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Introduction

About this guide

The IDF Guide to Data-Driven Advocacy compiles information and advice that will help you find, interpret and use data for successful diabetes advocacy.

This guide is targeted at people interested in diabetes and health-related advocacy who want to learn more about how data can take their advocacy work to the next level and how they can contribute to improving the data on diabetes. It can also be a useful resource for researchers, providing insight on how they can support diabetes advocates to drive change.

Throughout this guide, we will share advocacy tips and experiences from people from the two IDF networks of advocates: the Young Leaders in Diabetes (YLD) and the Blue Circle Voices (BCV).

About the International Diabetes Federation

The International Diabetes Federation (IDF) is an umbrella organisation of over 240 national diabetes associations in 168 countries and territories. It represents the interests of the growing number of people living with diabetes and those at risk. IDF has been leading the global diabetes community since 1950. Its mission is to promote diabetes care, prevention and a cure worldwide.

IDF is engaged in action to tackle diabetes from the local to the global level – from programmes at the community level, to worldwide awareness and advocacy initiatives. IDF activities aim to influence policy, increase public awareness, encourage health improvement, promote the exchange of high-quality information about diabetes, and provide education for people with diabetes and their healthcare providers.

Learn more about IDF at www.idf.org
Effective diabetes advocacy

What is advocacy?

Advocacy is systematic and planned work aimed at influencing decisions within political, economic, or social institutions to generate positive change. While advocacy could be approached individually, you can only achieve actual change through partnerships and collaboration.

Diabetes advocacy is any work aimed at developing and implementing changes that impact positively the lives of people living with and affected by diabetes in areas such as health promotion, prevention, access to medicines and care, or the fight against discrimination.

What makes an effective diabetes advocate?

To be an effective diabetes advocate, you must know:

- **What to ask for:** setting goals requires an in-depth knowledge of the topic, based on the latest available research into the local, national or regional situation
- **How to ask for it:** some activities are more appropriate than others, and crafting strong advocacy messages is an art in itself
- **Who to ask:** it is key to understand how the decision-making process works and which stakeholders can support your advocacy goals
- **And when:** identifying the right advocacy opportunities can change the outcome of your work

Where can you learn more about diabetes?

Before starting your advocacy work, you need to have a good understanding of diabetes – what it is, its current extent, its evolution in recent decades and the projections for the future.

- Learn more about diabetes at the [IDF website](#) and the [WHO website](#)
- Learn more about diabetes in your country in the [IDF Members websites](#)

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“The mobilisation of the global diabetes community to request urgent action on diabetes in 2011, for the first UN High Level Meeting on Non-communicable Diseases (NCDs), is a perfect example of successful data-driven advocacy. These advocacy efforts eventually led to the 2012 adoption of the WHO Global Monitoring Framework on NCDs and the target of a 0% increase in diabetes and obesity by 2025.”

Andrew Boulton
IDF President (2019–2022)
Our contributors

Bruno Carrattini
Young Leader in Diabetes mentor, nutritionist and Certified Diabetes Educator, Uruguay

“Networking is one of the most important components of advocacy. The creation of strategic alliances with different sectors of the community has been a key aspect of my advocacy work. To be an effective advocate, you need to have a critical view of the reality in which you live to plan campaigns, always involving other actors of society for a mutual benefit.”

Heather Koga
Blue Circle Voices member and Advocacy Officer, Zimbabwe

“Advocates need to be open to new ideas and willing to learn new things. The world of medicine and disease management is always changing, with new information, ideas and technologies always coming up. To be an effective advocate you must be flexible rather than rigid.”

Uroš Bogdanović
Young Leader in Diabetes mentor and Law student, Serbia

“When you are representing a community, you are an advocate all the time. People may be looking at you, whether you are actively doing something or not. You need to make sure to always be a good example.”

Apoorva Gomber
Young Leader in Diabetes mentor and PhD student, India

“People with diabetes must learn as much as they can about diabetes and its management. The first step towards effectively advocating for healthcare for all is to advocate for yourself. For a long time, lived experiences have been a missing part of the diabetes management puzzle.”
Dániel Végh
Young Leader in Diabetes mentor and Oral Health Researcher, Hungary

“Use the opportunities that national and international organisations provide and learn from your colleagues. You can then take all your learnings to your country, to change your local diabetes community, help others, deal with regulations and influence politicians.”

Pei Yan Heng
Blue Circle Voices member and teacher, Singapore

“You need to have the ability to take risks, accept failure and reflect. Content development and management is as important as building good working relationships with your team members.”

