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WHO'S PUBLIC IMAGE AND ADVOCACY FOR HEALTH FOR ALL

This paper is concerned with the need to promote the public image of WHO for the purpose of advocating its goal of Health for All by the Year 2000. Over the last few years, it has been apparent to an increasing number of people that the public need to know more about WHO, its work, plans, strategies and goals. Allowing our work to be our best advocate is the proper approach but, in view of the harsh realities of the present day, it is not enough. WHO was formed by its Member States for the purpose of cooperating among themselves and with others to protect the health of the people. Since the people, individuals and communities, are active participants in the all-out effort to make Health for All a reality by the Year 2000, they need to know their Organization better so that they may be able to play their part in this great effort. The plan of action included in this document aims at promoting WHO's public image and Health for All.

CHAPTER ONE

WHO'S PUBLIC IMAGE IN RELATION TO
HEALTH FOR ALL ADVOCACY

Implied in the goal of Health for All is the principle of equity or social justice. It is health for every man, woman and child that we are seeking. It is indeed a goal worthy of man because it unites human beings the whole world over in an effort to improve the quality of human life. Ours is not only a benevolent goal but also one which epitomizes justice. Moreover, it represents a realistic awareness of the relation between health and disease. If health were only considered to be a privilege enjoyed by the few, these few would soon lose their privilege, because disease does not recognize social or geographical boundaries.

Right from the beginning, it has been recognized that Health for All cannot be achieved unless people play an active part in improving their health, discarding unhealthy practices and adopting a life-style which is geared to health improvement. Education about health and participation by the community in a spirit of self-reliance are embodied in the primary health care approach. Neither of these, however, can be effective unless we all adopt the right attitude. For whatever reasons, we have hitherto been rather hesitant in trying to involve the public in looking after their health. But the task WHO has set for itself allows no room for complacency. Individuals and communities alike are involved in making Health for All a reality. It remains for us to enhance and guide that involvement in order to bring the goal for which we are working so much nearer.

In recent decades, technology has brought about a revolution in the world of communication. It is imperative that we make use of the advances made in that field to reach out with our message to people in the most remote areas. We need to claim our rightful place in the sun. To say that the competition for public attention is fierce is to state the obvious. All organizations, all sectors of society and all groups and advocates of ideas vie for public attention. Advertising has become an essential part of the promotion of products and services offered by every enterprise. Promotion efforts even fly in the face of legislations whose aim is to minimize the consumption of products which have been proven to be detrimental to health.

It is important, therefore, that WHO take a promotive and assertive stance. One element which works to its advantage is the fact that it advocates an important message which captures the attention of everyone. Every individual and every community want to be healthy. This is a three-pronged task.

First of all, there is an urgent need for a total change of attitude from being reserved to being open, from talking in scientific jargon to talking the language of laymen, and from being paternalistic to being a partner. These changes in attitude do not apply only to WHO; a parallel change should take place in the whole medical and health profession. It should be felt in the ministries of health, and by professionals and leaders.

The second element of this task is that WHO should become a regular and frequent source of information. That is one of our important responsibilities, dictated by the very nature of our goal. We can bring about that desirable development by forging a partnership between health, the media and national information services to ensure the regular flow of information which is essential for that partnership to develop and prosper.

The third element is that our information must be given in a way which enhances the authoritative role of WHO. If we are truly the world's health conscience, as we claim to be, then that conscience must have visible effects. We should not be ashamed of exercising authority, especially when we see that other sectors have become very aggressive in promoting their products and services, even when such aggressive promotion runs against WHO's declared policy. Once we have a policy, and indeed we have one, it becomes our incumbent duty to propagate, explain and advocate that policy in order to ensure its implementation.

There is no denying that we are proposing to embark on a highly complex task. When we look at the private sector, we find that they too have to go to great lengths in order to win a wide market for their commodities. They are satisfied if they have a fair share of the market. They will always try to increase that share, but they seldom aim to have a complete monopoly. In health, however, the position is different. We want to disseminate our messages to each and every individual. We want every child to be immunized. We look to the day when the number of diseases which play havoc with the lives of people everywhere is significantly reduced. We want every human being to know how to lead a healthy life and we want to persuade him or her to put that knowledge to effect. Our advocacy must, by necessity, take all forms of communication, ranging from face-to-face dialogue in one to one situations to making use of a variety of media, i.e. the press, radio, video and television. The complexity of the task should never make us pause. Our mission is important to every individual and every community. It is important to the present generation of mankind and to future generations. Therefore, we have to fulfil our task, utilizing every possible means in our advocacy of Health for All and mobilizing other sectors and institutions in a joint effort which makes a reality of next year's theme Health for All - All for Health.

