

**DRAFT HIGH LEVEL ADVOCACY STRATEGY  
APPROACH FOR THE ELIMINATION OF IODINE  
DEFICIENCY DISORDERS IN THE RUSSIAN  
FEDERATION**



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## **Executive Summary**

The following draft advocacy strategy suggests various approaches to successfully eliminate and prevent Iodine Deficiency Disorders (IDD) in the Russian Federation through mandatory universal salt iodization (USI) legislation or another alternative legal instrument.

The review of policies shows that under the Soviet system IDD was not an issue of public health concern even though policies for salt fortification were voluntary. With the breakdown of the USSR and the introduction of a marketing economy the country faces an average IDD prevalence of 15-35% depending on regions. Some policies have been introduced such as “Measures to Prevent Iodine Deficiency Disorders” (October 1999) that stipulates measures to prevent IDD on a voluntary basis through public and private sector interventions. With the introduction of these measures various advocacy events took place in the Russian Federation, leading to a higher level of awareness on the necessity to prevent IDD among various stakeholders such as high-level policy-makers, salt producers and consumer groups. Consequently, draft USI legislation has been prepared for submission to and approval of the Federal Assembly.

In order to ensure the approval of the draft USI or other alternative legal instrument, this draft advocacy strategy suggests different primary and secondary audiences that need to be targeted. The draft strategy also suggests that the focus of policy messages be on promoting iodized salt as a product for increased economic productivity and increased intellectual excellency by using epidemiological data. The draft strategy also suggests avenues to enable the Public Council on the Elimination on IDD to build up national and regional alliances through existing associations and consumer groups. The draft also suggests various advocacy communication tools and channels such as the preparation of an advocacy tool kit for policy-makers and the use of forums and petitions to reach high-level policy-makers attention. Finally several suggestions are also made in the areas of capacity-building and awareness raising for primary and secondary audiences, highlighting the need to train on a priority basis national and regional high-level policy-makers on IDD and its elimination as well as to equip Goodwill Ambassador Karpov with advocacy tools to strengthen his role as a champion for salt iodization among policy-makers.

## **Approach of the Advocacy Strategy**

The following advocacy strategy will first analyze the issues pertaining to the elimination of iodine deficiency disorders (IDD) in Russia, thereafter develop solutions to promote the universal iodization of salt, and finally build political support to eliminate IDD through mandatory legislation for the universal iodization of salt. Once these three activities converge, policy action should effectively take place to bring about the desired change in Russia. The policy action and generated outcomes will be continuously monitored and evaluated.

### **1. Analysis of issues**

#### **1.1. Overall definition of problem**

Iodine deficiency is the single most common cause of preventable mental retardation and brain damage in the world. Grouped together, delayed physical and mental development due to iodine deficiency, cretinism and goiter are known as Iodine Deficiency Disorders (IDD). IDD in the mother during pregnancy is known to hinder the development of the fetus and result in mental and physical impairments ranging from cretinism to mild mental retardation. The consequences include poor school performance, reduced intellectual ability, impaired work capacity, cretinism and lost economic productivity. IDD during pregnancy can also cause abortion, stillbirth, congenital anomalies and growth retardation. Goiter, which is often the only visible sign of IDD, is just the tip of the iceberg, indicating more widespread and more serious functional consequences. These severe consequences persist into later life, impacting the learning and productivity of individuals and the nation's economic development.

In the Russian Federation even though nationwide IDD surveys have never been performed, the current data shows that in the Western urban settings of the Federation IDD is mild and moderate in rural settings; while in the Eastern part of Russia IDD is generally more prevalent (between 10-15% in urban areas and 13-35% in rural areas). Some periodic reports also point out to the presence of pockets of severe IDD. Regional surveys have covered up to 2/3 of Russia's huge territory and generally confirm a nationwide presence of IDD.

The staggering issue of iodine deficiency disorders was only recognized in 1997 when national and regional IDD programs were launched thanks to the support of various multi-bi donors and NGO partners. The programs advocated for the re-introduction of salt iodization to all sectors of society, in particular to government and industry. The contributions supported the assessment of the country's IDD situation, the supply of equipment, the facilitation of technical discussions along with advocacy and communication efforts. These programs resulted in a strengthened iodized salt production capacity able to fully cover the estimated demand for iodized salt, an improved quality control of iodized salt with the introduction of common standards for salt iodization and more effective quality control regulations. These improvements seem to have resulted in

a fourfold to fivefold increase in the demand and production of iodized salt. Therefore there do not seem to be any longer real obstacles in the Russian salt industry to fully meet the country's demand for iodized salt.

