PUBLIC HEALTH POLICY ADVOCACY GUIDE BOOK AND TOOL KIT

2016
Public Health Policy Advocacy Guide Book and Tool Kit
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APHN Public Health Policy Workgroup 2016

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For more information please visit APHN’s website at http://phnurse.org/ where you will find other resources including:

- Regional Representatives
- Membership Information
- Upcoming Events
- Organizations Links and Resources
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WHAT IS ADVOCACY

Why Is It Important for APHN Members to Understand Public Policy Development and to Be Effective Advocates?

In order to create effective public policy, it is very important for public health nurses who are knowledgeable about the health, attitudes and behaviors of populations to be involved in the policy formation process. As constituents and members of the public health community, APHN members are often asked to provide educational information and advice to policy makers.

Our acquired knowledge can provide the basis for strong and effective public health policy and the achievement of health equity. Consistent with our standards of practice, it is our obligation and ethical responsibility to incorporate the identified needs of populations in policy development and implementation and to develop the skills needed to advocate on behalf of populations we serve before public representatives and decision-makers.

Advocacy is a strategy

Advocacy is a strategy to influence policy makers when they make laws and regulations, distribute resources, and make other decisions that affect peoples' lives. Advocacy is essentially about three things:

- Creating policies where they are needed when none exist.
- Reforming harmful or ineffective policies.
- Ensuring good policies are implemented and enforced.

The goal of advocacy is policy change.

This publication has several goals:

- Provide tools and guidelines on advocacy
- Describe APHN’s structure and methods for formulating the organization’s positions.
- Describe a variety of effective advocacy strategies, such as visiting policymakers, delivering messages through the media, or strengthening the ability of organizations and individuals to advocate.
- Establish a framework for identifying policy goals, creating a plan of action, and effectively building the case for change.
- Provide a guide for reaching organizational consensus on public policy issues, planning advocacy initiatives, and providing advice to legislators and policy makers for successful implementation.

Members should be aware that advocacy rarely unfolds the same way twice; there can be a challenging element of unpredictability.
Advocacy

Advocacy is the active support for policies and programs that can improve health in families and communities. Members of the Association of Public Health Nurses are in a great position to advocate for what is known to be effective in promoting health. Often, public health professionals are the first line of implementation in communicable and chronic disease, natural disasters, and preventive health services.

By advocating for systems change, Public health nurses can encourage changes that help large sectors or populations and set the context in which individual decisions and actions are made. Public health advocacy is taking a stance about laws, rules or behaviors that can impact individual and community health. Advocacy has been effective in recent years in reducing exposure to tobacco smoke, increasing safety, and improving nutrition.

Advocacy is participating in the democratic process by taking action in support of a particular issue or cause. Advocacy includes activities such as participating in a town meeting or demonstration, conducting a public forum or press activity, or developing an issue brief for your state or local policymakers on a particular public health issue. These types of activities do not constitute lobbying as long as you are not urging a policymaker to take a position or action on specific legislation.

Lobbying

One important question is, “How is lobbying different from advocacy?” Although most people use the two terms interchangeably, it is important to understand the difference between advocacy and lobbying.

What then, is lobbying? To be considered lobbying, a communication must refer to and express a view on a specific legislative proposal that has been introduced before a legislative body (federal, state, or local). This means working to influence the outcome of specific legislation—trying to get a bill passed or defeated—by communicating your organization’s views or position to those who participate in the formulation of the specific legislation—your Members of Congress, your state legislators, your local elected officials, or the staff of policy-makers.

APHN, like our national partner, APHA, has been granted tax-exempt status by the Internal Revenue Service, and must follow specific laws pertaining to advocacy and participation in political campaigns. These tax-exempt organizations are allowed to engage in lobbying and advocacy activities related to specific issues, legislation, and regulations, but are not allowed to intervene in a political campaign on behalf or in opposition to a certain candidate or policy-maker. As an organization, APHN is involved in advocacy around evidence based issues and improving public health.
Are We Allowed To Advocate and/or Lobby?

APHN, as well as APHA and many of our partners in public health, have been granted tax-exempt status by the Internal Revenue Service, and as such face certain legal limitations on the types of political and lobbying activities in which they can engage. When you are participating in advocacy activities as a member or leader of APHN, it is critical to understand the following tax and lobbying guidelines.

For example, tax-exempt organizations are not allowed to be involved or intervene in a political campaign—either on behalf of or in opposition to a particular candidate or policy-maker. Yet, these organizations can engage in lobbying activities regarding issues, legislation, and regulation subject to certain limitations.

An important question to ask is, “What is considered lobbying?” To be considered lobbying, a communication must refer to and express a view on a specific legislative proposal that has been introduced before a legislative body (federal, state, or local). This means working to influence the outcome of specific legislation – trying to get a bill passed or defeated – by communicating your organization’s views or position to those who participate in the formulation of the specific legislation – your Members of Congress, your state legislators, your local elected officials, or the staff of policy-makers.

Recent interpretation and clarification of the IRS laws by Congress means that these lobbying rules also apply to lobbying appointed officers of a regulatory agency. This would affect how APHN interacts with top staff of the CDC or HRSA. Larger organizations like APHA and ANA employ staff in their Government Relations section that are registered as lobbyists with the Senate and the House. This requires the organization to report the amounts expended on their lobbying activities.

APHN does not have paid lobbyists, and relies on APHN members to advocate on behalf of our issues. Another important distinction to keep in mind is that APHN is not lobbying when it is asked to present testimony or respond to an inquiry by the House Commerce Committee, or asked to present testimony before the state legislature. It does not constitute lobbying because the organization was asked to testify. If APHN requests to testify, then this does constitute reportable lobbying.

As an organization, we also have to be concerned with the question, “How much lobbying is our association allowed to do?” Whenever the association expends resources—staff and funding—on lobbying activity, we must track these expenditures for APHN’s tax records and for filing our 990 form with the Internal Revenue Service.

In addition, a not-for-profit organization may not spend more than 25 percent of its permitted lobbying total on grassroots lobbying. What is the difference between grassroots lobbying and direct lobbying? Grassroots lobbying is appealing to the general public to contact the legislature about an issue. Direct lobbying is contacting government officials or employees directly to influence legislation.
If an issue is to be decided through a ballot initiative or referendum, appeals to the public are considered direct lobbying, because the public in this instance acts as the legislature. This is helpful to nonprofits that elect to come under the 1976 law, as they may only devote 25 percent of their total lobbying expenditures to grassroots lobbying. APHN does not do grassroots lobbying.

Remember, states can have specific state laws that govern lobbying local and state policymakers. Should you have any questions or would like additional information about your rights and the legality or compliance of your individual or organizational lobbying activities, please contact your local ethics official or an attorney for more details.

Keep in mind that this is just an overview of advocacy and lobbying guidelines. For more detailed analysis of the rules governing lobbying and the tax codes, please see the following additional resource: “Lobbying, Advocacy and Nonprofit Boards,” a publication written by John D. Sparks for the National Center for Nonprofit Boards.

The Internal Revenue Service (IRS) website provides the following information on lobbying.

In general, no organization may qualify for section 501(c)(3) status if a substantial part of its activities is attempting to influence legislation (commonly known as lobbying). A 501(c)(3) organization may engage in some lobbying, but too much lobbying activity risks loss of tax-exempt status.

Legislation includes action by Congress, any state legislature, any local council, or similar governing body, with respect to acts, bills, resolutions, or similar items (such as legislative confirmation of appointive office), or by the public in referendum, ballot initiative, constitutional amendment, or similar procedure. It does not include actions by executive, judicial, or administrative bodies.

An organization will be regarded as attempting to influence legislation if it contacts, or urges the public to contact, members or employees of a legislative body for the purpose of proposing, supporting, or opposing legislation, or if the organization advocates the adoption or rejection of legislation.

Organizations may, however, involve themselves in issues of public policy without the activity being considered as lobbying. For example, organizations may conduct educational meetings, prepare and distribute educational materials, or otherwise consider public policy issues in an educational manner without jeopardizing their tax-exempt status.
Why Should APHN Do Advocacy?