At the first glance, embarking on such an advocacy task may seem to be unrealistic in the present economic climate, when resources are scarce and competition is keen. Nevertheless, our task requires more resources than have so far been allocated for it. How can we afford to do that when WHO is forced to make cuts in its budget? The answer is that advocacy must be given a higher priority than has been the case so far. In practical terms, this means allocating to advocacy a larger share of these resources, scarce as they may be. We must press on with our advocacy effort if we want to stand a chance of achieving Health for All. Let us not forget that WHO is a community of all the nations of the world. The provision of more resources is incumbent on all Member States. It is shortsighted that only a small portion of the budget of the ministry of health in most countries is allocated for advocacy. Such allocations must be substantially increased if the advocacy effort is to begin to produce its very desirable results.

We have a great chance to put this to the test in the forthcoming year, which witnesses the fortieth anniversary of WHO and the tenth anniversary of Alma Ata and its declaration in which all Member States adopted Primary Health Care as the means to achieve Health for All.

CHAPTER II

THE TWO ANNIVERSARIES

WHO is celebrating its fortieth anniversary next year. There is something special about being forty. To the individual, it signals full maturity. But maturity came to WHO ten years ago, at Alma Ata, when the goal of Health for All was clearly identified as the universal goal for the realization of which we all must work hard. It so happens that the fortieth anniversary of WHO is also the tenth anniversary of Alma Ata and its historic declaration adopting primary health care as the proper approach to achieve Health for All. When we celebrate these two anniversaries, we do not simply want to have a grand party to announce to the world that we have come of age. We celebrate these anniversaries in order to bring home to people, even in the most remote villages, that WHO, their health organization, is as determined as ever to continue its fight against disease and to promote health by every means available to it. We also want people to realize that they themselves, whether they live in overcrowded cities or in the most remote villages, can join in the fight and play a role in achieving ultimate success. It is with this in mind that the Director-General has written to all Member States emphasizing that these two anniversaries should be marked with a programme of advocacy that will bring Health for All a step nearer. It is through such an advocacy programme that WHO seeks to enhance its image with the public as an organization which represents the world's health conscience.

The Regional Director has addressed messages to ministries and authorities in the Region which are responsible for Health, Education, Information, Agriculture, Environment and Youth and Sports inviting them to join ranks in utilizing this opportune occasion to promote, throughout the year, our agreed health policies and strategies, and to advocate among all individuals and communities the principles and values of healthy behaviour and appropriate modes of life. For example, the World Health Day of 7 April 1988 will be consecrated as a World No-smoking Day for which a wide range of activities and health messages could be designed. The general theme for the whole of 1988, however, will be "Health for All - All for Health". This indicates a dual process which involves providing information about health to all people in order to mobilize them in a joint effort to improve health standards. Under the aforementioned slogan, all kinds of health related action are appropriate. In this connection, a special committee has been appointed at the Regional Office to study and recommend to the Regional Director suitable approaches for these year-long celebrations. It is expected that similar national mechanisms, if not already in place, will soon be established in all Eastern Mediterranean countries, to grasp this opportunity for stimulating advocacy and concerted action in favour of Health for All. There are many possibilities for action: discussions and debates in all interested political and professional fora, information and publication by mass media and specialized journals and magazines, health education by all means and in all places for all people, memorial stamps carrying health messages, exhibitions at national, district and local levels, competitions of all kinds among all population groups, etc. Naturally, the WHO Regional programmes and staff will continue to be at the disposal of Member States for any consultation, advice or assistance, so as to ensure that 1988 will be a successful festival for health and, that by the end of the year, the principles and values of health and healthy life will have been loudly heard, well received and correctly perceived throughout our Region.

