, specific objectives, a time frame, which will result in a high probability of success. The dream to eliminate polio in (originally) the Western Hemisphere was powerful. Verified by the public health community confirmed the doability.

g. Packaging is critical. Call it a dream: “Elimination of Polio from the Face of the Earth.” It is better to not be very specific, make the goal vague and don’t complicate the message by discussing specifics such as elimination vs. eradication, the role of other players etc. These questions will be asked as the program and members knowledge becomes more sophisticated.

h. PolioPlus has raised twice as much as thought possible. Initially this was at the expense of general revenue, however, the “dream” has attracted new members, with new vision, willing to contribute more to the general fund.

i. Need strong leadership, a 4-star general, willing to make decisions.

j. Find ways to give constant recognition to supporters.

Save the Children and the International Save the Children Alliance

Save the Children U.S. is an international development and relief organization which works in 20 U.S. states and in 35 other countries. Programs focus on primary health care, education, economic productivity, family support and emergency relief and rehabilitation. These programs are supported by individual sponsors/donors, corporations, foundations and government grants and food aid, realizing an annual budget of approximately $100 million. Save the Children US is a member of the International Save the Children Alliance (ISCA), an association of autonomous Save the Children’s working throughout the world for the betterment of children, their families and their communities. ISCA’s current scope of assistance encompasses development assistance, relief and advocacy for the rights of children and is extended through its members to over 90 countries throughout the world. In 1991, the contributions combined provided $290 million to ISCA programs.
Lessons Learned

a. Must mobilize both people and funds.

b. Creation of the Save the Children Alliance was probably the key to subsequent successes. Alliances with UNICEF and others have made a reality of children's rights, helped promote and support local NGOs and indigenous populations and, established strong local boards to sustain in-country efforts.

c. Save the Children developed tool/materials to mobilize groups to educate themselves about the critical issues affecting children and to raise funds for programs e.g., Ten Steps To Five, a simple but effective rallying tool for both programmatic elements of child survival and for fundraising.

d. Because of the success of programs like Ten Steps To Five, confidence in the organization has grown. Organizational credibility is invaluable, especially during times of subsequent fundraising for emergency situations.

e. Keep sponsors/donors informed. Save the Children U.S. has over 100,000 sponsors who receive frequent updates on how their money is being spent and how, when pooled with funds from other sponsors, it benefits the sponsored child and all the children in the community.

f. Corporate American donors respond to suggestions for "Cause Related Marketing." Many corporations wish to enhance marketing with campaigns that tell consumers a portion of a product's purchase price will be donated to Save the Children. e.g., Proctor & Gamble's dental hygiene campaign, Elizabeth Arden's Christmas cosmetics ads and Manhattan Menswear use of children's drawing for neckties. Hints: 1) get money up front; 2) ensure corporate commitment and, 3) try for a grant rather than a royalty or proceeds.

g. Hints for NGOs in general: a) practice truth in advertising, b) watch out for bad publicity, c) speak with one voice, and d) set standards all can agree upon.

Projeto Roda Viva

In Brazil, Roda Viva is a dynamic coalition of teachers, community leaders, lawyers, social workers, doctors and many others in both the public and private sectors whose shared goal is to reduce the devastating child poverty in Rio de Janeiro. Residents of Rio's favelas play a central role in planning and implementing Roda Viva's programs addressing education, health, housing, and basic rights of children. Members of Roda Viva participate in planning and drawing up of legislation at the municipal, state and national levels, thereby bringing input from the grassroots into the policy-making process.
Mobilizing financial resources within Brazil is extremely difficult. Although the legal situation is advanced and sophisticated towards the rights of the child, there is a large gap between reality and what the law actually provides. Public opinion is towards not working with children as a result of the rise in violence, drug trafficking and related criminal activity. The challenges to Roda Viva have been in trying to access the international donor community, mobilizing human resources in Brazil, and making hard choices regarding resource allocation within their project.

Lessons learned

a. Credibility of persons mobilizing resources is key.

b. Be specific in your requests for assistance — can't raise money for advocacy alone.

c. Learn to speak the language of the donors.

d. The time spent on fund raising is considerable due to a lack of continuity in funding.

e. Collaborative strategies, which integrate all activities being done and allocates resources to various parts can be beneficial.

f. Cultivate local networks; their power is needed to make change.

Discussion Highlights

Experiences mobilizing resources at the community level:

Points made:

1. More experience, training etc. is needed to mobilize resources effectively. This has not been done consistently well at the local level in developing countries and is nearly impossible when the general population suffers from severe poverty.

2. It is easier to mobilize resources when it is an adjunct to another activity. Do not overlook in kind contributions — cars, trucks, fuel and food.

3. Success in mobilizing local resources is greater when an important donor lends credibility to local fund raising efforts.

4. Be persistent with your message and requests. Overcoming the opposition, that often has more weapons, will have a greater chance of success.
5. Encourage people to do more for their own health by raising funds for themselves. International donors can be useful in insisting that governments come up with counterpart funding.

6. Be creative in identifying sympathetic support groups, e.g., working with rock concerts and celebrities.

7. Even in poor countries resources are there — it is a question of will. Need to promote knowledge of other communities.

8. Take advantage of available training opportunities such as that provided by Indiana University’s fund raising course.

9. Target at what people can actually contribute.

10. Get children into the habit of giving.

**Other Issues**

1. Develop a network among those responsible for governmental financial decision.

2. Encourage corporations to promote pro-child messages whenever possible.

3. Draw on people’s personal experience. Rotary was successful in part because older Rotarians remembered the iron lung.

4. Instill a sense of passion. We are sometimes too nice in fighting this battle.

5. Try to achieve global goals through local mobilization.

**Question raised:**

1. What is the political correctness of sources of funding? Answer — Develop a set of guidelines for accepting donations from the private sector. Be prepared to decline money from people/groups with a direct interest in the program being funded. Maintain a standard by limiting or refusing sponsorship from companies whose products or policies work against children’s well-being, e.g., tobacco and alcohol-related groups.
VI. Forging Alliances

Estimates from various sources indicate that there are 8,000 - 12,000 (SOWC Report 1993) independent development organizations working worldwide to help those in greatest need. These NGOs are beginning to mobilize in support of the basic goals agreed on at the World Summit for Children. Some groups are actively involved in drafting their country's plan of action for meeting the goals, others focus on the achievement of particular goals. Despite all of the activity, there is not yet a recognized "movement" that is able to focus media attention, sway public opinion, promote common goals or sustain political pressure. By forging alliances, NGOs move one step closer to optimizing their impact.