There are a lot of good reasons why APHN should vigorously participate in the public policy development process.

First and foremost, we can make a difference, both as an individual organization or in concert with other stakeholders. Our creative thinking can help find workable solutions to public health problems. We can get laws changed and help chart the direction of policy. In fact, advocacy, telling our legislators what we want, is at the very heart of democracy. Policy makers need to learn from our expertise and our stories in order to address the root causes and assist populations in need.

Effectively telling our public health nursing stories can also help build our credibility as an organization and increase visibility for public health, public health nursing, and more importantly, for the populations we serve and their issues. By sustaining a vocal and noticeable presence throughout the policy-making process, APHN members can ensure that vital public health programs and services are protected and supported - both fiscally and politically.

The bottom line: If we don’t advocate for public health nursing, we can’t expect that anyone else will.

About Constituency

In advocacy, a constituency is a group of people whom an individual or organization represents and from whom that individual or organization draws political support and power. In APHN’s case, our constituency is not only the public health nurses in the states and territories, but also the people served by public health, public health nursing and the public health community at large.

It is generally accepted that when an individual or organization has constituents, they are responsible and accountable for representing the interests of those people. Therefore, when APHN is speaking for others, we must be sure our actions are in the best interests of our constituents. While it is impossible to talk to every person who might be affected by our policy proposals, it is critical to ensure that our policy positions reflect the interests of those we strive to help.
Top Ten Rules of Advocacy

1. Get to know legislators well - their districts and constituencies, voting records, personal schedules, opinions, expertise and interests. Be sure to have a good understanding of the legislator and his/her concerns, priorities and perspectives.

2. Acquaint yourself with the staff members for the legislators, committees and resource officials with whom you will be working. These people are essential sources of information and have significant influence in some instances in the development of policy.

3. Identify fellow advocates and partners in the public health community to better understand the process, monitor legislation, and assess strengths and weaknesses. Finding common ground on an issue sometimes brings together strange bedfellows but makes for a stronger coalition.

4. Identify the groups and other legislators with whom you may need to negotiate for changes in legislation. Do not dismiss anyone because of previous disagreements or because you lack a history of working together. "Yesterday's opponent may be Today's ally."

5. Foster and strengthen relationships with allies and work with legislators who are flexible and tend to keep an open mind. Don’t allow anyone to consider you a bitter enemy because you disagree.

6. Be honest, straightforward and realistic when working with legislators and their staff. Don’t make promises you can’t keep. Never lie or mislead a legislator about the importance of an issue, the oppositions’ position or strength or other matters.

7. Be polite, remember names and thank those who help you - both in the legislature and in the public health advocacy community.

8. Learn the legislative process and understand it well. Keep on top of the issues and be aware of controversial and contentious areas.

9. Be brief, clear, accurate, persuasive, timely, persistent, grateful and polite when presenting your position and communicating what you need/want from the legislator or staff member.

10. Be sure to follow up with legislators and their staff. If you offer your assistance or promise to provide additional information, do so in a timely and professional manner. Be a reliable resource for them today and in the future.
Development of APHN Positions

The APHN public policy development process is the mechanism by which the Association addresses policy guidance to others outside our organization. The purpose of these guidelines, adopted by our Executive Board, is to set forth the principles and procedures that guide external policy matters.

Ideas for new public policy activity may come from anywhere within the organization. At times, the idea may also come from one of APHN’s. Any member or partner is free to bring an idea forward to the Public Policy Workgroup for consideration. Before any advocacy takes place, there is a policy development process that can result in:

- Issuance of an APHN position paper;
- Coalition building on a particular issue;
- Issuance of a letter of concern or support for an issue;
- Participating as a “sign on”; or
- In-person visitation to policy makers or legislators.

Sign-ons are joint letters sent by APHN and other agencies or partners to members of Congress, committees and other policy makers. APHN partners with other Quad Council members, including APHA, ANA and ACHNE, as well as with ASTHO and other ASTHO affiliates, federal agencies and other organizations to influence policymakers to pass legislation and make regulations in the interest of public health, nursing and public health nursing.

What Constitutes APHN Policy?

APHN policy is a plan, a course of action, a position paper, or set of statements adopted by our APHN Board of Directors for the purpose of influencing and determining decisions or procedures.

Although, it is best when advocacy initiatives are well planned, sometimes opportunities for advocacy arise quickly and there is little time for preparation. For example, a policy maker may ask APHN about the feasibility of a program or project and need an answer very soon. APHN might be invited to participate in a media event, or come to an important meeting to brief policy makers. These opportunities for advocacy may not lend themselves to extensive policy research and analysis, or to our usual policy adoption process. However, they can be important opportunities for advocacy.

In some cases, the policy information is already available, so a formal analysis is not needed. Other times, some research needs to be done. In most cases, it is best to use both kinds of information sources when developing an advocacy strategy. Policy analyses are often presented in the form of a report, but can also be organized in other ways, such as charts or matrices.
Steps in Policy Analysis

Policy analysis provides a basis for choosing appropriate advocacy strategies. Policy analysis includes:

- Identifying the need for policy change or policy issues.
- Identifying key actors and institutions that make decisions about policies, as well as those who can influence policy makers.
- Analyzing the distribution of political power among key actors.
- Understanding formal and informal policy making processes.
- Understanding the social and political context.

APHN will not always have the time or resources to take all policy analysis steps before we begin advocating. The most important point is that the more thoroughly we can analyze policy actors, issues, and the environment in advance, the more likely we will to succeed in advocacy. Even if we as an organization decide not to engage in advocacy, policy analysis will help us to reflect on the context in which we are working and understand how the policy environment influences the outcome of policy issues. APHN’s Public Policy Workgroup may be helpful in performing policy analysis, but any member may assist and bring their experience and viewpoint to the process.
**Schematic of APHN’s Public Policy Process**

Issue comes to the attention of APHN through
- Members
- Partners
- Legislators
- Published Reports

Issue is referred to APHN Policy Workgroup
- Data Gathered/Risk Assessed/Environmental Scan
- Review by Public Policy Workgroup
- Recommended to Board of Directors
- Advocacy method recommended
  - Letter
  - Position Paper
  - Sign-On/Coalition
  - Visits/Phone Calls/Other

Board May
- Agree or disagree with recommendation
- Agree or disagree with selected advocacy method
- Refer matter back to public policy workgroup

Recommendation is Implemented

Progress Tracked
How Can APHN Members Be Effective Advocates For Policy Change?

Public Health Nurses have an important role to play in educating public officials about public health issues and concerns.

**Effective methods for messaging**

1. **Learn about the legislative process.** Generally, the earlier APHN can get involved, the better. And remember, when it comes to getting legislation passed: timing is everything.

2. **Participate in APHN’s listserv and legislative action alerts.** APHN members are kept apprised of key issues through the listserv and action alerts. This will enable you to better use APHN’s position papers, publications and letters of concern to accurately portray APHN’s policies.

3. **Participate in Coalitions.** APHN participates in a number of coalitions that represent its organizational values and objectives. APHN is a member of the Quad Council of Nursing Organizations, which includes in addition to APHN, the American Nurses Association, the Association of Community Health Nursing Educators and the Public Health Nursing Section of the American Public Health Association. APH also participates in the Americans for Nursing Shortage Relief Coalition in supporting Title VIII legislation and appropriations for nursing education.

APHA coordinates two coalitions in which APHN participates. These coalitions advocate for fully funding public health programs and services at the Centers for Disease Control and Prevention (CDC) and the Health Resources and Services Administration (HRSA).

Other key coalitions that APHN participates in include:

- The Nursing Community;
- The Healthiest Nation Alliance;
- The Alliance of Nursing Organizations;
- Americans for Nursing Shortage Relief;
- Task Force on the Nursing Shortage;
- ASTHO Affiliates Council; and
- The Trust for America’s Health.