As a result of these national and regional programs, the Government of the Russian Federation passed a Resolution "On Measures to Prevent Iodine Deficiency Disorders" (October 5, 1999, No. 1119) in 1999, which stipulates measures aimed at preventing IDD on a voluntary basis. Even though this resolution is a positive first step towards universal salt iodization, the resolution does not assure that the production, supply and consumption of iodized salt are mandatory.

The lack of an enforceable legislative environment favorable to the elimination of IDD is one of the major constraints to the implementation of successful IDD elimination programs in Russia. Presently additional efforts are needed to incorporate universal salt iodization (USI) in the national legal framework. Draft USI legislation has been developed by the Confederation of Consumer Protection Organizations, with support of UNICEF, for submission to the Federal Legislation Assembly. In order for federal agencies as well as the Parliament (State Douma) to endorse this mandatory legislation in a reasonable time frame, high-level advocacy is needed. Frequent political changes and lack of transparency in government agencies has made the support for IDD USI mandatory legislation difficult. Possibly alternative routes to a mandatory USI law should be explored such as a government ministry developing draft Technical Regulations (TR) for Edible Salt and/or amendment of existing legislation and submitting them to the State Douma for adoption.

## **1.2 Policy analysis**

- Previous policies (1956-1997)

For more than forty years endemic goiter control in the former USSR was regulated by the Ministry of Health's Ordinance No.37-M, "On Improvement of Measures to Fight Endemic Goiter" (14 February, 1956), which defined the strategy for endemic control. The Ordinance defined the regions with a high prevalence of endemic goiter to which iodized salt must be supplied. The Soviet system was centralized with a few companies providing for national iodized salt needs. The Ordinance defined endemic goiter as a matter of concern for other government agencies such as the Ministries of Trade, Medical Industry, Food Industry, State Supply Committee, State Planning Committee and others. In particular this Ordinance gave a legal basis for the Central Anti-Goiter Commission in the Ministry of Health, which was responsible for coordinating and planning all activities related to the control of endemic goiter; similar committees in all regions affected by endemic goiter were also set up.

In the 1990s many salt production enterprises and almost the entire wholesale and retail trade system were privatized. In the 1990s the main challenge for the salt industry was that it lacked the capital to produce iodized salt that met the required standards for iodine content. Policy leaders also introduced standards that made salt iodization almost

impossible (the industrial Standard GOST 13830 “Common table salt”, adopted in 1991, hindered the mass manufacture of iodized salt). The main drawback was that there was no legislative framework in place for conducting IDD prevention programs under conditions of a market economy.

- Existing policies (1997-2003)

Until 1997 in Russia no special government document stipulating IDD control and prevention had been adopted. During the 1997-2002 period important government Resolutions and Ordinances of the Ministry of Health were adopted to enable the elimination and prevention of IDD.

In November 1997 the first meeting of salt producers developed recommendations to improve the quality of iodized salt by raising the weight proportion of iodine in salt and gradually transferring to the use of potassium iodate. The use of potassium iodate to iodize salt allows to double or treble the shelf life of the salt. These recommendations were subsequently translated into new approved industrial standards GOST 51574-2000 “Common Table Salt. Technical Specifications” and GOST 51575-2000 “Iodized Common Table Salt. Methods for determining iodine and sodium thiosulphate”.

In October 1999, the government adopted Resolution No.1119 "On Measures to Prevent Iodine Deficiency Disorders". According to this resolution, several federal departments (e.g. Ministry of Defense, Ministry of Internal Affairs, Federal Frontier Service and Ministry of Justice) must purchase iodized salt every year. In addition, the executive power structures of the Russian Federation constituent entities were requested to adopt measures to saturate the market with food containing iodized salt and to supply children's preschool, educational and health establishments with iodized food products, as well as conduct outreach work to raise the public's awareness concerning IDD prevention.

At this point in time there is no specific enforcement mechanism in place to ensure the production, supply and consumption of iodized salt. The current regulations stipulate for a voluntary model of IDD prevention through the use of iodized salt and other iodine-enriched products.

In 2001 the Ministry of Health endorsed the draft national Policy Paper on Universal Salt Iodization (USI) developed by National IDD Center. This Policy Paper has broadly outlines strategies for salt iodization. Subsequently the same year the provisional USI draft law was prepared by the Confederation of Consumer Organizations. This USI law on IDD prevention or an amendment to the existing Food Safety Law or even specific Technical Regulations on Edible Salt adopted by the State Duma, would regulate mandatory salt iodization.