Diana Estephanía Novelo Alzina
Young Leader in Diabetes mentor, nutritionist and Certified Diabetes Educator, Mexico

“Stay in touch with the people who can be of help. You have to be honest, and clearly and patiently explain your goal.”

Bernard Enyia
Blue Circle Voices member and diabetes advocate, Nigeria

“Presenting an evidence-based advocacy message to policymakers is key to turn them into allies of your cause.”
10 steps to effective data-driven advocacy

**Step 1**
Understand the importance of quality data

*An effective diabetes advocate knows there cannot be advocacy without data, because data provide the essential background information to help place an issue in context.*

Data are all around us — in the books we read, the TV programmes we watch and the social media posts with which we engage. Research and the data it generates have an essential role in helping clinicians provide the best possible service to those in their care and prevent outdated practice or undesired outcomes. Data also support patients and caregivers to make the right choices for better health and wellbeing. Furthermore, data provide policymakers with evidence to take decisions based on patient needs and an understanding of current public health trends. Data can help generate positive social change, resulting in healthier lives for ourselves and for those around us.

**ADVOCACY TIP**

Some disease burden measures can tell powerful stories and call for political action in a very simple and direct way. One example is the disability-adjusted life years (DALYs), a measure for overall disease burden expressed as the cumulative number of years lost due to ill-health, disability or early death.

Learn more about DALYs at: www.who.int/data/gho/data/themes/mortality-and-global-health-estimates/global-health-estimates-leading-causes-of-dalys

**Quality data is fundamental to generating change:**

- By providing evidence that can inform advocacy strategies, drive action for research and guide policy development
- By offering feasible and workable solutions to an issue, and cost-benefit arguments associated with pursuing different courses of action or, indeed, the impact of inaction
- By helping analyse issues from different perspectives, thereby revealing false assumptions, providing counter arguments to positions held by stakeholders who may not be sympathetic to our cause and explaining why previous strategies have worked or failed

- By helping advocates to directly and indirectly influence decision makers, stakeholders and relevant audiences to support and implement actions that benefit health and wellbeing
- By telling “stories” based on demographics, the burden of disease or risk factors

You should be critical of the literature you choose to inform your advocacy work. Good diabetes epidemiological research is population-based with representative samples. It uses diagnostic methods correctly and attracts high response rates. You should always look for the most recent epidemiological studies or the latest publication using national diabetes registry data.

“The lack of reliable data from good quality studies poses a challenge for advocacy in much of Africa. Countries do not have reliable figures on which they can base their work, so it is very difficult to plan interventions as they do not know how many people need help, the kind of help they need, where they are located or the various methods by which they can be reached and assisted.”

Heather Koga
BCV member and Advocacy Officer, Zimbabwe
An effective diabetes advocate has a good understanding of the latest global and local diabetes estimates and projections, how to choose a good data source and what their country is doing to tackle diabetes.

Before drafting your advocacy strategy, you need to do some research. The IDF Diabetes Atlas is a solid starting point to discover the current burden of diabetes, its development over recent decades and projected future trends. It will provide you with:

- Diabetes prevalence estimates for your country
- The estimated diabetes prevalence over the past 20 years, based on the best available data
- A view on whether your country is on track to achieve the World Health Organization’s target of a 0% increase in diabetes and obesity prevalence by 2025
- The projected prevalence for 2045
- The evolution of diabetes-related mortality and whether your country is on track to achieve the Sustainable Development Goal (3.4) of a 30% reduction in premature mortality from non-communicable diseases (NCDs) by 2030
- The direct financial impact of diabetes in our societies

On top of knowing the latest diabetes-related data, you also need to be aware of everything that your country has done about diabetes in recent years. Has your Ministry of Health published a national report or population-based health study that includes a diabetes section? Does your country have a public diabetes registry or database? Has your government developed any policy that could positively affect people living with diabetes, such as a law to ensure affordable access to essential care? Is there a national diabetes plan or strategy? In addition to searching information for your country, we also recommend you research the situation in your Region and neighbouring countries. Is the diabetes prevalence in your country higher than the average for your Region? Is your national diabetes prevalence worse than the surrounding countries? Does a country geographically close or similar in size to yours have a diabetes plan or strategy that could be applicable in your country? Is your country spending more on diabetes without achieving the same level of success as other countries in the Region? The responses to these questions can provide powerful evidence to support your advocacy work and help you convince your government to do more to tackle diabetes.

The data from the IDF Diabetes Atlas has enabled me to put diabetes into context by providing key figures on the magnitude the diabetes problem poses. Thanks to this data we can come up with targeted responses to address the needs and priorities of different groups.”