4. **Write Letters.** A well-written letter from a constituent is one of the most influential ways of communicating with a legislator. Contact your Senators and Representatives urging them to sponsor, vote for and act on behalf of public health programs and services. Writing to a public official does make a difference. They know that every person who writes represents many others who feel the same but do not write.
Tips for effective letter writing include:

- Be clear about what you want.
- State your concern for the issue clearly. Be sure to include how public health practitioners, communities, and those you serve would be affected by a proposed change in the law.
- Include the number if a bill is involved.
- Tell a story or example to make the issue real.
- Ask for a direct response with his or her position.
- Send a copy to the legislator’s staff and to the chair of the public policy committee. Personal letters are considered much better than form letters or petitions.
- E-mail is not necessarily effective. Recent surveys show that some legislators treat e-mail with the same value as a regular paper letter and others treat it with low value, like bulk mail communications. When in doubt, back up your email with a paper letter.

5. **Make Phone Calls.** Make telephone calls to your elected officials about pending legislation, regulations, or other priority public policy matters to describe how a change in law would affect our programs and constituents. Urge your members by mail or broadcast fax to do likewise.

6. **Testify.** You as an individual, and APHN as a group, have the expertise legislators need before they make decisions about the budget, regulations, or new laws. Find out when the appropriate committees are holding hearings on subjects related to our mission and ask permission to testify in person. Include in your testimony data about the impact of your services along with public health nursing recommendations for action on the public policy issue. See “Tips for Successful Testimony.”

7. **Make In-Person Visits to Legislators and Other Policy-Makers.** Every citizen has the right to seek a meeting with his or her legislator, councilperson or other elected representative. See “Tips for Successful Legislative Visits.”

8. **Be an “inside advocate” by providing education as part of your job duties.**

Government employees are often in the position of helping the legislative process from their official positions, and just by performing normal job duties, help to shape legislation or policy.

The Legislative Process is set up to answer 3 questions:

- Is bill a good idea? (This gets answered in Policy Committees);
- Is bill a good use for tax dollars? (This gets answered in Appropriations, Ways & Means Committees); and
- Is bill able to win support of 51% of voters? (This is answered on House & Senate floors).
You can help provide information to determine the answers to all three as a part of your job, which is neither, strictly speaking advocacy nor lobbying.

Consider the ways governmental employees provide answers to these questions. You can provide:

- Background or history on an issue;
- Statistics you have collected or interpreted;
- Budget estimates;
- Information on what changes in laws would mean;
- Telling the stories of individuals, groups or communities you have worked with; information useful to forming positions and educating legislators; and Public education.

You may also enable others to do these things.

Potentially, you may also:

- Explain regulations and how they are developed;
- Join groups or coalitions as "informational members" or “ex officio”;
- Influence unions as to their positions or participate in advocacy through unions; exert influence through membership on faith community committees or as part of professional organizations;
- Encourage family members to play active roles;
- Participate in other local, state, or national advocacy groups;
- Serve on non-profit agency boards;
- Invite legislators to your agencies, prepare site visits, or help contractees to set up/conduct site visits with elected officials;
- Help others understand the process as well as specific bills/policies;
- Be accessible to advocates, which also helps you to reflect their views accurately;
- Contribute to newsletters of non-profit groups;
- Help organize retirees, who can talk about things current employees can't;
- Attend advocacy days sponsored by not-for-profits- Just be sure to take the day off if you plan to lobby.
- Help with Fact Sheets, because accurate information is in everyone's interest;
- Speak at classes, congregations, PTAs, other community groups; and Distribute "tools" like voter registration forms and informational literature
Legal Tips on Using Social Media For Advocacy

How can 501(c)(3) Public Charities Use Social Media for Policy Change

Social media presents great advocacy opportunities for 501(c)(3) public charities, including public foundations. Certain activities may constitute lobbying or partisan political activity on social media networks. Although the IRS has not specifically said how the advocacy laws apply to social networking, its broader rules likely apply to social networking sites just as they do to other communications channels. While a charity is generally not responsible for the lobbying or partisan content of others, these lines can be somewhat blurred on social media platforms.

Tips for Presenting Testimony

Testifying before a congressional committee, a city council hearing, or a federal field hearing with jurisdiction over public health programs and funding is a great opportunity to educate and influence policy-makers. APHN members testifying on behalf of the organization should include all components of the appropriate position statement approved by the APHN Board.

If you want to share your knowledge on a particular public health subject or bill:

- Write a letter in support of the bill to the committee members indicating a willingness to work with the committee on the bill and to testify;
- Contact the staff of the committee with jurisdiction as soon as you learn that hearings are scheduled to take place; and
- Secure an “invitation” to testify through the bill’s sponsor or committee members.

When you are preparing to testify:

- Find out the committee’s procedural rules including length of statement, format of panels, and number of packets required. Hearing will generally be set up with witnesses testifying in “panels” of several people with similar concerns or positions, thus saving time and allowing witnesses to comment on each other’s statements.
- Be sure to find out how far in advance written materials need to be submitted to committee staff.
- Recognize that your written statement will be a part of the official record. A written statement can be longer than your oral statement.
- Remember, the best witnesses are not professional witnesses, they are citizens committed to public health with specific expertise or experience.

Your brief and concise written statement for testimony purposes should include:

- A title page;
- A clear presentation of your position: “I/We support ________.”
- Factual arguments and data as evidence to support your position. Consider including scientific studies, research papers, editorials and news articles, and APHA-developed resources; and a conclusion that reviews your basic position.
Helpful hints when preparing to present testimony:

- Do the necessary homework to find out about the committee members and their particular interests and record in the subject at hand.
- Be sure to address the legislators’ interests and concerns when presenting your testimony.
- Summarize your position in three concise points.
- Use your oral statement as an opportunity to make a brief summation of your written testimony.

Post-Hearing

- In many congressional hearings, it is customary for members and staff to submit questions in writing to a witness for later answers. Respond promptly to such questions submitted for the record. You can also take this opportunity to offer additional comments on questions posed to you earlier in the hearing itself.
  - After the hearing, you may be sent an excerpt of the transcript of the hearing record. This will contain your oral statement and hearing Q&A responses.
  - Follow up with the committee staff contact. Thank the staffer for their help and guidance during this process, and offer your assistance to them in the future.

* Members of Congress rely heavily on their staff. Be aware that the staffer serves as a liaison to the Member and often briefs the Member on science and policy issues. Relationships with these staff people are very important to cultivate.
Understanding the Legislative Process

The legislative process can sometimes seem complicated and overwhelming. This section discusses legislative procedures at the federal level.
HOW DOES A BILL BECOME A LAW?
Communicating With Your Legislators

Writing a Letter

The letter is a popular method of communication with a congressional office. The following suggestions will improve the effectiveness of your letter:

1) State your purpose in the first paragraph.
2) If the letter pertains to a specific piece of legislation, identify it accordingly, e.g., House bill: H.R.____, Senate bill: S. ____.
3) Be courteous, but to the point. Include key information and use examples to support your position. Describe your practice and the patient population you serve.
4) Address only one issue in each letter and try to keep the letter to one page.
5) Frame your message in terms of local effect. Hearing how an issue affects the community's health facilities, local public health agency, and nurses and other constituents of the legislator's district will have a greater impact on the legislator than hearing how it affects the state.
6) Be constructive. If the legislation deals with a problem you admit exists but you think the bill is the wrong approach, explain what you believe to be the right approach.
7) Use your own stationery, not hospital or agency stationery. Do not give the impression that you are speaking for an organization unless you are a designated spokesperson.
8) Know the committees on which your legislators serve and indicate in the letter if the bill is being brought before those committees.
9) Timing is important. Try to express your opinion on a bill when it is in committee.
10) Sign your name with RN after it. Include any other credentials you may have, PhD, DNP, PHN, APHN-BC, etc.
11) Personalize your letter. Legislators pay more attention to these than to ones mass-produced. Form letters and response cards should be used only if you have no other alternative for expressing your opinions.
12) Be sure your correct address is on the letter and the envelope.
13) Edit carefully. Invite a friend or colleague to read your letter and provide feedback.
14) Read your letter aloud and listen to the flow, grammar and tone. Revise your letter if needed.
15) Keep a copy of all letters that you send.
You can obtain your legislator’s name and address from the congressional directory listing at [http://thomas.loc.gov/](http://thomas.loc.gov/)

You can find out the mailing addresses of your governor and state legislators by calling your State Capital.