### **1.3. Eliminating IDD: a unique and compelling benefit**

Epidemiological computer-based simulations<sup>1</sup> show that if nothing is done to reduce iodine deficiency, the Russian Federation will lose over 44,000 billion Rubles worth of future productivity due to IDD in pregnancy in the next five years alone. However, if we act immediately and reduce the goiter rate by 50% over this period, we can expect to gain 11,000 billion Rubles in future productivity. Moreover, by reducing IDD in pregnancy, 200,000 newborns will be saved from brain damage by 2006.

Comparing these economic benefits with the cost of salt iodization (2 Rubles per person per year) the benefits exceed the cost by a factor of 15. Even adding an Information Education Campaign (IEC) / Media to support salt fortification costing an estimated 640 million Rubles over the next five years would yield a Benefit: Cost ratio of 8:1. Thus, for each Ruble invested in salt iodization 8 Rubles would be gained in the net present value of future productivity. We should remember that this highly favorable Benefit: Cost ratio does not include any benefits measured in terms of the improved health, growth, development, educability or quality of life of the generation of children affected. Moreover the elimination of IDD can improve population-wide IQ by as much as 10 to 15 points. Clearly, these compelling figures speak for themselves.

Investing in policies and programs to eliminate IDD is economically feasible to increase productivity and therefore work capacity and intellectual ability, politically astute to promote mandatory legislation for the elimination of IDD and empirically supported by clear benefit: cost ratios for gained productivity over the next five years.

#### **1.4. Current advocacy platform**

The strategy intends to build upon the current advocacy platform for the elimination of IDD as well as on some previous advocacy highlights.

In 2000 advocacy meetings promoting the elimination of IDD through USI were conducted in two key Federal regions of Russia, the Northwest (Saint Petersburg) and the South (Krasnodar). These meetings were organized by government ministries and NGOs with UNICEF support. One of the main outcomes of the meeting was to demonstrate the importance of adopting a multi-sectoral approach to the elimination of IDD. In particular the meeting facilitated public-private discussions for future collaboration. This meeting also allowed the media to become actively engaged with USI.

In October 2002 at the Salt Producers meeting a PowerPoint presentation was given to salt producers on the clear benefits of iodizing salt. The benefits were calculated using an epidemiological computer-based tool called Profiles. A Policy Brief presented by Goodwill Ambassador Karpov was also prepared. Following this meeting a Public Coordination Council on IDD elimination was organized by national stakeholders.

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<sup>1</sup> Epidemiological computer-based simulations were performed in October 2002 using a methodology developed by the Academy for Educational Development (AED) with support from various donors such as USAID and UNICEF called Profiles. Profiles is a process for nutrition policy and advocacy using epidemiological computer-based simulations.

## **1.5. Current political environment**

In this section we will analyze the current political environment to assess where the opportunities for the elimination of IDD through USI or other legislative instrument lie, who the allies are in this endeavor and how allies can use these opportunities to advocate in favor of IDD elimination. The identified allies will be key affiliates for the Public Council in their efforts to advocate for the elimination of IDD. We will also identify constraints as well as sources of opposition to the elimination of IDD. It will be important to assess if there is any organized opposition to the elimination of IDD and if this is the case, how diverging views can be neutralized and / or won over to ensure the elimination of IDD.

At this point in time we would like to highlight the following aspects of the political environment.

In the Russian Federation the government at all levels plays an important role. Government channels tend to still be today the way to predominantly get business done. In dealing with official channels it is important to understand that lobbying is a new concept.

Advocating upwards through the wheels of the government system from regional to national levels could be effective in gradually building up support for salt iodization and addressing concerns at each level. Ultimately advocating through the official channels may be the best way to get the Douma's approval of the draft USI legislation or other legal instrument such as technical regulations.

Given the importance of a multi-sectoral approach for promoting the production, consumption and import of iodized salt and given the collective oriented society that Russia is, the elimination of IDD could be fastest with different government ministries working together under the leadership of the body heading the Public Council. Consumer groups could play a supportive role to Government in advocating for mandatory legislation on the production, consumption and import of iodized salt.

More specifically, the adoption of legislation on food fortification with reference to USI needs to go through several processes. First a bill is drafted by a government agency and submitted to the Cabinet of Ministers. Then the Cabinet of Ministers concurs with this bill with other concerned government agencies. Once the bill is approved, the Cabinet submits the bill to the lower chamber of the Russian Legislative Assembly called the State Douma. In the Douma the bill is first reviewed by Parliament Committees and Commissions. Once they have approved the bill, it goes through three hearings in the Douma to become law. The law is then approved by the upper chamber of Parliament e.g. the Federation Council and finally signed by the President.