Jane Hughes (Rockefeller Foundation) shared her experience in building alliances as she facilitated this panel. Florence Manguyu of the Kenya Women's Medical Association and Art Simon of the Christian Children's Fund (previously with Bread for the World) shared their thoughts on the challenge of forging alliances.

Who benefits from alliances?

- Alliances are formed to promote child health and well-being, but also affect wider families and women.
- Those in distressed circumstances — orphans, refugees, the disabled — are often neglected. We cannot assume that community-based activities reach everyone.

With whom are alliances formed?

Governments, funding/donor agencies, policy-makers and legislators, individuals, ambassadors, educators, media (including traditional forms), other NGOs, and children.

Basic roles and responsibilities for members.

- Expect hard work. To be successful means being more than just a name on a list. Assume nothing, especially on the basics.
- Be inclusive. Alliances make strange bedfellows.
- Alliances can be more or less than the sum of their parts. Each partner has its strengths and organizational mandate. Remember to work towards common goals. All may feel a sense of responsibility but, for example, one part is more comfortable taking on a lobbying role while another part focuses efforts on developing educational material — all have a place.
- Alliances can often address the larger picture without giving up their focus. E.g., health is not enough — there is also a need to work on equity to close the gap with the most disenfranchised.
- Be persistent and act as a catalyst to bring different groups within governments together. Remember, some of the problems are not with the child but with society, e.g., ramps for wheelchairs.

**Discussion Highlights**

**Points made:**

1. Alliances are many; try to avoid either/or choices. Sometimes it's better to work with a group and at other times better to be on opposing sides. This can be especially true of alliances with governments.

2. Remember there are hidden alliances. Look to the professional staff within government for allies.

6. Encourage a diverse funding base even if intermediaries are necessary.

7. Start with the easy things first, but, put the hard issues on the agenda. Bond with government and others, and, after some successes, don't be afraid to tackle the hard issues. This can be done if a sense of respect has evolved between alliance members — show you won't embarrass or publicly betray them.

8. Be more than just a name on a list.

**Questions raised:**

1. What is the role of formal v. informal alliances? It depends on the situation. Groups can be incorporated at various times for specific issues.

2. How do you forge alliances with groups that may not be formally recognized by other members of the alliance? This can be energy-expending, but try to find some common ground that all can agree on.

3. How can the donor community set the tone for advocacy and alliances? Need to look at mechanisms to share the reporting, monitoring and financial management burdens. Balance efforts to work with government organizations as well as grassroots efforts.

4. What groups are other possibilities for an alliance? How do we get to the more difficult groups? Health is not enough we need to work on equity to close the gaps with the most disenfranchised. NGO's can often reach marginalized groups more easily than the donor community. Larger NGOs can take on the burden of reporting, financing and monitoring and funnel money to the smaller NGOs for these activities.

5. How do we sustain the focus on children? Target related areas such as Child Survival, food, family planning, etc.
The Agenda for Children
James Grant
(not verbatim)

Ours is the first century — actually the first generation — which can think about bringing progress to mankind as a whole.

When I was growing up, the idea that everyone should read, write and have access to health care was unheard of in China. These were the Depression years. One and a half million died in the streets of Calcutta. The Raj did not make the connection between the shopkeepers and those starving at the lamp post. The same type of phenomenon occurred with the Irish potato famine.

It is a new concept that progress is for everyone. In the last 50 years progress has come to many people across the world. The basic elements for healthy living and a reasonable amount of dignity, are available for 75% of the world. Yet 25% of the world remains to be addressed. Now with the Cold War behind us, if we really will it, it is in our power to overcome most of the abject poverty existing on the planet. A report from the World Bank shows that this is do-able.

We can articulate the breakthroughs that must be achieved on the basis of the goals laid down at the World Summit for Children. To achieve these goals would at least put U.S. vaccination levels where they were 50 years ago.

It is estimated that only an additional US$ 25 billion is all that would be needed to provide virtually every child, woman, and man on this planet with basic food, health, education, and sanitation. $25 billion is what Americans spend on beer in a year and what Europeans spend on cigarettes in 10 months. The U.S. share of such a commitment would be $2 billion a year — about what Americans spend every month on beer or half of what the U.S. spends on cat food every year. Most of the money needed could be made available now simply by restructuring existing official development assistance (ODA) flows, now that the Cold War has ended. The ODC reports $5 billion could be restructured to carry the US share of this burden to overcome the worst poverty, illiteracy, etc., found throughout the world.

The past few years have seen a series of unexpected successes. The children’s revolution is going on now. 1990 started off with the Jomtien Conference, and then on September 22, the Convention on the Rights of Children came into force at the World Summit. This was truly the first united
call for children's rights, which several years earlier had been seen as too radical. The Canadians were against it at first, but finally ended up supporting it. Then world leaders set a goal to have a plan of action by 1992, which was considered do-able. The Plan for Action turned out to be a remarkable document. The year closed with the world immunization goal having been reached. A global promise turned into a global reality. The vaccinator replaced the postman as the most universal public servant. Even more remarkable is that people actually came out to get vaccinated. This was the first time in history that modern technology had been brought to all of mankind.

1991 and 1992 are rungs in the ladder toward goals for the year 2000. The tests of success have been the national plans of action. Who would have predicted that 130 countries would have them, and that the U.S. would eventually follow through? 80 national plans have already been achieved. Do they get filed or do they have a life of their own? The seven SAARC countries met at the ministerial level on their plans of action in Mexico City, including Tunisia, Dakar, and 18 developed countries. It was reported in all meetings that all of the plans are acceptable, and need to be tied to budget process. They need to get local governments involved, and set interim goals.

Now there is a focus on diarrheal disease, acute respiratory infection, and polio — it's sometimes difficult to remind myself this is really happening. The last 10-12 weeks the battle for children has been further reinforced, especially when the U.S. made the decision to move into Somalia. This gave me a profound sense of relief and exhilaration. I assure you that we are on a new playing field, or we would have lost otherwise. There are 352 workers in Somalia, and this mobilization occurred solely for humanitarian reasons.