Address your letter as follows:

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<thead>
<tr>
<th>President of the United States:</th>
<th>Governor:</th>
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<tbody>
<tr>
<td>The Honorable (full name)</td>
<td>The Honorable (full name)</td>
</tr>
<tr>
<td>The White House</td>
<td>State Capital</td>
</tr>
<tr>
<td>Washington, DC 20500</td>
<td>(Capital Address)</td>
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<tr>
<td>Dear Mr. President or Madam President:</td>
<td>Dear Governor (last name):</td>
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<th>Members of the U.S. Senate:</th>
<th>Members of the House of Representatives:</th>
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<td>United States House of Representatives</td>
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<td>Washington, DC 20510</td>
<td>Washington, DC 20515</td>
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<td>Dear Senator (last name):</td>
<td>Dear Congressman or Congresswoman (last name):</td>
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<thead>
<tr>
<th>Members of your State Senate:</th>
<th>Members of your State House of Representatives (or Delegates):</th>
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<tbody>
<tr>
<td>The Honorable (full name)</td>
<td>The Honorable (full name)</td>
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<tr>
<td>(State) Senate</td>
<td>(State) House of Representatives (Delegates)</td>
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<tr>
<td>(Office Address)</td>
<td>(Office Address)</td>
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<tr>
<td>Dear Senator:</td>
<td>Dear Representative or Delegate (last name):</td>
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Sending an E-Mail

Many members of Congress have an e-mail address that ends in house.gov or senate.gov. The body of your message should use the following format:

Your name  
Address  
City, State, ZIP  

Dear (title) (last name):  

Start your message here.

Although many members have e-mail addresses, most only respond to their own constituents' messages with an acknowledgement of receipt and you should remember that this is not a preferred means of communication. Some members of Congress have external emails blocked and only utilize Internet website forms that require information signifying you are a constituent. You may utilize these forms, but again, they are not the best form of communication.

Making a Phone Call

Telephone calls can be an effective means of communicating as a follow-up to a letter or visit. Calls can be placed to a legislator's Washington, DC office or to a local district office. Calls to a local office may result in delay of your message getting to a federal or state legislator or becoming part of a tally sheet listing calls "for" or "against" an issue. When calling your legislator's office, be sure to specify the issue about which you are calling so that you are directed to the appropriate staff person. In general, telephone calls should be used to deliver a brief, concise message or to request specific information. When calling be sure to do the following:

1) Clearly identify yourself and your issue.  
2) If you know a staff member, ask for that person.  
3) Briefly state what you want the legislator to do, and refer to previous correspondence you may have had with the legislator.
4) Ask the legislator's staff to respond to your request and to update you on the outcome of the issue.

5) Make a note of the name of the person you spoke with and direct your future communication to this person.

**Personal Visits or Appointments**

Your congressmen and senators have endless demands on their time. Don't be disappointed if your senator or congressman is unavailable at the last minute, in which case you would meet with a staff member. You should respect your elected officials but do not be intimidated by them. They respect you as one of their constituents.

1) Make an appointment in advance. When calling to schedule an appointment, identify yourself as a constituent and clearly state the purpose of the meeting. You can use the following script as a guide:

   a. “Hello. I am your name from your hometown. I would like to schedule an appointment to meet with Senator/Representative last name to discuss state the purpose of the meeting/topic.

2) Prepare for the meeting. Do research beforehand. Know whom your legislator is, which party they belong to, and any positions they may have taken on the issue you wish to discuss. Research their voting record, position statements, ratings from special interest groups and other pertinent information.

3) Know the issue. Although you do not need to be an expert on every aspect of a bill, you need to know basic information about the issue that is being addressed.

4) Try to anticipate the arguments against your position, and be prepared to address them.

5) Be organized. Have brief (one or two-page) written material available. It should state the issue, your position and requested action.

6) Explain your position and inform your congressman or senator, but do not attack.

7) Be concise, stick to basics, and stay focused. You may only be given 15-20 minutes total to speak with him/her.
8) Most legislators do not have a health care background. Make no assumptions about their level of knowledge of health care systems, financing, or delivery. Use the same principles you use when educating your patients. You may not be able to answer all of the legislator's questions, but offer to find the answers whenever possible.

9) Frame your message in terms of local effect. Hearing how an issue affects the community's health facilities, local public health agency, and nurses and other constituents of the legislator's district will have a greater impact on the legislator than hearing how it affects the state.

10) Maintain a professional appearance and attitude. Dress in business attire. Always maintain a courteous attitude. Although it is appropriate to disagree with the positions held by a legislator, it is not appropriate to let that disagreement be evidenced by anger, rudeness, or disrespect.

11) When you leave the meeting, be sure the legislator knows your position and the expectations you have of him or her.

12) Finally, send any additional information that you said you would provide.

13) Follow up your visit with a thank you note to the congressman and staff you met with. Restate your position and requested action in the note.

**How a Congressman's Office Operates**

A congressional office staff usually consists of an administrative assistant or chief of staff, several legislative assistants (including a legislative director), a personal scheduler, a press secretary, several legislative correspondents to respond to the mail, and various other staff. Your primary contacts will be the legislative assistants, one of whom handles health affairs. Legislative assistants monitor legislation, advise the congressman, address constituent concerns, research issues for the member, etc.

While a congressman or senator does not usually personally see every incoming letter, he or she or the chief of staff has reviewed the response that was drafted in response to a particular issue. Senators receive more than 1,000 pieces of mail per week, but it is important to note that individual letters, whether from an individual constituent or from a grassroots organization, carry far more weight than a form letter or postcard campaign.
Attend a political fundraiser

When attending a political fund-raiser, follow these suggestions to get ready.

1) Do your homework. Review the profile of the legislator who is the focus of the fundraiser.
2) Read up on the APHN or partners’ position on current legislation.
3) Check out the APHN website (http://phnurse.org/) for current policy statements, legislative news and issues.
4) Unless otherwise specified, dress is usually business attire. Feel free to wear appropriate buttons, such as RN Voter, Nurses for Health Care Reform.
5) Take a supply of business cards and something with which to take brief notes.
6) If given a nametag at the door or during registration, print your name clearly along with your credentials.
7) Your primary objective is to meet and greet the legislator for whom the event is being held. Their staff members are equally important, introduce yourself to them as well.
8) Introduce yourself ("Hello, my name is _____, RN. I'm a member of the Association of State and Territorial Director of Nursing, from my state.).
9) General conversations are always appropriate, but also use the event as an opportunity to educate people about the association, the profession and our legislative agenda.
10) If you don't have the answer to a question, jot it down and offer to provide follow-up.

Rules to Remember

1) You are a source of information. Legislators have limited time, few staff members and, at times, limited interest on any one issues. You are the one that can fill in the information gap.
2) Maintain credibility. Give accurate information. You will lose credibility if you do not do your research and inadvertently give false or misleading information.
3) Know your supporters. The legislator will want to know what group, individuals, state agencies and/or other legislators are working with your organization on the issue(s) you are presenting.
4) Know your opposition. Be prepared by understanding the opposition’s viewpoint. Anticipate their arguments and provide the legislator with rebuttals and answers to those arguments.

5) Remember that you are developing a relationship. Make the legislator aware of any personal connections you may have, even if you think it is insignificant. It could make a difference.

6) Do not be afraid to admit you don’t know. If your legislator asks you for information you do not have or asks something you do not know the answer to, tell them you do not know the answer and offer to obtain the information for them. Provide this information in a follow-up meeting, phone call, or letter.

7) Be specific when you are asking for something. When you want a vote, information or answers to questions, ask directly and get an answer.

8) Follow-up. After the meeting write a thank you note for the meeting. Later, follow-up with an inquiry to ask if the legislator did what he or she said they would. It is important that you thank them if they did, or ask them for an explanation if they did not vote as they said they would.