Heather Koga
BCV member and Advocacy Officer, Zimbabwe

ADVOCACY TIP

Download your IDF Diabetes Atlas country profile or regional factsheet at www.diabetesatlas.org. These will provide you with a snapshot of the situation in your Region and how well your country is doing compared to others. You can use them to inform your advocacy work and as handouts when you reach out to your target audiences.

If you want to learn more about how your country is doing against international targets, check the WHO NCD country profiles at apps.who.int/iris/handle/10665/274512

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Heather Koga
BCV member and Advocacy Officer, Zimbabwe
Step 3
Identify priorities and set your goal

An effective diabetes advocate knows how to process data and evidence to identify gaps, understand priorities and set ambitious goals.

Your advocacy goal is the ultimate outcome you hope to achieve. It should be aspirational and ambitious, something your stakeholders can easily understand. It is typically long term and not necessarily measurable. The most motivating goals are those that you are not fully certain you are able to achieve, so do not be afraid to be ambitious.

Research and data will inform how to formulate your goal. Initial research will allow you to identify the priority areas that require urgent action. Of course, you will need to stay updated on emerging research and how new evidence impacts your advocacy goal and overall strategy. Be aware that the formulation of your goal will impact your advocacy strategy and plans. Without a clear goal in mind, you will not be able to identify the steps that will propel you towards your goal. Here are some questions which can help you set the right goal:

■ What do you ultimately want to achieve?
■ Is there evidence that suggests the change you want will impact people living with diabetes positively?
■ Does the change you want to achieve affect national or a local health policy?
■ Is there a chance that additional funds will be dedicated to changing the situation you want to address?
■ Is there any data indicating that the change you want can be cost-effective in the medium or long term?
■ What is your capacity to address the challenge? Do you already know someone who could support you?
■ What opportunities exist to influence the issue?

We advise you to formulate your goal in a positive manner. Focus on how you imagine things in the future, not on what you do not want to happen. Stakeholders often respond better to a positive vision of the future, so this will help you gain support for your activities at a later stage. For example: “people with diabetes in my country will be considered equal to those living without diabetes”, instead of “people with diabetes will not be stigmatized.”

ADVOCACY TIP

If your country does not have quality diabetes data and you would like to address that issue, a very appropriate goal would be to aim for encouraging research in this area and establishing collaboration to build a research project to cover the gap in knowledge.

Using Research Evidence: A Practice Guide by the Alliance for Useful Evidence can help you consider which data would be most suitable for different advocacy purposes.

It is available to download from [www.nesta.org.uk/toolkit/using-research-evidence-practice-guide/](http://www.nesta.org.uk/toolkit/using-research-evidence-practice-guide/)

“Numbers talk – without them, we cannot support our demands to get the attention of policymakers. When I was planning my YLD project, I realised there wasn’t a type 1 diabetes registry in South East Mexico. I therefore chose to establish one in my Region as the goal of my project– so the type 1 community could influence public policies and participate in the government agenda.”

Diana Esthephanía Novelo Alzina
YLD mentor, nutritionist and Certified Diabetes Educator, Mexico

“People with diabetes in my country will be considered equal to those living without diabetes”, instead of “people with diabetes will not be stigmatized.”
10 steps to effective data-driven advocacy

Step 4
Identify your target audience

An effective diabetes advocate scans the environment to locate relevant stakeholders and understand who has the capacity to help achieve the advocacy goal.

Before deciding which advocacy activities you will undertake, you need to know who has the capacity to generate the change you ultimately want to see. Stakeholders are divided into two main categories:

- Primary decision makers: people and organisations with capacity to generate change and to develop, implement and revoke public policies. Primary decision makers include national or local governments, ministries and parliamentarians.

- Influencers: people and organisations who have the capacity to persuade primary decision-makers. This category includes opinion leaders (such as national or local media outlets and community leaders), celebrities and public figures, researchers, experts in the field and civil society organisations (including national diabetes associations).

Start by listing all the people and organisations you think could have a say in achieving your advocacy goal, splitting them into primary decision makers and influencers. Do not hesitate to ask people around you for help in this task – they may recommend names you have not considered or did not know about.

Once your list is ready, you need to decide where to focus your advocacy efforts. Time is a limited resource, so the most efficient approach is to prioritise the outreach to primary decision-makers and influencers who are favourable to your advocacy goal. They will be your target audience – the people and organisations you will try to influence and ask to bring about the change you want to see.

ADVOCACY TIP

Power mapping² is a great tool for stakeholder analysis. You can use the template in Annex two to classify just how influential and beneficial to your goal the decision makers and influencers you have identified may be.

- High power, strongly in favour of your goal: stakeholders in this group are your top priority. Convincing them to support your advocacy activities could yield amazing results.