Remember Calcutta in the 1960's, as the Green Revolution was ushered in. Gloom and doom scenarios had been scientifically forecast with predictions of great population growth quickly outrunning food supplies. The situation was quickly worsening, which created an increasing awareness at the highest levels, generating the political will to restructure agricultural pricing and practices, and to mobilize all the sectors of society required to avert disaster. Just as Nixon's visit to China brought great changes, the new administration will reap the results of the new attitudes towards children. Nowadays, American families must be drowning before a life jacket is thrown; we must recognize temporary defeat. Now, a stronger emphasis on prevention, with the example of Head Start and others, will set the course of things in a healthy direction. The new U.S. Administration is coming back to children, with new knowledge and sophistication. There is a new ethos, a moral right and basis for what you want to do here. We need more new appointees and a Congress supportive of what is needed internationally and what we are trying to accomplish.
We must create an awesome sense of responsibility. The world and the U.S. community are finally starting to think seriously about living conditions for the world’s poor. The World Summit set the stage for the Environment Summit. The Convention on Rights of the Child has gone through the ratification process. The rest of the world has moved on children without active leadership from the U.S. government, although individuals and members of Congress have lead much action. The new ethos emerging, already wholly against racism, colonialism, and seeking equality for women, now is focused on defending children. The U.S. now has the opportunity to become the world’s leader in the fight against childhood disease and poverty. Assuming a leadership role could transform the U.S. itself and have an enormous impact globally. The U.S. could significantly enhance these effort by signing and ratifying the Convention early on. The outgoing administration has already agreed to the goals laid out in the Plan of Action, which hopefully will result in bi-partisan cooperation.

Many countries take these issues very seriously. Mexico, for example, Salinas has taken a special interest in health and development issues. There have been real improvements in rates in vaccination rates. Mexico has increased expenditures on health care.

The goals of World Summit on Children can really be regarded as a Trojan horse to deal with the basic elements of poverty, such as water and sanitation. We could make great inroads in these areas in the next 8-10 years. For example, Hong Kong and Taiwan have invested in their people, treated them as a human resource, and have now become economic powers. In the past, 10% of the children in New York City lived below the poverty line; now 37% are in that situation — double national average. The same occurs in the United Kingdom. Investments in the fight against poverty have need to be made now, and progress can be rapidly detected in reduced birth rates. In a world moving toward democracy, we cannot survive unless we do something about the bottom half. Most programs are cost-effective and politically sound investments.

I would like to remind you that the U.S. is today where in health terms where Asia was in the 60’s prior to the Green Revolution. Forecast were for gloom and doom, with populations rising exponentially. Tremendous increases in production had been achieved in India and Pakistan. The food supply scenario had changed. High-yield varieties had long been developed, but still needed the infrastructure, which was just developing, to become more widespread. The population growth rate and food situation looked like a disaster in the making. Lyndon Johnson finally looked at the numbers and started talking about it. Then other leaders began talking about it. The change in grain policies in India in 1966 were the result of leaders becoming aware of the situation and making the necessary changes and investments.
In Colombia, the new technology was utilized to fight poor health conditions. Modern communications permitted massive social mobilization, which was a breakthrough achievement. The political will at the highest levels allowed the mass vaccination effort to succeed. The same level of success could be possible with water and sanitation.

We are now at the cutting edge. Unless leaders act now, the prospects for the future will be dismal. Political pressures are to move, and bad politics are not to move. Speaking in baseball terms, the US is on a playing field, with all the bases loaded. The US needs to come up to bat and do a Babe Ruth — hit a grand slam home-run. It could do more for more people around the world than anyone else ever has.

What constraints are holding the U.S. back?

1. Failure to sign the Convention on the Rights of the Child.

2. The need to restructure ODA flows.

3. A series of domestic programs will reflect U.S. commitment and show viability in our attitudes towards how families and children should be supported. This is not just an opportunistic undertaking.

4. Attitude counts more than money. For example, vaccination rates are only 50% in New York, 80% in Calcutta. We can spend a lot of money without changing attitudes or spend just a little extra with more social mobilization. We need to identify baby-friendly hospitals. 95% of LDC hospitals banned infant formula. Not one U.S. hospital would qualify under WHO standards.
Conclusions

Dr. William Foege
(full text in Annex E)

It was about forty years ago that I wrote a letter to my parents explaining why it was a waste of time to study history, and that with a limited amount of time in one's life one should be devoted to the present and future instead of wasting time studying the past. Of course, that was in anticipation of a grade that I was going to be receiving... The interesting thing is that I've become more or less obsessed with history since then. I find that everything we do really is a combination of history and vision.

International assistance can be documented back to the time of Sumaria. The question of sharing benefits has been dealt with by philosophers from every religion and every culture, and by and large they have reached the same conclusion and that is: how we treat each other becomes the measure of civilization.

When I pretend that I'm looking at the present from some place else, I can easily see RESULTS!, the Children Defense Fund, Bread for the World, and other groups here writing under the pen name of Euripides, because social justice was the underlying theme in almost everything that he wrote. The involvement of women in both development and child survival is no surprise, and I think back to Aristophanes who in 411 B.C. was so disgusted with the mess that Greece was in, that he seriously called on the women of Greece to take over the country, and to bring it back to some semblance of order.

There are anthropologists who feel that one of the worst toxins in history has been testosterone. We need women to plan the future of the world. The value of studying history is not, however, in those examples. The value of studying history is that we realize that everything, every idea, every product, every person, every problem has a history, and that it's a cause-and-effect reaction that we can trace from the past to the present time. It is this realization, that this is a cause-and-effect world, that gives us all the responsibility for the future.

That's the reason to study history — to understand our responsibility to the future — because everything we do individually or collectively is going to determine what happens tomorrow. It is not a magic world. If future generations are going to know by history only that there was a disease such as polio, it will be because we make the right decisions now.
A few conclusions:

First:

There is incredible talent in this room. It's an impressive power base to start with on advocacy. We are going to have to ask how to use that power, and beware: power corrupts.

Second:

It's clear that we have so much science and technology that they are way ahead of our laws, ethics, social norms, and everything else. The big gap is between science and knowing how to use it. Science is going to march on and, we have to keep supporting it. Keep thinking towards new visions — rather than giving children shots think of a banana with all the antigens worked into the nucleic acid. They're going to have something they want to eat and it's not going to cause them any pain. That's really the next vision as to where we should go. So support that science, but our problem now is applying what we already have.

Third:

James Grant is right: The potential is available to take the big risks out of the first five years of life for children born any place in the world. We have a success to build on, so that we are no longer talking about things that we would hope to happen. The most lethal agent now, outranking the measles virus — and I say this with a certain amount of despair — is tobacco. We shouldn’t have to be dealing with those types of problems, but that’s the new single most lethal agent.

Fourth:

Everything is connected. Polibius said this in the second century B.C.: “The world must be seen as an organic whole where everything affects everything.” There are millions of people that are inter-connected and necessary to develop, produce, transport and provide a single dose of vaccine.

As we talk about advocacy we talk about everything else that went into that —communications, mobilization, science, leadership, and so forth.
Were do we need to go and what are the next steps?

Next Steps

1. We need to be renewed within the program if we are to have the right impact outside the program. We have to keep coming up with a new vision that is really of importance and interest to us.