9) Do not burn your bridges. Remain calm. It can be easy to get emotional over issues you feel strongly about. Remember to leave your meeting on good terms so you can go back to them at a later time. Sometimes, your strongest opposition today could be your strongest ally later down the line.

10) You are the boss. Your tax money pays the legislators’ salaries, staff and office operations. You should be courteous, but do not be intimidated. Most legislators will be thankful for your input.
Strategies for Effectively Targeting Legislators

In-person visits to legislators are about persuading them to act on policy recommendations. It may be helpful to think of legislators in terms of where they are likely to stand on the issue prior to visiting them in order that appropriate strategies are used.

**Champions:** These are legislators who will be tireless, committed advocates for the cause. They will make the case to their colleagues, help develop a strong "inside" strategy, and be visible public spokespeople. What they need is good information, and visible support for the issue outside the Capitol. To successfully alter any policy, there must be champions for the issue.

**Allies:** These are legislators who will be on your side but can be pushed to do more. For example, they might be persuaded to speak up in party caucuses or on the floor for our issue.

**Fence Sitters:** These are legislators who will be uncommitted on the issues, potentially able to vote either way. These need to be our key targets in order to create the policy changes for which we are asking. Effective advocacy strategies will include putting together the right mix on "inside" persuasion and "outside" pressure to bring the fence sitters to take action toward our requested change.

**Mild or Mellow Opponents:** These are legislators who will be clear votes against, but not inclined to be active on the issue. A key strategy with this group what's key is to keep them from becoming more actively in opposition by giving them enough information to give them pause but not enough to make them angry.

**Hard Core Opponents:** These are legislators who are leading the opposition. Strategies for working with this group include isolating them by highlighting the extremes of their positions, rhetoric and alliances, and to give other lawmakers pause about joining with them.
"Inside" vs. "Outside" Advocacy

Effective- policy change can require both an “inside” and “outside” strategy.

"Inside" strategies may include:

- Meeting with lawmakers and legislative staff;
- Providing analysis and information to committees and legislative offices;
- Testifying in committee; and/or
- Negotiating with policy makers and other lobby groups

For the most part this is carried out by or in coordination with advocates who work on a regular basis at the Capitol.

An effective campaign also requires “outside” activity, aimed at changing public perception or creating pressure around an issue. Some of these activities may include:

- Media involvement (news conferences, editorial board visits, or assisting reporters with stories);
- Organizing legislative visits by constituents to their legislators;
- Building broad and diverse coalitions around the particular issue;
- Letter writing campaigns

"Outside" and "inside" activities should always be coordinated to ensure that they make strategic sense. Points of coordination may include timing, targeting, and specificity and continuity in messages.
Coalition-Building and Working with Coalitions

Undertaking an advocacy initiative is almost always a team effort. Coalitions can help us expand the scope and effectiveness of our public policy work. A coalition is a group of interdependent people focused on advancing or opposing a particular issue. A coalition’s power to affect public policy lies in its ability to present a united front representing many, many members.

Coalition building involves selecting strategic relationships. We have spent significant time and energy through the course of our history building relationships with other nursing and public health organizations, government officials and other policy makers who share our policy agenda. In order to form a coalition, the members must be informed and engaged on the issue(s), so it’s important to have strong internal consensus between partners before devising policy and developing strategies for advocacy.

The advantages of joining or forming coalitions include:

- Creating a greater base of support for our public policy goals. By recruiting new allies, a campaign can generate financial support, volunteers, and other resources to help achieve goals;
- Access to a larger audience. We can provide useful information to greater numbers of people/organizations than can be reached through only our own contacts; and
- Greater leverage with decision-makers. By demonstrating the buy-in for an initiative by multiple organizations, policymakers and others are more likely to join, support, and protect our vision and goals.

There are also drawbacks to coalitions and coalitions may not always be the best strategy for advocacy. Sometimes, advocacy is more effective when done privately, without a large group in attendance. Other times, the groups involved may not be in a position to make the compromises that are required to advocate as part of a group. Because coalitions have a consensus building function, they also take time. If we are advocating for an issue that requires immediate action, we may not have the time to join, build, or agree on a common agenda within a coalition. Some of our existing coalitions may be helpful in this regard.
A coalition is effective only when its issue has merit and the coalition members are organized, informed, truly in agreement as to goals, and dedicated to communicating the importance of the effort. Coalition building calls for establishing and developing contacts that work well together. Through coalitions, we can raise greater awareness of our causes and our issues, build on relationships with government entities, and help shape laws and policies that affect our mission.

*It is critical that we always maintain credibility in our advocacy.* Credibility means that other people trust and value what you have to say. To that end, strategic alliances must be carefully chosen. Effective coalitions may be built with organizations with varied agendas, coming together over a specific issue where there is common ground, but these agreements must be very carefully brokered with complete agreement on terms among all parties.

Key considerations in determining strategic alliances include:

- How many potential members can we identify?
- How controversial is the issue we have chosen?
- How focused do we need to be?
- What is the level of interest, energy and expertise needed?
- With whom can we work well?
- With whom do we agree on basic agenda?
- Who has the time and resources needed to help?
- Who needs to be at the table to be credible?
- What is the effect of excluding certain groups?
- What level of trust do we have in the potential member? (Strong relationships are needed to sustain complex discussions and sometimes-difficult group decisions.)
- Does the potential coalition member have credibility? Would an alliance with the group threaten our credibility?
- How do we share the credit?
- Can we immediately agree on goals?
- Is this a group with which we are likely to easily reach consensus?
- Can this group stay focused on the subject at hand?
- Can we agree on structure and responsibility?
- Can we agree who will take the lead and who will speak for the coalition?
- Is this a group that can make compromises?
- Is a group already in existence that can address the issue?
- Is there a clear role for us in the coalition?
- Do we have a forum for recruiting members?
- Do we have the time to participate in or manage a coalition?

Assessing Risk

The more we understand the political environment, the more easily we can assess risk, and the less likely we are to make a mistake that will cause harm to us, our partners, those we serve, or anyone else.

We endeavor to adhere to a Do No Harm framework for advocacy. In order to do this, we must constantly think about the external environment and the overall impact of projects, and to take practical steps to minimize unintended harms. We must analyze issues that have the potential of creating a division within the public health and nurse communities (“dividers”), and those issues that have helped to build community among us (“connectors”).

Advocacy is more likely to be successful, and less likely to expose us and others to risk, if we first endeavor to answer these questions:

- What are the key political debates, and who represents each side?
- Which issues (or people) have sparked political conflict in the past?
- Which issues (or people) have succeeded in reaching across professional, ethnic, social, or political boundaries?
- How is power being exercised within the political system around this issue?
- Which groups in politics or government are respected and which are disrespected or feared?
- How do the policies you are concerned with relate to controversial topics?
- What are accepted forms of political dialogue and proper protocol for approaching policy makers?
Managing Political Risks

It is important to keep in mind that advocacy does not need to be confrontational. There are several ways to minimize the risks associated with advocacy.

- **Make informed judgments.** When selecting an advocacy issue, informed judgments must be made about what kinds of risks are acceptable. Advocacy strategy should be based on an analysis of the specific issue. We should only be involved if we have a legitimate role in the policy debate.

- **Plan the initiative carefully.** Good planning and analysis are the foundations of risk management in advocacy. The better understood the issue, the political context, and the target audience, the less room for error. During the policy analysis stage, there is an opportunity to learn about the actors and policy-making processes. This is also an opportunity to learn about any risks involved in advocacy.

- **Both external and internal sources can be valuable.** Achieve internal consensus among members and partners before taking any advocacy action. Advocacy is rarely conducted by an individual on behalf of an entire organization. The group process can increase chances of succeeding, but also reveal the risks of any unintended consequences.

- **Know your audience.** The more you know about the background, attitudes, and interests of your target audience, the less likely you are to offend, put someone at risk, or pursue an advocacy strategy that will backfire. Treat those on the other side of the issue with respect.