- Low power, strongly in favour of your goal: everyone in this group could potentially be a partner for your advocacy work. Invest some time in reaching out to them – especially if you fail to mobilise more powerful actors.

- High power, strongly opposing your goal: analyse whether these stakeholders oppose your goal because it does not fit their priorities or whether they do not understand the positive impact of the change for which you are advocating. If you suspect they are lacking data, it would be worth reaching out to them with the evidence you have gathered and asking them to reconsider their position.

- Low power, strongly opposing your goal: it will not be worth dedicating time to this group – even if they reconsider their position, they do not have the power to generate change.

The level of influence and the position of your stakeholders is not static and can change with time. For example, a low-power stakeholder can become high power if they are elected to a seat in parliament. Therefore, you should revisit your power map regularly.

² Power Mapping and Analysis, by Anita Tang.
www.commonslibrary.org/guide-power-mapping-and-analysis/

I am the Co-Chair of a consortium of ten organisations advocating for the reduction of sugar content in sugar-sweetened beverages in Nigeria. We also advocate for front-of-label packaging warning of the high sugar content in these drinks, so consumers can make informed decision. We knew from the start that only the Nigerian House of Representatives had the power to make our objectives a reality. We chose to run an advocacy campaign with the Members of the House, asking a motion for a 10% excise duty in sugar-sweetened beverages – and to channel the funds raised to prevent and treat diabetes, obesity and other NCDs.”

Bernard Enyia
BCV member and diabetes advocate from Nigeria
Step 5
Build partnerships

An effective diabetes advocate understands the need to partner with other individuals and organisations to maximise the chances of generating positive change.

As mentioned at the beginning of this guide, change is only possible through partnerships and collaboration. Working with like-minded people and organisations favourable to your advocacy goal will multiply your chances of success. **Voices are more influential when they speak in harmony – and advocates are more efficient when they work together.**

Start by taking a look at your stakeholder map and evaluating which of the people and organisations listed could be potential advocacy partners. Obviously, you will only need to focus on those stakeholders who are strongly in favour of your advocacy goal. It should normally be easy to establish partnerships with stakeholders who have a low level of influence, since they may also be advocating towards the same cause as you. Sometimes, it could be possible to partner with a high influence stakeholder, but they would need to be extremely interested in the topic. An obvious example here would be a policymaker who is living with diabetes and is in favour of developing policies to improve the lives of other people living with the condition.

Most of the stakeholders you partner with will also be advocates who have undertaken similar research into the topic. **When building partnerships, it is paramount that all parties share the evidence they have previously gathered.** Most of it will be similar, but you may come across new data that could help support requests to your target audience.

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**ADVOCACY TIP**

Academics and researchers make excellent advocacy partners. They can facilitate access to the latest evidence and should be able to explain data in a way that everyone can understands. It is very important to communicate research findings clearly and engagingly to propose change.


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"When I started working in the type 1 diabetes registry for my Region, I learned about “Por una sola voz en la diabetes tipo 1” ("For a single voice in type 1 diabetes") – a movement aimed at developing a national registry. I learnt that no one from my Region was involved in the activity and decided to start collaborating with them instead of starting work on a registry from scratch by myself. United we are stronger."

Diana Estephanía Novelo Alzina
YLD mentor, nutritionist and Certified Diabetes Educator, Mexico
10 steps to effective data-driven advocacy

Step 6
Define your objectives and plan your strategy

An effective diabetes advocate can break down their advocacy goal into different phases and SMART objectives, and arrange them in different advocacy phases.

Your ultimate advocacy goal is a broad, abstract, non-measurable and long-term aspiration. Achieving it will often take years of hard work and the completion of many activities. To make progress towards your goal you need to split the work you are planning into different phases, which could be defined by a period of time (for example a one-year phase) or by the milestone you would like to achieve by the end of the phase (such as all stakeholders having received the relevant data).

To ensure you make progress towards your goal by the end of each phase, we recommend you to set SMART objectives:

- **Specific**: objectives must be concrete and well-defined. A vague objective will make it difficult for you to determine the activities to help you attain it
- **Measurable**: you can only assess progress towards your objective, and whether it has been achieved or not, if it has measurable component
- **Attainable**: your resources will be limited, so you need to find a balance between an ambitious yet realistic objective
- **Relevant**: your objective needs to support the achievement of your goal
- **Time-bound**: you need to set deadlines for the accomplishment of your objectives so you can assess when you need to plan the related activities

Start your planning by outlining your first advocacy phase and the three or four SMART objectives you want to achieve by the time the phase is over. Remember to be realistic and base your phase and objectives on the data you have managed to gather and the resources you have at that given moment. You may not be able to define all the phases and SMART objectives that will lead you to the completion of your goal immediately, but you should at least know what you want to achieve by the end of the first phase and immediately after. As you advance with your advocacy work, you will get better at planning and defining phases and setting SMART objectives will get easier.