I grew up with the statement that some things have to be seen to be believed, and it took me a long time to realize that that was backwards. There are things that have to be believed in order to be seen, and that's the value of a vision.

The new vision that we are talking about is that every child in the world has the chance to reach their full potential. It is inadequate to talk only about immunization and oral rehydration, nutrition, or education. Every child in the world should have the opportunity to meet their full potential. That is the vision that we have to work for.

2. We need to have a new emphasis on maintenance. There are still new frontiers, new groups that we have to reach that we talked about before. But we have to solidify the system in which we work, which means that we have to look at maintenance.

It means going to countries and seeing who has plans, who has a system of monitoring, who has a way to respond to that monitoring, who has developed the coalitions — that's what maintenance is for child survival. We have to review these maintenance procedures.

3. The essence of these two days was to emphasize concentrating on changing the social norm and changing the political norm. People talked about how we have to show faces behind the statistics — it doesn't mean exploiting people, but it does mean making statistics human. That's what people respond to.

I have three suggestions for action following this meeting:

1. The sponsors of this meeting — AID, Rockefeller, and UNICEF — should take the information generated by this meeting and put it into a usable form, outlining what the conclusions are, what we have learned, what we should be doing. This could become a set of guidelines for advocacy.

2. The Task Force for Child Survival has always had a difficult time going beyond the original five (5) groups. This is an understandable difficulty,
since if we add one more group such as AID, which we have wanted to
do over the years, we then have to add all bi-lateral agencies; if we add
one NGO, then we have to add all NGO’s. It seems to me that this is a
perfect opportunity to change a little bit how we work, and we could do
this by having a sub-committee for advocacy which is all-inclusive.

3. We should also include what we are doing now with CNN, which is to
have a global monitoring of what happens with the summit goals.

**In conclusion:**

- Share this new vision for development: What’s good for the world in the
  long term is good now.
- Organize efforts to monitor corruption and spending on weaponry vs.
  child survival, in similar fashion to Amnesty International.
- Build on this momentum. What if Child Survival was an olympic event?
  Identify mentors in AID, UNICEF, and the private sector, e.g., Merck’s
donation of Ivermectin. Hold dinners to honor groups and their efforts.
  Give employees a sense of pride in their company.
- Make the Head of State the chief Child Survival person, recognizing his or
  her accomplishments.
- Be tenacious.
- Make this a golden age for historians of the future.
Summary of Recommendations
by Margaret Catley-Carlson

For the past couple of days, I have been trying to pull together exactly what people have said to see if we do have a coherent vision on what advocacy is all about, and it won't come as any surprise to you that yes, I certainly think we do.

There's a funny thing about this particular topic, which is that it doesn't provide handles very neatly. When you hold it up to look at it against the light, and you devise a couple principles here, somebody says, well, you should also use those other principles if you're looking over there.

We've talked about principles in working with government, and the immediate thought was that they don't just work for government, they also work with the private sector, with your people, etc. You talked about the need for data collection in order to work with your funders, and everyone says yes, but you need that same data to work with the beneficiaries anyway, so you need to collect that data.

It reminds me of a kaleidoscope, in a sense that when you pick it up we keep seeing reflections of different bits, so I called it the “Kisco kaleidoscope.” I use that title to try to reflect that the pieces are really interconnected. I think what we talked about came out in four parts:

I. How to work with Governments

There was a fair amount of agreement that the Golden Rules, suitably modified with the other suggestions that were made, are as good as any method of getting along with governments. But I have added to them, because there were some other important messages which I think should be included:

- As Dr. Nyi Nyi suggested, we must set goals within the political life of decision-makers; we need to set mid-term goals on the way to big goals. If we do not set mid-term goals, we will not know if we are achieving our long-term goals.

- Dr. Augustine brought it up that we shouldn't start with the toughest and most sensitive issue, but don't leave it off the long-term agenda. This is a very important point in working with governments that we hadn't raised yet.
Use proven tactics and techniques. I simply incorporated Richard Reid's list — advocacy by praise, advocacy by en-route accomplishments, etc. (See page 19.) We should take those items and see how we can incorporate them into our relationships with government.

If we take the fifteen Golden Rules and add the above, any organization that picks them up and tries to live with them will certainly be a more effective advocacy association with the government.

II. People Power: How to Rally the Public

- The first step is to find out what changes peoples attitudes, and do research if you need to. This is something we don't do enough of. We simply assume that because we know where we come from, that we also know where other people come from.

- There must be a cause. An injustice is probably inherent in a cause. People don't mobilize around facts; they tend to react viscerally and emotionally. Of course, the CDF seems to be the best exponent of how to go about this. A cause is necessary to rally people power.

- We need goals, and these have to be clearly stated and monitored.

- We need a mixture of technical information and a lot of attention to the critical questions.

- Ann Dalton had a marvelous idea which sort of slipped by that I would like to bring up again, which is to equip people to ask questions. That is very powerful. When we mobilize people, we pick up all sorts, from dear little old ladies in tennis shoes to really sharp social activists. We all know the impossibility of trying to equip these people with all of the answers. But it is a brilliant idea to equip people to keep on asking questions. And you can tell them, "Don't even try to handle the answer." The power is in the question.

- Never overlook women as advocates for children.

- As Malfrid Flekkoy said, children are extraordinary advocates for children.

So those are some of the ideas that surfaced in terms of rallying the public.
III. Getting Synchronized with the Populations We Want to Help

- Sam Harris pointed out that we should realize that social mobilization and advocacy are related, but require different energies. It would probably be useful for us to not to keep blending the two. We need to be aware of the different skills involved.

- Listen before you lead. This point came up very strongly yesterday: getting off the airplane, contemplating instant solutions is likely to lead to nothing more than an airplane trip.

- Leaders are everywhere and are shapable. Keep watching for leaders that can be developed.

- Change has to come from within communities; mobilization can come from the outside.

- Start with the organization of small groups.

- Above all, try to nurture the feeling that people can make changes in their own lives. This is what Jessica Jitta was talking about yesterday. And again, back to Malfrid, don't forget to mobilize children themselves. It is especially important, regarding their own hopelessness and empowerment. We got into some good discussion about child development theories, and we agreed that the most important thing we can do for a child is to give that child a sense of capacity to change his own situation. So when we're getting synchronized with the populations we want to help, particularly on children's issues, it would be folly to leave out the opportunity to work with children.

- Institute methods for feedback to the beneficiary community (Jessica Jitta). Once you've got data, make sure you feed it back to the community that you're working with, because this will keep them mobilized.

IV. Keeping Alliances Healthy

We had a panel this afternoon that talked about this.