- **Maintain strong communication within your own advocacy team and be vigilant for the development of new political trends.** Things may have changed since the initial analysis.
Planning an Advocacy Initiative

Advocacy tools

The *Straight to the Point* advocacy tools are intended for organizations that want to include in-country advocacy and public policy work among their programmatic strategies. The tools will lead you through the three essential steps to developing an advocacy initiative.

1. **Setting Advocacy Priorities** will help you take the first step in developing an advocacy initiative—selecting an issue for advocacy.

2. **Assessing the Political Environment for Advocacy** will help you understand the environment you are working in and the key factors you need to consider as you develop your initiative.

3. **Mapping an Advocacy Strategy** *(this tool)* will help you plan a concrete strategy for achieving your goal, including determining your specific activities.

After completing the three tools you will be ready to launch your advocacy initiative.

In this tool you will take the information you gathered in the previous tools (e.g., potential partners and opponents, key people of influence inside and outside the government, public opinion) and use it to map out the specific steps you will take to accomplish your goal.

**To develop your advocacy strategy, you need to answer questions including:**

- What is your advocacy goal?
- What are your specific objectives that will contribute to the achievement of your overall goal?
  - Who do you want to partner or collaborate with? What are their contributions to your initiative?
  - Who are the targets (policymakers, government agencies, etc.) you need to influence to achieve your goal?
  - What are the key upcoming events that may provide opportunities for mobilization and advocacy?
  - What is your approach to advocacy (e.g., direct or indirect)?
  - What are the specific activities you will carry out? When? How?
How to use this tool:

The *Straight to the Point* advocacy tools might *look* difficult to complete, but they are actually the fastest and easiest way to develop an advocacy initiative. If you complete all three tools during one or two workshops or meetings for your organization, you will be well prepared to launch your initiative. There are numerous questions to answer and tables to fill in, be aware that you do not need to write very much—you can just make notes on the essential information.

The *Mapping an Advocacy Strategy* tool can be completed by an individual. However, *ideally it should be completed by a small group of core leaders* from your organization in a team exercise or workshop setting. After a core group comes together to lead the initiative, the strategy should be continuously adapted and adjusted through a process of open, participative discussion with all relevant actors.

As you use this tool, it is important to remember that developing an advocacy strategy is not necessarily a linear/direct process. You need to be flexible and sometimes you will have to jump ahead or go back and repeat steps you have already taken. Additional sheets of paper, a flipchart, or a computer may be helpful for making notes and recording your answers.

---

**Before planning your advocacy strategy, you should be familiar with the following terms and common definitions:**

**advocacy policy**

A policy can be a plan, strategy, or agenda; program or course of action; human rights instrument; budget decision; piece of legislation; or regulations or protocols/guidance issued by a government, multinational entity, or institution.

**policymakers**

Policymakers are typically government officials or people with formal political power (e.g., parliamentarians, ministers or agency officials, and their staff).

**lobbying**

Generally, lobbying is defined as the work of influencing a specific piece of legislation. So, while lobbying can be part of an advocacy strategy, advocacy work does not necessarily involve lobbying.
Advocacy is a strategy to influence policymakers to make a policy change (e.g., create supportive policies, reform or remove harmful policies, ensure the funding and implementation of supportive policies).

Advocacy is not about changing specific practices or even building community awareness or support for an issue or practice. Rather, advocacy is intended to change opinion about a policy—specifically, policymakers’ opinions—and achieve a particular policy change. It is often necessary to conduct opinion change activities with the media, community members, religious leaders, and health care providers before conducting advocacy activities.

<table>
<thead>
<tr>
<th>Straight to the Point: Mapping an Advocacy Strategy</th>
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<tr>
<td><strong>Issue, Goal, &amp; Objectives</strong></td>
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<tr>
<td><strong>issue</strong></td>
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<tr>
<td>Your advocacy issue should be specific and concrete. It should clearly reflect the policy change you want to achieve (i.e., the issue should be directly linked to your goal).</td>
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<tr>
<td><em>Strong example issue:</em> Community health workers (CHWs) are permitted to distribute injectable contraceptives. <em>Weak example issue:</em> Family planning</td>
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<tr>
<td><strong>What is your issue?</strong></td>
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<td><strong>goal</strong></td>
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<td>Your advocacy goal builds on your advocacy issue by adding <em>who</em> (e.g., person, institution, office) will make the policy change, <em>how</em> the policy change will be made (e.g., through a specific bill, guidance, regulation), and <em>when</em> it will be achieved. <em>Set an attainable goal with a realistic timeframe.</em></td>
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</table>
| *Strong example goal:* The Ministry of Health will issue new protocols/guidelines for the distribution of injectable contraceptives by CHWs by December 2013.  
  *Weak example goal:* The government will enable CHWs to distribute injectable contraceptives. |
| **What is your goal?**                           |
objectives

Your goal should be broken down into a few short-term objectives that will *directly* contribute to achieving your goal. Objectives are the smaller steps you must complete in order to reach your overall goal. They should be clear and focused, and should include: the *change* you want to see, *who* (e.g., person, institution, office) will make the change, and *when* it will be achieved. They should be limited in number (no more than 3).

Note: *If your objective is likely to take longer to achieve than your goal, it is not a good objective.*

**Strong example objective:** Five high-level champions in the Ministry of Health’s Reproductive Health Division will make public statements in support of CHWs distributing injectable contraceptives by June 2012.

**Weak example objective:** Build ministry support for CHWs to distribute injectable contraceptives.

What are your objectives?

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<tr>
<th>Objective 1</th>
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<td>Objective 2</td>
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<td>Objective 3</td>
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**Straight to the Point: Mapping an Advocacy Strategy**

**Partners & Alliances**

Forming strong partnerships with other groups/organizations is essential to a successful advocacy strategy. You need to identify partners who will bring helpful, unique skills and contributions to your effort. Make sure you and your potential partners are in agreement about the issue and its potential solutions. A stakeholder forum may be necessary to build consensus.

Identify 5–10 potential partners and what they can contribute to your advocacy initiative. Include your own organization and its resources in the list.

**contributions** (human resources; funding; political and media connections; **potential partner** advocacy, communications, and technical expertise, etc.)

What resources are still needed?
 Targets
Your primary targets are the policymakers/offices/etc. that have the power to make the change you are advocating for. When you cannot influence your primary targets, choose secondary targets. A secondary target is the person/group/etc. you can influence who can then, in turn, influence your primary target. The targets must be specific (e.g., a person, newspaper, department, committee) —“the public” or “the government” are too general and, therefore, are not good targets.

Identify 5 primary targets for each objective. Then fill in the target’s position on your issue based on 2 criteria: supportive/neutral/opposed, and informed/uninformed. Next, note who in your organization/partners has the connections needed to influence each primary target. If you do not have the connections you need to influence the primary target, choose a secondary target (who can influence the primary) and fill in the information in the Secondary Target table on the next page.

 objective 1
 primary target name
 position on your issue
 partner with connections to influence target

 objective 2
 primary target name
 position on your issue
 partner with connections to influence target

 objective 3
 primary target name
 position on your issue
 partner with connections to influence target

 secondary targets
 objective # name
 primary target it can influence
 position on your issue
 partner with connections to influence target
### Timing

Advocacy activities should be timed to occur just before key decisions are made or before an important event.

**What upcoming events, significant dates, or government decisions might be important mobilization and communication opportunities?**

### Approaches & Activities

#### approaches

There are different ways of approaching advocacy. One way is a *public* approach, which generally means mobilizing broad support from the government and/or the public through highly visible activities. Compare this to a *private* approach, which involves working quietly with a few key partners to make changes behind the scenes.

You might also want to consider *direct* versus *indirect* approaches. Direct approaches involve directly asking policymakers to take action. Indirect approaches involve influencing opinion through a third party such as the media, public, or other actors.

#### Which approach(es) do you want to take?

**Public? Private? Direct? Indirect?**

When selecting your advocacy approach(es) think about the best way to exert influence. The approach(es) you choose will inform your activities.

#### activities

Your advocacy activities should be designed to help you achieve your individual objectives, moving you toward your goal.