**ADVOCACY TIP**

Use the template on Annex 3 to work on your SMART objectives.

“ My project involves a virtual platform – Beta Change – that allows people living with diabetes and their relatives to share their written or video testimonials to raise awareness and inspire people around us. I do not always follow SMART objectives – I think every person has to find the objective setting method that works best for them. For me, one of the most difficult aspects of advocacy work is measuring its impact. This is particularly the case for online advocacy.”

Pei Yan Heng
BCV member and teacher, Singapore
Step 7
Craft your data-based advocacy messages

An effective diabetes advocate understands the importance of a good message and what it needs to contain to appeal the target audience.

Putting together a good message is one of the most important steps of your advocacy work. **The response from your target audience, your future engagement with advocacy and the success of your strategy entirely depends on how good the message is.** You therefore want to dedicate as much time as is needed to craft the best possible message.

A good message needs to facilitate communication with your stakeholders. **It has to be easy to understand, straightforward, impactful and easy to remember.** Messages need to include:

- **The problem:** include data that highlights the extent of the issue and an example of it, such as a testimonial or case study. If you are using someone’s story for your advocacy messaging, make sure the person signs a consent form allowing you to use their story.

- **The call to action:** your target audience needs to understand what you need them to do.

- **The reasons for change:** include all evidence that shows the potential positive impact (especially human and financial) of the actions you are requesting.

- **The deadline:** to make sure you can achieve your objective in time, you must give your target audience a timeline for them to act.

If you include all the above in your message, you will be appealing to your target audience’s brain, heart and hands – they will understand the issue, feel emotional about it and know what they can do to improve the situation.

**Advocacy messages are not universal – a great message for one stakeholder may not be the best for another.** You must put yourself into your target audience’s shoes and consider the type of evidence and information most likely to impact them. For example, policymakers tend to react more to messages using evidence on the financial impact of the issue you want to address, while the general population is normally more touched by personal stories.

**ADVOCACY TIP**

Use the template on Annex 4 to prepare your overall advocacy message and tailor it for different audiences.

You need to tailor your messages depending on the channel you will use to deliver them. In-person interactions are a powerful way to share your messages but can be limiting when it comes to sharing evidence in a simply way. Written communications and social media, on the other hand, are less direct but offer the possibility to use tools that facilitate communicating evidence, such as infographics, drawings or charts. Regardless of who you are targeting or which channels you are using, make sure the evidence you use in your advocacy messages is simple to understand. Ask researchers or anyone in your team who is good with data for support in this task. Feel free to test your messages on the people around you and assess how easily they understand the evidence.

"**Messages for policymakers need to include evidence of what the current situation is and which would be the benefits of action.** When preparing our advocacy messages, we first prepared a draft, using evidence from the IDF Diabetes Atlas, the Cochrane Library and the Diabetes Association of Nigeria. We then had a brainstorm session to make sure the messages were appealing for policymakers. The document with all the key messages was distributed to the Members of the House of Representative with a clear call to action: to move a motion for deliberations in the House of a tax for sugar-sweetened beverages.”

Bernard Enyia
BCV member and diabetes advocate, Nigeria
10 steps to effective data-driven advocacy

**Step 8**
Choose and train your messengers

*An effective diabetes advocate knows that the messenger is as important as the message itself.*

The most powerful message won’t be convincing unless it is delivered by the right messenger. Messengers need to be credible, charismatic and have the capacity to communicate clearly and passionately the need for change.

A good messenger understands the issue they are talking about. They get the evidence right and can address questions from the target audience. All messengers should be trained on a particular aspect of how to deliver a message appropriately. For example, researchers can be great at communicating evidence, but may need coaching on storytelling. On the other hand, people living with diabetes are often powerful storytellers, but may need support to get the evidence right.

Select the messages and the messengers based on the target audience. You must consider using different messengers when reaching out to different target audiences. In general, messengers will be more efficient if they are regarded as an expert in their field or if the target group feels a connection with them. When trying to convince policymakers, a researcher or medical professional may be the most appropriate messenger. However, the general public often feels more motivated and connected to people living with diabetes or celebrities.

The messengers, like your target audience, need to know what you want from them. Whoever you choose as your messenger, be very clear about the most important evidence and information they need to focus on. Remember to treat them as partners in advocacy, not only as a messenger. Their input can often bring a fresh perspective which can benefit your advocacy strategy.