CHAPTER THREE

THE ROLE OF MEMBER STATES

In the advocacy effort for Health for All, Member States can play a highly effective role which should bring together various sectors of society in a partnership motivated by the powerful incentive of serving an objective which should bring great benefits to all and everyone of us and to future generations as well. Here is a list of some suggestions Member States may wish to take up and organize. It is by no means an exhaustive list, but serves as a basis for discussion. Committee members may wish to put forward other ideas or suggest other activities. Member States may wish to provide more impetus to advocacy efforts with their heads of state taking personal interest, or by issuing a declaration to mobilize efforts for our common purpose.

1. Stamps

Member States may consider the issuance of memorial stamps highlighting priority health messages. Since emphasis is being placed on a different topic every month, stamps carrying a message relevant to each topic may be issued. However, a minimum of two sets of stamps are recommended, one to commemorate the fortieth anniversary of WHO to be issued on 7 April 1988 and the other commemorating the tenth anniversary of Alma Ata in October of the same year. The Regional Office can provide on request the necessary slides and logo which may help in designing such stamps.

2. Postal messages

Consideration may be given to including a health message on each letter handled by the post office in each Member State, when cancelling the postage stamps. At least three or four such messages can be used in different months of the year.

3. School health societies

Member States may wish to encourage the establishment of health societies in schools. Such societies are intended to encourage healthy practices through schoolchildren disseminating health information to their families and communities. They may have access to health information directly from the ministries of health and education in their countries.

4. No-smoking Day

Seven April 1988 has been chosen as a World No-smoking Day. Member States may use the day to increase their anti-smoking efforts. Member States may also wish to review their policies on tobacco advertisements and to step up their efforts to increase the awareness of the dangers of smoking among the population groups who are in danger of picking up the habit.

5. Competitions and awards

Competitions may be organized in a wide range of activities with awards given to winners, using such events to enhance the capabilities of

participants, increase their interest in health or to disseminate health information. Any such competition must always be geared towards serving the ultimate objective of Health for All by the Year 2000. The following is a sample list of areas in which such competitions may be organized:

- (a) Video health programmes prepared by professional and amateur producers. This competition may be organized by health education units in Member States;
- (b) Best health articles, essays, radio presentations;
- (c) School health projects, teaching and learning material, etc.;
- (d) Health community competitions with awards to villages and districts which attain certain levels of hygiene;
- (e) Recognition awards may be given to professionals in the health sector and other sectors, such as journalists, who make a special effort or service for health advocacy.

6. Sports events

Member States may consider holding a number of sport events during 1988, as part of the celebration of the fortieth anniversary of WHO. Proceeds from such events may be earmarked for financing certain health projects, and the advertising facilities available in sport grounds may be utilized to carry certain health messages. If enough interest is shown by Member States, the Regional Office may help organize an intercountry competition with a WHO cup presented to the winning team or athlete.

7. Media roundtables

Member States may consider organizing national roundtables between media and health personnel. Such roundtables should help to establish and develop a partnership between the health authorities and the media in the advocacy of Health for All. The Regional Office will be able to help organize such roundtables and plan their programmes.

8. Media health supplements

Member States may identify magazines and publications which may be willing to run a health supplement with contributions from ministries of health, other institutions and individuals interested in health topics and from members of staff in the Regional Office.

9. Better use of visits by WHO personnel

Visits made to Member States by the Director-General, the Regional Director or other directors of WHO may be utilized by Member States to increase health awareness among the population, through inviting such officials to discussions on TV, or arranging interviews on Radio or in the Press to explain the programmes implemented by Member States in collaboration with WHO to achieve Health for All.

10. Special health days

Industry and agriculture as well as other health-related sectors may organize special days to demonstrate the connection between their products or services and health

CHAPTER FOUR

THE ROLE OF WHO SECRETARIAT

A. THE REGIONAL OFFICE

The Regional Office is ready to give Member States every possible help they may need in the organization and implementation of any of the preceding activities. In addition, the Regional Office has a role to play in the advocacy of Health for All. It is planned to carry out the following and other activities, as long as budgetary considerations allow.

1. Regional advocacy activities

The Regional Office will try to organize Regional advocacy activities, such as Regional competitions and satellite hook-up events with officials from Member States taking part. This is being considered for World Health Day.