Below is a list of common advocacy activities. You should consider pursuing a combination of them for each objective. Do not be afraid to use your imagination as well, but be selective. You cannot and should not do everything. Think about your expertise, capacity, what will have the greatest impact on your target, and your funds.

**Examples of activities:**

- Arrange site visits or study tours
- Hold educational briefings & events
- Conduct advocacy trainings
- Launch public awareness campaigns
- Hold policy dialogues & forums among key stakeholders
- Document problems for policymakers (e.g., commission a report)
- Engage the media to cover your issue
• Hold face-to-face meetings with policymakers
• Mobilize groups (community members, public interest groups, etc.) in support of policy change
• Provide technical information and recommendations to policymakers
• Utilize email, phone calls, letters, petitions, and social media to mobilize constituents to contact policymakers

**Approaches & Activities**

Fill out the chart below to help you decide which activities you will conduct to meet your objectives. For each activity, determine the approximate timing. Timing will depend on each activity’s priority. *Do not try to do everything at the same time.* Identify the cost of the activity and the person/organization primarily responsible for leading it, along with partners who will support them. Be as detailed as possible regarding your specific plans and tactics, including how they will reach your targets. For example, do not just write “public awareness campaign”—include the topic of the campaign, who you will target, what forms of media you will use, etc. Decide on 5 activities for each objective.

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<thead>
<tr>
<th>Objective 1</th>
<th>Activity lead person/organization</th>
<th>Partner(s)</th>
<th>Timing</th>
<th>Cost</th>
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<th>Objective 2</th>
<th>Activity lead person/organization</th>
<th>Partner(s)</th>
<th>Timing</th>
<th>Cost</th>
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<tr>
<th>Objective 3</th>
<th>Activity lead person/organization</th>
<th>Partner(s)</th>
<th>Timing</th>
<th>Cost</th>
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How the Federal Budget Process Works

The Federal Budget matters to those of us who work in public health because:

- Budget and tax decisions drive funding levels for each individual program.
- Budget and tax decisions significantly impact our ability to meet the needs of the populations we serve, including children, families, the elderly, people with disabilities, and other vulnerable members of our society.
- Federal budget decisions directly affect the states and territories that employ us.
- Conservatively, Federal funds account for about a fourth of states’ budgets.
- When Federal funds are cut, funds are shifted onto state and local budgets.

Federal Budget Process Explained:

The Federal Budget Process 101

It’s useful to think of the federal budget cycle in four phases. The first phase is agency planning; the second phase covers budget review by the Office of Management and Budget. These two phases together amount to the President's budget formulation. A third phase is the Congressional appropriations cycle; and the fourth and final phase is the execution of the budget by the agencies starting October 1, the beginning of the fiscal year. Altogether, it takes the machinery of government well over two years to formulate, appropriate, and execute a single fiscal year's budget.

Who Decides the Federal Budget?

The vision of democracy is that the federal budget – and all activities of the federal government – reflects the values of a majority of Americans. Yet most people feel that the federal budget does not reflect their values and that the budgeting process is too difficult to understand.

The ultimate power over the U.S. government lies with the people, because we have a right and responsibility to choose our elected officials by voting. Many Americans may feel that it is difficult or impossible to make their voices heard in Washington, but the first step is to understand what’s going on.
An Evolving Process

The U.S. Constitution designates the “power of the purse” as a function of Congress that includes the authority to create and collect taxes and to borrow money when needed. Congress has established a budget process that has evolved over time. The Office of Management and Budget, the Government Accountability Office, and the Congressional Budget Office provide oversight and research crucial to creating the budget.

Before the Budget

The annual congressional budget process is also called the appropriations process. Appropriations bills specify how much money will go to different agencies and programs. In addition to these funding bills, Congress must pass legislation that provides the federal government the legal authority to actually spend the money. These laws are called authorization bills, or authorizations. Authorizations often cover multiple years, so authorizing legislation does not need to pass Congress every year the way appropriations bills do. When a multi-year authorization expires, Congress often passes a reauthorization to continue the programs in question.

Authorizations also serve another purpose. There are some types of spending that are not subject to the appropriations process. Such spending is called direct or mandatory spending, and authorizations provide the legal authority for mandatory spending. Federal spending for Social Security and Medicare benefits is part of mandatory spending, because the government must by law pay out benefits to all eligible recipients.

How Does the Federal Government Create a Budget?

There are five key steps in the federal budget process:

1) The President submits a budget request to Congress
2) The House and Senate pass budget resolutions
3) House and Senate Appropriations subcommittees “markup” appropriations bills
4) The House and Senate vote on appropriations bills and reconcile differences
5) The President signs each appropriations bill and the budget becomes law
Step 1: The President Submits a Budget Request

The president sends a budget request to Congress each February for the coming fiscal year, which begins on Oct. 1. For example, President Obama submitted his budget request for fiscal year 2013 in February of 2012. Fiscal year 2013 began on Oct. 1, 2012, and ended on Sept. 30, 2013.

The president’s budget request is just a proposal. Congress then reviews the request and passes its own appropriations bills; only after the president signs these bills does the country have a budget for the new fiscal year.

Step 2: The House and Senate Pass Budget Resolutions

Once the president’s budget request has been released, Congress begins the months-long process of reviewing the request. After the president submits the budget request and lawmakers have thoroughly reviewed it, the House Committee on the Budget and the Senate Committee on the Budget each writes a budget resolution.

A budget resolution is not a binding document, but is more like a blueprint. It provides a framework for Congress for making budget decisions about spending and taxes. It sets overall annual spending limits for federal agencies, but does not set specific spending amounts for particular programs. After the two chambers pass their budget resolutions, a joint conference is formed to iron out differences between the two and a reconciled version is then voted on by each chamber.

Step 3: House and Senate Subcommittees “Markup” Appropriation Bills

The Appropriations Committees in both the House and the Senate are responsible for determining the precise levels of budget authority for all discretionary programs. The Appropriations Committees in both the House and Senate are broken down into smaller Appropriations subcommittees, which review the president’s budget request pertaining to the federal agencies under their specific jurisdictions. After each subcommittee reviews the president’s request, it conducts hearings and poses questions to leaders of its associated federal agencies about each agency’s requested budget.
Based on all of this information, the chair of each subcommittee writes a first draft of the subcommittee’s appropriations bill, abiding by the spending limits set out in the budget resolution. All subcommittee members then consider, amend, and finally vote on the bill. Once it has passed the subcommittee, the bill goes to the full Appropriations Committee. The full committee reviews it, and then sends it to the full House or Senate for consideration.

**Step 4: The House and Senate Vote on Appropriations Bills and Reconcile Differences**

The full House and Senate then debate and vote on appropriations bills from each of the 12 subcommittees. After both the House and Senate pass their versions of each appropriations bill, a conference committee meets to resolve differences between the House and Senate versions. After the conference committee produces a reconciled version of the bill, the House and Senate vote again, but this time on a bill that is identical in both chambers. After passing both the House and Senate, each appropriations bill goes to the president.

**Step 5: The President Signs Each Appropriations Bill and the Budget Becomes Law**

The president must sign each appropriations bill after it has passed Congress for the bill to become law. When the president has signed all 12 appropriations bills, the budget process is complete. Rarely, however, is work finished on all 12 bills by Oct. 1, the start of the new fiscal year.
This chart shows how all of these pieces fit together to make the annual federal budget process.

ANNUAL BUDGET PROCESS FLOWCHART

Annual Budget Process Flowchart

OMB provides guidelines to agencies → Federal agencies 1st budget → OMB reviews drafts

President submits budget request to Congress → OMB compiles final budget → Federal agencies revise drafts

House Budget Committee reviews request → Senate Budget Committee reviews request

Budget Resolution

12 House Appropriations subcommittee hearings and markups → House Committee on Appropriations reviews and approves → House final reviews → Conference Committee

12 Senate Appropriations subcommittee hearings and markups → Senate Committee on Appropriations reviews and approves → Senate final reviews

President of the United States signs into law

Federal agencies

President

Congress
Continuing Resolutions

When the budget process is not complete by Oct. 1, Congress passes a continuing resolution so that agencies continue to receive funding until the full budget is in place. A continuing resolution provides temporary funding for federal agencies until new appropriations bills become law.