“Working with celebrities can create great momentum and increase the reach of your advocacy campaign enormously. But they often have very busy schedules, which can make collaboration difficult. Together with the Uruguay Diabetes Association (ADU), I involved players from the Uruguay national football team as messengers in a national diabetes awareness campaign in 2018. Since diabetes prevalence is very high in Uruguay, we first approached football players by asking them if they knew someone with diabetes – and it was the case for many of them. We shared ADU materials with them, including highlights about diabetes in our country, and offered to work together and respond to any doubts they had. We also shared the IDF Atlas figures for Uruguay – which they understood.”

Bruno Carrattini
YLD mentor, nutritionist and Certified Diabetes Educator, Uruguay
Step 9
Implement your advocacy strategy

An effective diabetes advocate is capable of defining and prioritising their advocacy activities, assessing risks and adapting their advocacy strategy to respond to unforeseen circumstances.

Once you have defined your SMART objectives, message and messengers, you can start planning the activities that will help you achieve your advocacy goal.

For each of your SMART objectives, you will need to think of specific activities that will help you achieve them. Different types of activities will help you achieve different aspects of your objectives, so you will have to combine a variety of initiatives to maximise your chances of success. Some of your activities will have to focus on raising funds to allow the implementation of your advocacy strategy, connecting with researchers to have access to the latest evidence, or networking to identify supporters for your advocacy goal. Others will be more directly linked to delivering your message to your target audience – which can include organising online or face-to-face events, engaging in meetings with policymakers, or developing media or social media campaigns to promote the evidence you have gathered and the need for action.

When planning your advocacy activities, it is very important to integrate online and offline initiatives as much as possible to engage your audience and deliver your messages. While advocacy has traditionally happened offline, social media platforms have provided advocates with a very powerful tool to disseminate their messages to a wider public and recruit more supporters to their goals. Therefore, do not forget to combine offline and online tactics to create as many chances as possible to share your evidence and influence change.

After you think of potential activities to implement, you will end up with a list of initiatives that cannot happen simultaneously – either because you do not have the resources to execute them all, or because they need to happen after other activities have already taken place. It will likely take years to carry out all your advocacy activities, so you need to prioritise where you start. In order to assess what needs to be done first and define the priority activities, it can be helpful to ask yourself the following questions:

- What evidence do I have at the moment?
- Will new evidence be published soon?
- What resources do I have?
- Which activities will require the least effort?
- Which activities will have the most impact?
- For which activities do I have sufficient supporting evidence?
- What has been done in the past in this area and was it successful?

ADVOCACY TIP

Use the template in Annex 5 to plan your advocacy activities. In Annex five, you can find an example of an advocacy goal, SMART objectives and activities related to diabetes research.
10 steps to effective data-driven advocacy

Once you have defined your priority activities, you need to plan each of them carefully. For each initiative you need to:

- Set a timeline: bear in mind the deadlines you have set for your SMART objectives. Also think of relevant national and international days and weeks that could provide an opportunity to advocate for the change you want to see. Do not forget to add dates to your timeline indicating when new data will be available – for example, when IDF will release a new Diabetes Atlas or report

- Assign responsibilities: establish which member of your team is responsible for each activity, based on everyone’s skills. Someone who understands data well should be in charge of research, while another team member with great storytelling skills could take care of delivering your advocacy messages

- Analyse the resources required: consider the financial and human resources you will need for each step of your advocacy strategy

- Assess risk: foresee the challenges that may prevent you from implementing your activities, such as a lack of evidence, insufficient funds, lack of institutional support or limited human resources

All the steps of activity planning are very important, but people often overlook the risk assessment – which is a big mistake. Executing an advocacy strategy depends heavily on external stakeholders and circumstances. Many things may not go to plan. If you have clarity about any potential challenges and classify them according to their risk (low, medium or high), you could plan mitigation strategies which would help you adapt your advocacy plan, if required.

“
For my YLD project I was planning a cycling tour around Serbia. The tour was intended to gather people with diabetes to cycle around the country for a few days, visiting local diabetes organisations on the way. There would be short lectures on diabetes in each city, with an emphasis on diabetes awareness and the importance of physical activity in diabetes prevention and treatment. At some point, I realised the project was too big and I didn’t have enough resources to implement it. I didn’t have the human resources required to implement a project of such scale. I had to set a more attainable objective, which is never easy.”

Uroš Bogdanović
YLD Mentor and Law Student, Serbia
Step 10
Measure your results and report progress

An effective diabetes advocate monitors the development and impact of each activity to track progress towards SMART objectives and their ultimate advocacy goal.

The only way to know if your advocacy work is successful is by constantly measuring your results. Your last step as a diabetes advocate will be to monitor and assess your activities and progress.