Moreover, recent discussions of a Government Commission on Consumer Market looked into issues of iodized salt production as well as the development of production of other foodstuffs fortified with micronutrients. The Resolution of this meeting requires the State



Standard Committee, the Ministries of Health and Agriculture to develop draft Technical Regulations (TR) for Edible Salt. This TR must have provisions for production, packaging as well as labeling of iodized salt. According to the 2002 Law on Technical Regulation, the present State Standards will be gradually replaced by Technical Regulations adopted by the State Douma that will have the power of a law.

We need to be aware that the Radiological Research Center of the Russian Academy of Medical Sciences is marketing an organic compound “iodocasein” for incorporation into bread, milk and other food products. Iodocasein is promoted as a better vehicle of iodine than iodized salt that can be added to milk, bread, pasta, dairy products, etc. Iodocasein is also produced and supplied to the pharmaceutical market as a nutritional supplement. The marketing strategy for iodocasein often works to discredit USI as a method of IDD prevention.

## **2. Goal and Objectives**

### **2.1. Goal**

The goal of the advocacy strategy is to eliminate iodine deficiency disorders as a public health problem by the year 2005. This goal fulfills the vision that the Russian Government spelled out after the Special Session on Children in May 2002 on having a country free of IDD. This vision is expressed in the State Policy Concept of Healthy Nutrition of the Population of the Russian Federation by the year 2005.

### **2.2. Advocacy Objectives**

The advocacy objectives of the strategy include:

#### Legislation

- Lobby the Government and the Federal Legislative Assembly to approve the draft USI for mandatory salt iodization.
- Explore an alternative route to the USI with a state ministry drafting Technical Regulations for Edible Salt and submitting it to the State Douma for approval
- Ensure that the Government and the Federal Legislative Assembly set up a strong enforcement, regulatory and monitoring system to ensure that all domestically produced and imported salt be iodized and regularly undergo quality control assessments.
- Enable the Public Coordination Council through a strong secretariat to play a multi-sectoral policy coordinating role for ensuring salt iodization advocacy, use and promotion.

#### Capacity-building

- Build the capacity of policy makers at national and regional level for implementing the high level advocacy strategy.
- Equip Goodwill Ambassador Karpov with advocacy tools to strengthen his role as an advocacy champion for salt iodization among policy-makers.

- Train communication professionals of the national salt industry on improved marketing techniques for promoting iodized salt.
- Build the advocacy capacity of the associations, NGOs and consumer groups to become important advocates in support of the Public Council national and regional efforts to promote the use of iodized salt.
- Build the capacity of the media to effectively publicize and promote the use of iodized salt.

#### Awareness raising

- Raise awareness of government officials and affiliated partners about the consequences of IDD as well as effective ways and means for its elimination on national and regional levels.

#### Alliance building

- Enable the Public Council as the main advocacy alliance at federal level to create Public Council affiliates (“IDD Alliances”) on national and regional levels for promoting iodized salt.
- Use consumer associations and other parties to support the Public Council advocacy efforts in building national and regional IDD alliances.

#### Communication

- Develop targeted information, education and communication materials for a variety of primary and secondary audiences.
- Disseminate information and ensure the enforcement and understanding of the USI law through appropriate networks, coalitions and media.

### **3. Building political support**

#### **3.1. Audiences**

In order to build political support for salt fortification we will need to segment and understand the audiences. We will first look at the primary audience, composed of the key decision-makers who can affect the objectives of the nutrition strategy directly. We will then look at the secondary audience, which is made up of individuals and groups who can influence decision-makers. For each audience we will seek to understand who the key players are and which arguments they may most likely respond to.

##### **3.1.1. Primary audience**

Suggested primary audience includes:

- Public Coordination Council on IDD elimination

The Public Council was organized by national stakeholders after the national salt producer’s meeting in October 2002. The main function of this Council is to coordinate

advocacy and other activities related to the elimination of IDD of various stakeholders on federal and district level. The members of the Council include representatives of the salt industry associations, federal districts, government IDD Center under the Ministry of Health, medical and nutrition institutions and NGOs such as the biggest national confederation consumer protection societies. The honorary Chairperson of the Council is Goodwill Ambassador Karpov.

- Parliamentary Leaders and members of appropriate committees

The primary decision-makers with authority to approve mandatory salt iodization are the legislative members of State Douma.

- Regional high level leaders

Russia is a federal state that consists of 89 federal constituencies. All these constituencies have high level of political and economical autonomy. Regions are represented in both chambers of the Federal Legislative Assembly. High level advocacy should encompass high level regional leaders (governors, heads of regional legislative bodies and organs of executive power, etc.) as they will be the key advocates in their respective regions.