Supplemental Appropriations

Because of the length of the federal budget process, from time to time the government has to respond to unanticipated situations for which there is no funding, such as natural disasters. In these cases the government has to allocate additional resources and do so in a timely manner. This type of funding is allocated through legislation known as supplemental appropriations.

What’s in the Federal Budget for 2015?

In fiscal year 2015, the federal government is projected to spend around $3.9 trillion. These trillions of dollars make up a considerable chunk – around 21 percent – of the U.S. economy, as measured by Gross Domestic Product (GDP). That means that federal government spending makes up a sizable share of all money spent in the United States each year. So, where does all that money go?

Mandatory and Discretionary Spending

The U.S. Treasury divides all spending into three groups: mandatory spending and discretionary spending and interest on debt. Interest on debt, which is much smaller than the other two categories, is the interest the government pays on its accumulated debt, minus interest income received by the government for assets it owns.
This pie chart shows all projected federal spending in 2015 broken into these three categories.

Discretionary spending refers to the portion of the budget that goes through the annual appropriations process each year. Congress can choose to increase or decrease spending on any of those programs in a given year.

This pie chart shows the division of the $1.16 trillion in discretionary spending in fiscal year 2015.
Mandatory spending is largely made up of earned-benefit or entitlement programs, and the spending for those programs is determined by eligibility rules rather than the appropriations process. Mandatory spending makes up nearly two-thirds of the total federal budget.

This chart shows where the projected $2.56 trillion in mandatory spending will go in fiscal year 2015.
This pie chart shows how President Obama proposes dividing up the whole federal budget in fiscal 2015. Income security programs like Social Security and unemployment insurance together comprise the largest slice, followed by Medicare & Health, and Military.
Putting It All Together

Here’s how it all fits together:

President Obama’s 2015 Budget

Where The Money Comes From
($3.9 trillion in revenue and borrowing)

Tax Revenue: Federal Funds
$2.2 trillion

- Individual Income Taxes $1.53 trillion
- Corporate Income Taxes $448 billion
- Other $146 billion
- Customs Duties $35 billion
- Excise Taxes $50 billion

Tax Revenue: Trust Funds
$1.12 trillion

- Social Security & Medicare Taxes $1.05 trillion
- Excise Taxes $60 billion
- Customs Duties $1.7 billion
- Other $3.3 billion

Borrowing
$561 billion

Interest on Debt
$252 billion

- 29% of revenue

Mandatory Spending
$2.56 trillion

- Medicare & Health $999 billion
- Social Security $900 billion
- Other $506 billion
- Food Assistance $106 billion
- Unemployment $47 billion

Discretionary Spending
$1.16 trillion

- Military $640 billion
- Other $284 billion
- Education $72 billion
- Housing & Community $61 billion
- International Affairs $38 billion
- Energy & Environment $38 billion
- Transportation $26 billion

Where The Money Goes
($3.9 trillion in spending)

- 65% of spending

56% of revenue

15% of revenue

29% of spending
Helpful Websites/Federal Government

**Executive Office of the President**

President Barack Obama... [www.whitehouse.gov/administration/president_obama/](http://www.whitehouse.gov/administration/president_obama/)

The White House Home Page…………………………[www.whitehouse.gov](http://www.whitehouse.gov)

The President's Cabinet ........... [www.whitehouse.gov/government/cabinet.html](http://www.whitehouse.gov/government/cabinet.html)

**Executive Branch**: ([http://www.usa.gov/Agencies/Federal/Executive.shtml](http://www.usa.gov/Agencies/Federal/Executive.shtml))

- Department of Agriculture (USDA)
- Department of Commerce (DOC)
- Department of Defense (DOD)
- Department of Education (ED)
- Department of Energy (DOE)
- Department of Health and Human Services (HHS)
- Department of Homeland Security (DHS)
- Department of Housing and Urban Development (HUD)
- Department of Justice (DOJ)
- Department of Labor (DOL)
- Department of State (DOS)
- Department of the Interior (DOI)
- Department of the Treasury
- Department of Transportation (DOT)
- Department of Veterans Affairs (VA)

**Legislative Branch**: ([http://www.usa.gov/Agencies/Federal/Legislative.shtml](http://www.usa.gov/Agencies/Federal/Legislative.shtml))

**U.S. Senate**

- Senate Home Page
- Senate Leadership
- Committee Office Websites
- Senators on the Web
U.S. House of Representatives

House Home Page
House Leadership Offices
Committee Office Websites
Office of the Clerk
House Organizations, Commissions, and Task Forces
Representatives on the Web
Office of Inspector General

Agencies that Support Congress

Architect of the Capitol
Capitol Police
Congressional Budget Office (CBO)
Congressional Research Service
Copyright Office
Government Accountability Office (GAO)
Government Publishing Office (GPO)
Library of Congress
Medicaid and CHIP Payment and Access Commission
Medicare Payment Advisory Commission
Stennis Center for Public Service
U.S. Botanic Garden

Judicial Branch

http://www.usa.gov/Agencies/Federal/Judicial.shtml

The Supreme Court

Supreme Court of the United States
Lower Courts

Judicial Panel on Multidistrict Litigation
U.S. Bankruptcy Courts
U.S. Court of Appeals for the Federal Circuit
U.S. Court of International Trade
U.S. Courts of Appeals
U.S. District Courts
U.S. Federal Courts, by Geographic Location and Circuit

Other Web Resources

FirstGov (links to all federal govt. info): www.usa.gov

The Senate Committee on Appropriations: http://www.appropriations.senate.gov

The House Committee on Appropriations: http://appropriations.house.gov


Members of the House Subcommittee on Labor, Health and Human Services, Education and Related Agencies:
http://appropriations.house.gov/subcommittees/subcommittee/?IssueID=34777

Administration for Children and Families.................................................. www.acf.dhhs.gov/
Administration on Aging ................................................................. www.aoa.dhhs.gov/
Agency for Healthcare Research and Quality ........................................... www.ahrq.gov/
Agriculture Department........................................................................... www.usda.gov/
Centers for Disease Control and Prevention ............................................ www.cdc.gov/
Centers for Medicare and Medicaid Services (formerly HCFA) ........... http://www.cms.gov
Environmental Protection Agency.......................................................... www.epa.gov/
Federal Judicial Center................................................................. www.fjc.gov/
Federal Register.......................................................................................... www.access.gpo.gov/su_docs/aces/aces140.html
Food and Drug Administration........................................................................ www.fda.gov/
Food Safety and Inspection Service (USDA).................................................. www.fsis.usda.gov
Government Printing Office ........................................................................... www.access.gpo.gov/
Health Resources and Services Administration........................................ www.hrsa.gov/
Health and Human Services Department....................................................... www.hhs.gov/
Healthfinder................................................................................................. www.healthfinder.gov
Indian Health Service.......................................................................................... www.ihs.gov/
Library of Congress.......................................................................................... www.lcweb.loc.gov/
National Cancer Institute................................................................................ www.cancernet.nci.nih.gov/
National Institutes of Health........................................................................... www.nih.gov/
National Institute of Environmental Health Science ........................................ www.niehs.nih.gov/
National Institute on Alcohol Abuse and Alcoholism ................................ www.niaaa.nih.gov/
National Institute on Drug Abuse..................................................................... www.nida.nih.gov/
Occupational Safety and Health Administration ........................................... www.osha.gov/
Office of Groundwater and Drinking Water ........... www.epa.gov/OW/OGWDW/index.html/
Thomas: Legislative Information on the Net................................................. www.thomas.loc.gov/
White House News Room ............................................................................. www.whitehouse.gov/news/
References

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http://www.aacn.org/wd/practice/content/publicpolicy/legislators.pcms?menu


National Council of State Boards of Nursing. (n.d.). Methods of communication with your legislator. Retrieved from:


https://www.nationalpriorities.org/budget-basics/federal-budget-101