A central aspect of evaluating your progress is putting together different type of reports:

- **Progress reports**: these are helpful for you and your team to understand whether you are on track with your timeline, whether you still have sufficient resources, whether team members are fulfilling their responsibilities and identify the need to make any adjustments to overcome any challenges. They should be planned at activity-level.

- **Final reports**: these should assess your progress towards SMART objectives or advocacy phases. The measurable and time-bound components of your SMART objectives will allow you to track whether they have been achieved or not. Final reports are very helpful to identify where plans have failed and can allow you to better direct your efforts in future advocacy phases.

You will often need to collect data to measure the success of your activities. For example, if you want to know whether participants are satisfied with an activity you have developed, you will have to prepare and circulate feedback questionnaires. Often, you will need to establish a baseline prior to action to know whether an indicator has improved after you have implemented your activity (for example, to know if the participants of an education activity have improved their knowledge). In these cases, you will also need to ask participants for feedback prior to the activity.

While you can treat progress and final reports as internal team documents, consider sharing them with your supporters. Knowing how you are advancing with your strategy may encourage them to get more engaged in the future. In case you receive financial support from one or more external partners, you will need to share the progress and final reports with them.

When discussing your partnership, you must agree on when you should deliver these reports and whether you need to follow a specific template.

IDF is also keen on receiving updates from advocates on national, regional and local initiatives. We therefore invite you to share your advocacy learnings – both successes and “failures” – and everything you manage to achieve with your work with us at advocacy@idf.org.

What about tracking progress towards your ultimate goal?

As we have mentioned previously, goals are broad, abstract and long-term aspirations – which are generally not measurable. However, it is sometimes possible to track progress towards them. For example, if your ultimate goal is to “halt the rise in diabetes prevalence in my city”, you would be able to assess whether the goal is achieved by monitoring the data for diabetes prevalence over a number of years.

My YLD project, Diabetes India Youth in Action (DIYA) Leadership Camps, focused on raising awareness of type 1 diabetes, combatting stigma and providing people living with it with the opportunity to connect with others, build self-confidence, learn about self-management and develop other skills. To understand the impact of these community interventions, it was important to identify what to measure and how to measure it. My team ran a baseline survey to evaluate the participants’ knowledge about diabetes, attitude towards chronic illness and satisfaction with current diabetes care prior to the camps. Another survey was run after the camps took place. The results from these surveys showed an improvement in the self-confidence and diabetes knowledge among campers. We also put together a report, which has proved helpful to tailoring interventions to the needs, culture and practices of the community.”

Apoorva Gomber
YLD Mentor and PhD student, India
10 steps to effective data-driven advocacy

Implementing the 10 steps to deliver effective data-driven advocacy

Before starting with step one, you have to understand that advocacy is never executed in a straight line – there will be many curves, bumps and ups and downs along the way. You will sometimes feel like your efforts are not yielding any results and you may be tempted to give up. Many advocates also think it is a failure to have to adapt their original plans to respond to the challenges they encounter. But you need to think of your advocacy work as a learning experience – the more you advocate towards your ultimate goal, the easier it will become.

This guide is intended to provide support for your data-driven advocacy work, but these 10 steps are not set in stone. Sometimes, it will be more efficient to approach the steps in a different order, and occasionally you will not need to undertake every step. You know your environment better than anyone else, so think what is best in your situation. Don’t work in a vacuum, surround yourself with other enthusiastic diabetes advocates and plan carefully together. Identify and use quality data to support your advocacy as much as possible.

ADVOCACY TIP

The Advocacy Checklist in Annex 1 provides an overview of everything we have mentioned in this guide that you need to bear in mind for your advocacy work. Take a look at it so you do not miss out any important step.
Annexes
## Annex 1: Advocacy checklist

<table>
<thead>
<tr>
<th>1 – Understand the importance of quality data</th>
<th>Ongoing</th>
<th>Done</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ongoing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Read more about disease burden measures</td>
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<tr>
<td>Check your country performance on NCD action</td>
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<tr>
<td>Research national/local government programmes on diabetes research activities. Identify areas for improvement</td>
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</table>