- The first precept that emerged was accepting that alliances include strange bedfellows. This is probably more accepted in this decade.
than it would have been in earlier ones, when I think we were more attuned to ideological purity on some of these issues.

- Reach out to other groups even if it seems counter-intuitive. E.g., seniors and business people may prove to be your best allies on issues if you work with them properly.

- Try to re-focus away from getting to a goal, and instead focus on a set of shared outcomes. Different people may have different ways of getting there, but the shared outcome is more important. Don't argue about whose approach is best.

- Aim for inclusiveness; don't leave groups out because they don't subscribe to all tenets of the ideology.

- Information sharing takes expertise, so you have to develop it.

All this culminates in how to become a quadruple-A, which is an “Absolutely Astounding Advocacy Association.” Here are the tips we got on how to do this:

- Rotary says you may need a four-star general, strong leadership, willingness to take decision.

- Find ways of getting constant recognition to your supporters — they are, after all, your army.

- Find a dream to achieve.

- Simplify to reach out. The first duty of a leader is to simplify the issues.

- Stay fresh organizationally, says the CDF. Marian Wright Edelman was always reorganizing them, and if they didn't stay fresh, they wouldn't have been able to adjust to all of the new challenges.

- Take a constant stance; see the issue from a child's point of view.

- We all have to have targets — we all agree on that. Targets have quantifiable deadlines and numbers — use them. Richard Reid pointed out that cluster surveys, focus groups, census data, can all
be used to generate quantifiable goals, and we need these quantifiable goals. Simply doing better is not enough. An "absolutely astounding" organization will work on goals.

- Find data. Use the data, even if you have to cover it with qualifiers — it will provoke data production. As the panelists said, "If you use it, keep it; if you keep it, use it."

- Data should follow programs.

- Remember the primordial importance of anecdotal and personal experience to buttress the data, to make it come alive. Tell a story, and if you need much-loved numbers, find them. In other words, if you need to say how many people Rotary has immunized, find a number — McDonald's does not count every hamburger.

- Your people can be your prime resource. Tackle the fact that problems are complex. It can be very useful to equip your people to ask good questions in search of answers. But you can also turn their sympathy into skills. I think the Resource Mobilization Panel gave a mind-boggling presentation on how to turn unskilled sympathy into skilled awareness.

- Learn the process of opinion formation, says our colleague from CARE. He gave us eight absolutely simple, iron-clad steps:
  
  - Link domestic and foreign issues.
  - Always stress progress. Chronic problems aren't news.
  - Be opportunistic. Use news-breaking and human interests.
  - Target policy influentials.
  - Create long-term opportunities.
  - Pre-test your ideas.
  - Use the media to raise awareness, to stimulate trial, promote one-time behavior, and generate controversy.
  - Use intermediaries.

- Put emphasis on local programs that work to defeat cynicism and fatalism. Stress solutions that are achievable.

- Be persist and patient.
- Be in it to win the fundamental issue, not just to get publicity (CDF).

- Realize you'll have to prove you're accomplishing something. Find this proof on a constant basis. Milestone reporting is key and report successes. Set your organization up so that you will be prepared and ready to report success, otherwise you won't be able to do it.

- You can increase mobilization when there is a clear purpose, clear objects of expenditure, and transparent systems which allow reporting.

- Speak the language of your donors. This applies to whether it's a donor across the waves or a donor across the street.

- Finally, policy advocates need special skills. I think we decided they were all of the above, plus a special ability to rely on accuracy, research, and analysis, and follow up on legislative and programmatic results.

So that is how you create an “absolutely astounding advocacy association.”
ANNEX A

WORLD DECLARATION ON THE SURVIVAL, PROTECTION AND DEVELOPMENT OF CHILDREN

1. We have gathered at the World Summit for Children to undertake a joint commitment and to make an urgent universal appeal—to give every child a better future.

2. The children of the world are innocent, vulnerable and dependent. They are also curious, active and full of hope. Their time should be one of joy and peace, of playing, learning and growing. Their future should be shaped in harmony and co-operation. Their lives should mature, as they broaden their perspectives and gain new experiences.

3. But for many children, the reality of childhood is altogether different.

The challenge

4. Each day, countless children around the world are exposed to dangers that hamper their growth and development. They suffer immensely as casualties of war and violence; as victims of racial discrimination, apartheid, aggression, foreign occupation and annexation; as refugees and displaced children, forced to abandon their homes and their roots; as disabled; or as victims of neglect, cruelty and exploitation.

5. Each day, millions of children suffer from the scourges of poverty and economic crisis—from hunger and homelessness, from epidemics and illiteracy, from degradation of the environment. They suffer from the grave effects of the problems of external indebtedness and also from the lack of sustained and sustainable growth in many developing countries, particularly the least developed ones.

6. Each day, 40,000 children die from malnutrition and disease, including acquired immunodeficiency syndrome (AIDS), from the lack of clean water and inadequate sanitation and from the effects of the drug problem.

7. These are challenges that we, as political leaders, must meet.

The opportunity

8. Together, our nations have the means and the knowledge to protect the lives and to diminish enormously the suffering of children, to promote the full development of their human potential and to make them aware of their needs, rights and opportunities. The Convention on the Rights of the Child provides a new opportunity to make respect for children's rights and welfare truly universal.

9. Recent improvements in the international political climate can facilitate this task. Through international co-operation and solidarity it should now be possible to achieve concrete results in many fields—to revitalize economic growth and development, to protect the environment, to prevent the spread of fatal and crippling diseases and to achieve greater social and economic justice. The current moves towards disarmament also mean that significant resources could be released for purposes other than military ones. Improving the well-being of children must be a very high priority when these resources are reallocated.

The task

10. Enhancement of children's health and nutrition is a first duty, and also a task for which solutions are now within reach. The lives of tens of thousands of boys and girls can be saved every day, because the causes of their death are readily preventable. Child and infant mortality is unacceptably high in many parts of the world, but can be lowered dramatically with means that are already known and easily accessible.

11. Further attention, care and support should be accorded to disabled children, as well as to other children in very difficult circumstances.
12. Strengthening the role of women in general and ensuring their equal rights will be to the advantage of the world's children. Girls must be given equal treatment and opportunities from the very beginning.

13. At present, over 100 million children are without basic schooling, and two-thirds of them are girls. The provision of basic education and literacy for all are among the most important contributions that can be made to the development of the world's children.

14. Half a million mothers die each year from causes related to childbirth. Safe motherhood must be promoted in all possible ways. Emphasis must be placed on responsible planning of family size and on child spacing. The family, as a fundamental group and natural environment for the growth and well-being of children, should be given all necessary protection and assistance.