2. Press conferences

The Regional Director may organize one or more press conferences explaining the work of the Organization and its plans for the achievement of Health for All. One such conference may be given at a suitable time which allows for media coverage on World Health Day.

3. TV messages

Two TV message by the Regional Director may be recorded in order to be transmitted on national television networks in Member States on World Health Day, and in October on the occasion of the tenth anniversary of Alma Ata.

4. Stamps and stickers

All outgoing mail from the Regional Office may carry a special publicity message stamped on the envelope and a sticker with a health message on the letter itself.

5. Medals

Medals are available at the Regional Office to be awarded to people who have supported the health goals and policies of WHO at national or Regional level. These and other symbols of honour, such as scrolls and testimonials, may be awarded either at the Regional Office in Alexandria, or during visits by the Regional Director to Member States, or by an appropriate representative of WHO.

6. Roundtables

In addition to collaborating with individual Member States in organizing national roundtables for health and media personnel, the Regional Office is studying the feasibility of organizing a Regional roundtable to foster the partnership between the media and health authorities.

7. Information output

The Regional Office should seek collaboration with a number of papers and magazines, as well as publishing houses, in the Region to carry features and articles which should promote the goal of Health for All, and which cannot be produced in the form of special publications due to the financial difficulties the Organization is going through at present.

8. Information dimension to meetings

Wherever possible, meetings and workshops, etc. organized by the Regional Office should have an information dimension. Selected meetings of specific importance to the public in the host country may be used by the Public Information Officer to enhance both public and media interest in that particular activity and through it in the advocacy of health. This may need country visits by the Public Information Officer prior to or during these meetings.

9. Talks by the Regional Office personnel

In addition to what has been mentioned in the last two paragraphs, visits by the WHO Director-General, Regional Director, directors and advisers to Member States may be utilized for health advocacy, by organizing a public presentation, a seminar, or a TV discussion, in which national figures may take part. Such talks need not be confined only to health topics, since many directors and advisers have other interests. They are, however, in a good position to inter-relate these interests to health so as to enhance the intersectoral concept of health advocacy.

10. Publications

The Regional Office should consider publishing a book and a pamphlet on "Forty Years of Regional Health". Again this may be printed with the collaboration of one of the leading press publishers in the Region.

11. "In Point of Fact" series

A list should be prepared of a Regional series of fact sheets entitled "In Point of Fact".

12. Photo library

A photo library should be established at the Regional Office to meet the different needs of advocacy by the Regional Office. Professional expertise may have to be sought for this purpose.

B. COUNTRY LEVEL - WHO REPRESENTATIVE

The WHO Representative and field staff will work hard to support the advocacy efforts in Member States. In addition, the following activities may be undertaken by WRs.

1. Events

The WHO Representative should identify events and occurrences in his country of assignment which may be used for the advocacy of Health for All. He should not hesitate to take part in any such events, whenever feasible.

2. WHO meetings

The WHO Representative should highlight any meeting, workshop or programme arranged or supported by WHO in order to ensure proper and sufficient publicity in the national media.

3. WHO Representative's Office library

An appropriate library should be established in the office of WHO Representative, including books, films and slides which may be borrowed by schools and other institutions to use in their activities. The model provided by the WR's Office in Somalia should be evaluated and replicated if it is found useful and practical.

4. Collaboration with other agencies and NGOs

The WHO Representative should take the lead in organizing intersectoral meetings which should bring together representatives of other development aid agencies on a highly informal basis, with the aim of avoiding duplication of activities, and using the information activity of other agencies and organizations for advocacy of Health for All, whenever possible. The media may be invited to such meetings to enhance their interest in health advocacy. Similar or parallel activities may be undertaken by WHO Representatives involving nongovernmental organizations, such as the medical, dental and agricultural associations, women's groups, the Red Crescent, etc.

5. Special review missions

Review missions in which WHO Representatives take an important part may be used for advocacy if enough publicity is given to them. The WR could also play a role in getting such publicity.

6. Regional Director's visits

At the conclusion of a visit by the Regional Director to any Member State, the WHO Representative should arrange for a press conference in which the Minister of Health and the Regional Director highlight a number of topics which the media is likely to consider important to the country.