<table>
<thead>
<tr>
<th>2 – Search for relevant data</th>
<th>Ongoing</th>
<th>Done</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ongoing</td>
<td></td>
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</tr>
<tr>
<td>Download the IDF Diabetes Atlas, regional factsheets and your country profile</td>
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<tr>
<td>Identify latest diabetes epidemiology data from national/local government figures</td>
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<tr>
<td>Compare the diabetes performance of neighbouring countries</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>3 – Identify priorities and set your goal</th>
<th>Ongoing</th>
<th>Done</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ongoing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identify gaps in your country’s diabetes performance</td>
<td></td>
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<tr>
<td>Formulate your overarching goal</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>4 – Identify your target audience</th>
<th>Ongoing</th>
<th>Done</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ongoing</td>
<td></td>
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<tr>
<td>Identify all potential stakeholders (decision-makers and influencers)</td>
<td></td>
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</tr>
<tr>
<td>Power map your target audience (Annex 2)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prioritise your target audience</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>5 – Build partnerships</th>
<th>Ongoing</th>
<th>Done</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ongoing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identify potential partners among your stakeholders</td>
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<tr>
<td>Reach out to your potential partners</td>
<td></td>
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<tr>
<td>Share evidence with your partners</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>6 – Define your objectives and plan your strategy</th>
<th>Ongoing</th>
<th>Done</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ongoing</td>
<td></td>
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<tr>
<td>If required, develop several phases for your advocacy strategy</td>
<td></td>
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<td></td>
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<tr>
<td>Set 3–4 SMART objectives (Annex 3)</td>
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</table>

<table>
<thead>
<tr>
<th>7 – Craft your data-based advocacy messages</th>
<th>Ongoing</th>
<th>Done</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ongoing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Develop your advocacy messages and tailor them to different audiences (Annex 4)</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>8 – Choose and train your messengers</th>
<th>Ongoing</th>
<th>Done</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ongoing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>List your potential messengers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identify the best messengers for your target audiences (add them to Annex 4)</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Train messengers to understand and deliver the messages</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>9 – Implement your advocacy strategy</th>
<th>Ongoing</th>
<th>Done</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ongoing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>List potential activities for each SMART objective</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prioritise activities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Set a timeline</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assign responsibilities within your team</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Analyse the resources required</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assess risks</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fill out the Advocacy work plan (Annex 5)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>10 – Measure your results and report progress</th>
<th>Ongoing</th>
<th>Done</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ongoing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Survey your target audience to set baseline prior to intervention</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Survey your target audience to track progress after intervention</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Adapt plans if required</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prepare progress report</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Prepare final report.</td>
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</tr>
<tr>
<td>Share reports with your partners/funders</td>
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<tr>
<td>Keep IDF informed of your advocacy work</td>
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</tr>
</tbody>
</table>
Annex 2: Power mapping template
## Annex 3: SMART objectives template

<table>
<thead>
<tr>
<th></th>
<th>SMART questions</th>
<th>SMART answers</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>S</strong></td>
<td>Specific</td>
<td><strong>What do you want to achieve?</strong> Be as specific as possible</td>
</tr>
<tr>
<td><strong>M</strong></td>
<td>Measurable</td>
<td><strong>How will you be able to measure the success?</strong></td>
</tr>
<tr>
<td><strong>A</strong></td>
<td>Attainable</td>
<td><strong>Is your objective realistic?</strong> Do you have, or will you be able to get, the resources you will need?</td>
</tr>
<tr>
<td><strong>R</strong></td>
<td>Relevant</td>
<td><strong>Is this objective relevant for your ultimate advocacy goal?</strong></td>
</tr>
<tr>
<td><strong>T</strong></td>
<td>Time-bound</td>
<td><strong>By when should this objective be achieved?</strong> Bear in mind your overall advocacy timeline</td>
</tr>
</tbody>
</table>
### Annex 4: Advocacy messaging template

#### OVERALL ADVOCACY MESSAGE

- **Problem:**
- **Evidence (data, facts):**
- **Example (testimonial):**
- **Reasons for change:**
- **Deadline for change:**

#### AUDIENCE-TAILORED ADVOCACY MESSAGE

<table>
<thead>
<tr>
<th>Audience</th>
<th>Main interest</th>
<th>Actions desired from them</th>
<th>Potential messenger</th>
<th>Tailored message</th>
</tr>
</thead>
</table>
## Annex 5: Advocacy work plan template

<table>
<thead>
<tr>
<th>Activity one</th>
<th>SMART OBJECTIVE NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Name of the activity:</td>
</tr>
<tr>
<td></td>
<td>Description:</td>
</tr>
<tr>
<td></td>
<td>Date(s):</td>
</tr>
<tr>
<td></td>
<td>Person responsible:</td>
</tr>
<tr>
<td></td>
<td>Resources required:</td>
</tr>
<tr>
<td></td>
<td>Potential challenges:</td>
</tr>
<tr>
<td></td>
<td>Expected outcomes:</td>
</tr>
<tr>
<td></td>
<td>Status (to be started/ongoing/completed):</td>
</tr>
</tbody>
</table>