15. All children must be given the chance to find their identity and realize their worth in a safe and supportive environment, through families and other care-givers committed to their welfare. They must be prepared for responsible life in a free society. They should, from their early years, be encouraged to participate in the cultural life of their societies.

16. Economic conditions will continue to influence greatly the fate of children, especially in developing nations. For the sake of the future of all children, it is urgently necessary to ensure or reactivate sustained and sustainable economic growth and development in all countries and also to continue to give urgent attention to an early, broad and durable solution to the external debt problems facing developing debtor countries.

17. These tasks require a continued and concerted effort by all nations, through national action and international cooperation.

**The commitment**

18. The well-being of children requires political action at the highest level. We are determined to take that action.

19. We ourselves hereby make a solemn commitment to give high priority to the rights of children, to their survival and to their protection and development. This will also ensure the well-being of all societies.

20. We have agreed that we will act together, in international co-operation, as well as in our respective countries. We now commit ourselves to the following 10-point programme to protect the rights of children and to improve their lives:

1. We will work to promote earliest possible ratification and implementation of the Convention on the Rights of the Child. Programmes to encourage information about children's rights should be launched world-wide, taking into account the distinct cultural and social values in different countries.

2. We will work for a solid effort of national and international action to enhance children's health, to promote pre-natal care and to lower infant and child mortality in all countries and among all peoples. We will promote the provision of clean water in all communities for all their children, as well as universal access to sanitation.

3. We will work for optimal growth and development in childhood, through measures to eradicate hunger, malnutrition and famine, and thus to relieve millions of children of tragic sufferings in a world that has the means to feed all its citizens.

4. We will work to strengthen the role and status of women. We will promote responsible planning of family size, child spacing breastfeeding and safe motherhood.

5. We will work for respect for the role of the family in providing for children and will support the efforts of parents, other care-givers and communities to nurture and care for children, from the earliest stages of childhood through adolescence. We also recognize the special needs of children who are separated from their families.

6. We will work for programmes that reduce illiteracy and provide educational opportunities for all
children, irrespective of their background and gender; that prepare children for productive employment and lifelong learning opportunities, i.e. through vocational training; and that enable children to grow to adulthood within a supportive and nurturing cultural and social context.

(7) We will work to ameliorate the plight of millions of children who live under especially difficult circumstances—as victims of apartheid and foreign occupation; orphans and street children and children of migrant workers; the displaced children and victims of natural and man-made disasters; the disabled and the abused, the socially disadvantaged and the exploited. Refugee children must be helped to find new roots in life. We will work for special protection of the working child and for the abolition of illegal child labour. We will do our best to ensure that children are not drawn onto becoming victims of the scourge of illicit drugs.

(8) We will work carefully to protect children from the scourge of war and to take measures to prevent further armed conflicts, in order to give children everywhere a peaceful and secure future. We will promote the values of peace, understanding and dialogue in the education of children. The essential needs of children and families must be protected even in times of war and in violence-ridden areas. We ask that periods of tranquility and special relief corridors be observed for the benefit of children, where war and violence are still taking place.

(9) We will work for common measures for the protection of the environment, at all levels, so that all children can enjoy a safer and healthier future.

(10) We will work for a global attack on poverty, which would have immediate benefits for children's welfare. The vulnerability and special needs of the children of the developing countries, and in particular the least developed ones, deserve priority. But growth and development need promotion in all States, through national action and international co-operation. That calls for transfers of appropriate additional resources to developing countries as well as improved terms of trade, further trade liberalization and measures for debt relief. It also implies structural adjustments that promote world economic growth, particularly in developing countries, while ensuring the well-being of the most vulnerable sectors of the populations, in particular the children.

The next steps

21. The World Summit for Children has presented us with a challenge to take action. We have agreed to take up that challenge.

22. Among the partnerships we seek, we turn especially to children themselves. We appeal to them to participate in this effort.

23. We also seek the support of the United Nations system, as well as other international and regional organizations, in the universal effort to promote the well-being of children. We ask for greater involvement on the part of non-governmental organizations, in complementing national efforts and joint international action in this field.

24. We have decided to adopt and implement a Plan of Action, as a framework for more specific national and international undertakings. We appeal to all our colleagues to endorse that Plan. We are prepared to make available the resources to meet these commitments, as part of the priorities of our national plans.

25. We do this not only for the present generation, but for all generations to come. There can be no task nobler than giving every child a better future.

New York, 30 September 1990
ANNEX B

AGENDA

GIVING VOICE TO CHILDREN:
STRENGTHENING ADVOCACY FOR CHILD HEALTH AND WELL-BEING

January 12-13, 1993
Rockefeller University, Seven Springs Conference Center
Mt. Kisco, New York

Tuesday, January 12

Opening Session: Why Advocacy For Children? Why Now?

10:00 - 10:30 Introductions
10:30 - 10:45 Welcome
10:45 - 11:10 The International Challenge
11:10 - 11:30 Working With Governments on Advocacy
11:30 - 1:00 Lunch

Panel Discussions: Developing an Agenda

1:00 - 1:30 Panel One: Developing Leaders and Mobilizing Communities for Advocacy and Action

Facilitator: UNICEF
Panel: CEDPA

PROCOISI
YWCA
Junior League International

Nyi Nyi
Peggy Curlin
Nathan Robison
Asrukan Das
Ann Dalton

1:30 - 2:30 Discussion
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<th>Time</th>
<th>Activity</th>
<th>Panel</th>
<th>Facilitator/Speaker</th>
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<td>2:30 - 3:00</td>
<td><strong>Panel Two:</strong> Policy Advocacy</td>
<td>Rich Bissell</td>
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<td>Facilitator: A.I.D.</td>
<td>Jim Weill</td>
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<td>Panel: Children’s Defense Fund</td>
<td>Malfrid Flekkoy</td>
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<td><strong>Panel Three:</strong> Monitoring The Status of Children</td>
<td>Pamela Johnson</td>
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<td>Facilitator: AID</td>
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<td>Panel: Task Force on Child Survival</td>
<td>Tony Augustin</td>
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<td>Child Health Institute, Haiti</td>
<td>Jessica Jitta</td>
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<td>Center Kampala, Uganda</td>
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<td>7:00 - 9:30</td>
<td>Dinner</td>
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<td>9:30 - 10:00</td>
<td><strong>Panel Four:</strong> The Role of Communications</td>
<td>Peggy Dulany</td>
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<td>Facilitator: Synergos</td>
<td>Richard Reid</td>
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<td>Panel: UNICEF</td>
<td>Sam Harris</td>
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<td>RESULTS! CARE</td>
<td>William D. Novelli</td>
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<td><strong>Panel Five:</strong> Resource Mobilization</td>
<td>Terrell Hill</td>
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<td>Facilitator: UNICEF</td>
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<td>Panel: Rotary International</td>
<td>Phyllis Dobyns</td>
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<td>Save the Children</td>
<td>Wanda Engel Aduan</td>
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<td>Projecto Roda Viva, Brazil</td>
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<td>Facilitator:</td>
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<td>Panel:</td>
<td>Christian Children's Fund</td>
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<td>Summary and Next Steps</td>
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ANNEX C

PARTICIPANT LIST
CHILD ADVOCACY RETREAT

JANUARY 12-13, 1993
MT. KISCO, NEW YORK

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Vaccine Preventable Diseases
Millions of Deaths/Cases

- Measles
- Neonatal tetanus
- Pertussis
- Polio cases

Data are for 1991
Source: UNICEF 1993

Oral Rehydration Therapy
Percentage Diarrhea Cases Treated

Source: UNICEF 1990
Under-5 Mortality Trends
1950-1990

- Mid East Crescent
- India
- Sub Saharan Africa
- Other Asia
- China
- Latin America
- Former Soc. Econ.
- Market Economies

Source: World Bank 1993

Under-5 Deaths by Cause, 1990
(deaths in thousands)

- Pneumonia: 3560
- Diarrheal diseases: 3000
- Malaria: 800
- Peri- & neonatal: 2470
- Other: 970
- Neonatal tetanus: 560
- Tuberculosis: 300
- Whooping cough: 360
- Measles: 880

Slices • VACCINE PREVENTABLE
Source: UNICEF 1993
It was about forty years ago that I wrote a letter to my parents explaining why it was a waste of time to study history, and that with a limited amount of time in one's life one should be devoted to the present and future instead of wasting time studying the past. Of course, that was in anticipation of a grade that I was going to be receiving. The interesting thing is that I've become more or less obsessed with history since then. I find that everything we do really is a combination of history and vision.

I was thinking last night about how some of the things we discussed are re-visiting places in history. International assistance can be documented back to the time of Sumaria. The question of sharing benefits has been dealt with by philosophers from every religion and every culture, and by and large they have reached the same conclusion and that is: how we treat each other becomes the measure of civilization.

When I pretend that I'm looking at the present from some place else, I can easily see RESULTS!, the Children Defense Fund, Bread for the World, and other groups here writing under the pen name of Euripides, because social justice was the underlying theme in almost everything that he wrote. The involvement of women in both development and child survival is no surprise, and I think back to Aristophanes who in 411 B.C. was so disgusted with the mess that Greece was in, that he seriously called on the women of Greece to take over the country, and to bring it back to some semblance of order.

There are anthropologists who feel that one of the worst toxins in history has been testosterone. We need women to plan the future of the world. The value of studying history is not, however, in those examples. The value of studying history is that we realize that everything, every idea, every product, every person, every problem has a history, and that it's a cause-and-effect reaction that we can trace from the past to the present time. It is this realization, that this is a cause-and-effect world, that gives us all the responsibility for the future.

That's the reason to study history — to understand our responsibility to the future — because everything we do individually or collectively is going to determine what happens tomorrow. It is not a magic world. If future generations are going to know by history only that there was a disease such as polio, it will be because we make the right decisions now.

I'd like to tell you about my wife, who teaches four-year-olds. Once a year I go to her class with a white coat and a stethoscope, and we talk about what happens when you go to the doctor. Two years ago a four-year-old little girl asked me a question that I quote repeatedly. She asked me, "Do doctors have bosses?" I thought, boy, would I like to follow her career, a four-year-old asking that question... Well, I gave her an answer that you will probably disagree with — it's an idealistic answer. I said, "Of course they do; their patients are the bosses."

A few weeks after that, I was at a UNICEF meeting and I brought up that same example. I asked, "Who are the bosses at UNICEF?" The answer came very quickly: the children of the world. It is, however, an inadequate answer, because the bosses of UNICEF are not just the [existing] children of the world, they are all children that will be born in the future. That is why UNICEF has to worry not only about immunization and oral rehydration, but about the environment and educational development. So our bosses, as we sit around this table, have to be seen in that perspective — as every child that will ever be born.
A few conclusions:

First:

Pam and I have been talking about the incredible talent in this room. It's an impressive power base to start with on advocacy, but therein lies a problem. We use the phrase often about "Power corrupts. and absolute power corrupts absolutely."

There are two things wrong with that phrase that are beginning to gall me now. First, we attribute it to Lord Acton. It was actually said in those words by Isocrates, who was a contemporary of Socrates. He used that exact phrase: "Power corrupts and absolute power corrupts absolutely."

Second, when we use it, we use it in terms of leaders, or people of wealth, or people of power, but we do not use it in talking about ourselves. But if you look at the enormous power in this room, we are subject to the same problem — power corrupts. We are going to have to ask how to use that power.

Second:

It's clear that we have so much science and technology that they are way ahead of our laws, ethics, social norms, and everything else. The big gap is between science and knowing how to use it. Science is going to march on, and as Maggie said yesterday, we have to keep supporting it. We do, and I think back to the fall of 1985 when we had the 2nd Child Survival Belaggio meeting in Cartagena where we talked about the dream in which in a single visit, children would be immunized for lots of things for life. By the time we get halfway there it's already going to be an old vision. The new vision now is not to be giving children shots, but a banana with all the antigens worked into the nucleic acid. They're going to have something they want to eat and it's not going to cause them any pain. That's really the next vision as to where we should go. So support that science, but our problem now is applying what we already have.

Third:

James Grant is right: The potential is available to take the big risks out of the first five years of life for children born any place in the world. The word "timely" came up repeatedly in this meeting, and Schweitzer said that truth is always timely. It is timely for many reasons that have been mentioned, not the least of which is that we have a success to build on, so that we are no longer talking about things that we would hope to happen, but we start with some success. Ten years ago the single most lethal agent in the world was the measles virus.

That's no longer true. Less than a million children will have died of measles in 1992. The most lethal agent now — and I say this with a certain amount of despair — is tobacco. We shouldn't have to be dealing with those types of problems, but that's the new single most lethal agent.

Fourth:

Everything is connected. We say that, yet we have trouble really grasping it. It is not a new concept. Polibius said this in the second century B.C. He said it in a nice way: "The world must be seen as an organic whole where everything affects everything."

I was giving measles vaccines in Nigeria some years ago and I began thinking about what it took to get that dose of measles vaccine there. I won't go through the long vision that went through my mind on a long afternoon, but the short vision of thinking of Enders, Robbins and Weller getting the Nobel prize for tissue culture work which lead to things, and so on...

I was thinking of the science base required to have supported them, thinking of the federal resources, and a system for providing grants, and the NIH, and an appropriation system, a tax collection system, the IRS, and everything else that went into making that happen. Then vaccine manufacturers and the total
infrastructure required, such as the truck drivers, engineers, and so forth.

The manufacturers of needles and syringes, a whole category of things that we now call "cold-chain." The thought that we would probably not be using measles vaccines in Nigeria if we did not have airplanes... Thinking of Boeings and the Department of Defense, and immigration and the Ministry of Health, all the vaccinators that were out there... The Land Rovers, the systems required to build the Land Rovers... Then you imagine all these people and begin to think of the educational system that supported each one of them. The point is, you're talking now about millions, not just thousands, of people involved in a chain where not just one thing could go wrong.

And if it did go wrong, you wouldn't have a vial of measles vaccine at 43 cents a dose at that time. Think of it, millions of people and 43 cents for that dose of vaccine. So that's the story of child survival — a million Rotarians, a million sponsors — a system where everything connects to everything.

So we talked about advocacy, but as we talked about advocacy we talked about everything else that went into that — communications, mobilization, science, leadership.

Were do we need to go and what are the next steps?

Next Steps

1. We need to be renewed within the program if we are to have the right impact outside the program. We have to keep coming up with a new vision that is really of importance and interest to us.

I grew up with the statement that some things have to be seen to be believed, and it took me a long time to realize that that was backwards. There are things that have to be believed in order to be seen, and that's the value of a vision.

The new vision that we are talking about is that every child in the world has the chance to reach their full potential. It is inadequate to talk only about immunization and oral rehydration, nutrition, or education. Every child in the world should have the opportunity to meet their full potential. That is the vision that we have to work for.

2. We need to have a new emphasis on maintenance. There are still new frontiers, new groups that we have to reach that we talked about before. But we have to solidify the system in which we work, which means that we have to look at maintenance.

Eric Hoffer, walking through the streets of San Francisco years ago, was struck by differences in neighborhoods, and he said to himself, "I'll bet I could tell what country people come from by looking at the types of maintenance they do on their houses. Then he went on to carry that to the future by saying, "I'll bet I could predict which countries will be most advanced fifty years from now by looking for signs of maintenance in those countries." Then someone challenged him by asking, "What do you look for?" He replied, "I would go into a warehouse and look for a nail on the wall on which hangs a broom, because the person that put that nail there was thinking of maintenance — that's the nail of immortality."

What does this mean? What is the equivalent for child survival?

It means going to countries and seeing who has plans, who has a system of monitoring, who has a way to respond to that monitoring, who has developed the coalitions — that's what maintenance is for child survival. We have to review these maintenance procedures.
We obviously have to look at every aspect of child health and systematically ask how to improve it, but for me the essence of these two days was to emphasize concentrating on changing the social norm and changing the political norm. People talked about how we have to show faces behind the statistics — it doesn't mean exploiting people, but it does mean making statistics human. That's what people respond to.

25 years ago I was working in the famine in Nigeria during the civil war. The United States had a great interest in minimizing the famine conditions because they were supporting the federal government and didn't want this to look bad. So they were systematically downgrading the importance of the famine.

Let me tell you about a phrase that I've never forgotten. I was called in eventually to brief Henry Kissinger. I had to wait for hours, since he was running behind. So it turned out to be nighttime, and I suspected that he wasn't going to listen to the briefing, and it would be shortened.

But we finally got around to this two o'clock appointment. He listened, and when I was finished he sat down, rubbed his eyes and said, "To me those are statistics; to you they must be faces." That's what we have to do — put faces behind the statistics without exploiting people.

Concerning the changing of social norms. In this country, we have seen ups and downs with immunization, in three cycles before 1977. With the appropriations for measles vaccine, every time the number of measles cases would rise in the country we would get an appropriation for measles vaccine; then as cases would decrease we would lose the money.

It happened three times. Finally in 1977, an immunization initiative was started to see if we could get to a point of coverage were this didn't keep happening. It was in the early 1980's when we actually had one week without a reported case of measles. We had high hopes of being able to interrupt the transmission of measles. But what happened? First, in the 1980's, public health funds decreased; and second, AIDS came in and created competition for public health activities and funds.

But, that's not the end of the story. What happened is that social norms changed, to the point where parents did not accept it for children to have measles. Where in 1977 you could not have gotten a newspaper story without at least 1,000 cases of measles, by 1990 you would get a story with just a dozen cases of measles. The social norm has changed, and people will not let the government go on this issue. We can predict what will happen — and we have seen it in the last few years — appropriations will increase. Social norms have changed and political norms have changed. We see this change in Rotary Clubs, we see it everywhere. We have to ask now, “What can we do globally to change this even more?” I think we have to develop — as we discussed in this meeting — clear messages, we have to make the situation transparent, and we have to make coalitions work.

**I have three suggestions for action following this meeting:**

1. The sponsors of this meeting — AID, Rockefeller, and UNICEF — should take the information generated by this meeting and put it into a usable form, outlining what the conclusions are, what we have learned, what we should be doing. This could become a set of guidelines for advocacy.

2. The Task Force for Child Survival has always had a difficult time going beyond the original five (5) groups. This is an understandable difficulty, since if we add one more group such as AID, which we have wanted to do over the years, we then have to add all bi-lateral agencies; if we add one NGO, then we have to add all NGO's. It seems to me that this is a perfect opportunity to change a little bit how we work, and we could do this by having a sub-committee for advocacy which is all-inclusive.

I would suggest that the report the three sponsors put together be circulated to the participants first, with the request that you
not only give ideas on how it is written, but ideas on what you would be willing to do on an advocacy sub-committee, and what you think the sub-committee should do. Then we see if we can form a sub-committee that includes this group as the core, which then becomes inclusive for anyone else who wants to join.

3. We should also include what we are doing now with CNN, which is to have a global monitoring of what happens with the summit goals.

**In conclusion:**

- Share this new vision for development: What's good for the world in the long term is good now.

- Organize efforts to monitor corruption and spending on weaponry vs. child survival, in similar fashion to Amnesty International.

- Build on this momentum. What if Child Survival was an olympic event? Identify mentors in AID, UNICEF, and the private sector, e.g., Merck's donation of Ivermectin. Hold dinners to honor groups and their efforts. Give employees a sense of pride in their company.

- Make the Head of State the chief Child Survival person, recognizing his accomplishments.

- Be tenacious.

- Make this a golden age for historians of the future.
ANNEX F

References