- President and Prime Minister of the Russian Federation (President's Office)

The role of the President and the Prime Minister of the Russian Federation is essential in endorsing legislation and in setting the pace in the implementation of a mandatory USI. These two well-respected figures could also initiate advocacy events to set firm foundations for the elimination of IDD.

- Ministry of Health and affiliated bodies

The Ministry of Health through its mandate is committed to eliminating IDD. In case Technical Regulations on Edible Salt were to be submitted to the State Douma for approval, the Ministry of Health in conjunction with the Ministry of Agriculture would be required to draft these regulations. The Ministry of Health's work is supported by several institutions such as the Russian Academy of Medical Sciences and its Endocrinology Research Center, the Center for Hygiene Education, and finally the Center for IDD. These different bodies all play a role in the goal of eliminating IDD.

- Ministry of Economical Development and Trade

In the Ministry of Economical Development the Department of Domestic Trade may have an important role to play in submitting to the State Douma Technical Regulations for Edible Salt.

- Ministry of Agriculture

The Ministry of Agriculture portfolio also includes IDD issues as pertaining to the environment. In case Technical Regulations on Edible Salt were to be submitted to the State Douma for approval, the Ministry of Agriculture in conjunction with the Ministry of Health would be required to draft these regulations.

### **3.1.2. Secondary audience**

Suggested secondary audience includes:

- Salt producers

In the Russian Federation there are 4-5 main salt producers. All salt producers have the capacity to iodize edible salt. Their annual production is estimated at roughly 100,000 tons. All firms seem to have a broad delivery range to most individual regions of the Russian Federation. All of their consumer packets are clearly marked with the name of the product “Iodized Salt”. Most of the enterprises supply salt to many branches of industry, retail trade companies, the food industry and agriculture. All salt producing firms have central laboratories, which carry out quality control of the manufactured product. All enterprises have switched to potassium iodate for the salt enrichment process. Salt manufacturers are actively working with the main wholesale dealers, recommending that they purchase primarily iodized salt for retail trade. Some retailers are not yet fully aware of the iodization benefits. It is important to note that since 1999 a number of small regional salt-packaging enterprises have also risen and have begun to produce iodized salt to meet local needs.

- Associations including consumer groups and NGOs

There is a whole range of associations that need to be informed about the elimination of IDD and the necessity of having a mandatory USI in order to effectively eliminate IDD. These associations include NGOs supporting maternal health, consumer organizations, physician’s association, women’s organizations, education groups, children’s health advocates, etc. The support of these associations is essential as their advocacy skills could be used build up IDD alliances in support of the Public Council’s national and regional efforts to promote the iodization of salt.

- Media

The media has an important role to play in public and multi-sector education on IDD prevention at regional and national levels.

### **3.2. Messages**

One of the most effective ways to build awareness about the necessity of eliminating IDD and of approving the draft USI or alternative binding instrument is to develop a message (s) that a particular segment of the audience will respond to.

Given the high educational level of Russian policy-makers and the importance attributed to intellectual excellency, education oriented messages to promote the use of iodized salt may be the most effective. More specifically, the use of economic arguments in terms of gained productivity could be effective as well as the emphasis on iodized salt for promoting intellectual excellency. Moreover, Russian decision-makers seem to respond to technically oriented and economically demonstrated arguments and are curious about how other neighboring countries work. Hence using rational based arguments that are backed by epidemiological studies and showcase examples from different neighboring countries may be a good way to present credible information to policy-makers on the consequences of IDD.

The Profiles Presentation “An Urgent Call to Action: Ending Iodine Deficiency Disorders in the Russian Federation” (Russian Centre for Endocrinological Center and Academy for Educational Development, Salt Producers Meeting, October 2002) ended the presentation with the message: “Let’s invest together in iodized salt for the future of our children”. This message could also be a lead-in for some advocacy tools.

Once audiences have been identified as well as the arguments that they would most respond to, policy messages on the importance of eliminating iodine deficiency disorders will be developed for each specific audience under section 3.2.1. Primary Audiences and 3.2.2. Secondary Audiences.

### **3.3. Alliances: Networks and Coalitions**

Effective advocacy involves building networks among people and sometimes coalitions among organizations in order to bring about change. Networks and coalitions take time and energy to develop and maintain because they involve building relationships with other people. These will be analysed in more detail at a later stage in parts 3.3.1 Networks and 3.3.2. Coalitions.

In a generic way, the first step is to identify and / or create national coalitions to assist all sectors in the elimination of IDD. For reaching optimal results in the elimination of IDD national coalitions should have a multi-sectoral representation and be composed of senior officers of public, private and civic sector organizations of various sectors involved in IDD elimination efforts. The coalitions working towards the elimination of IDD are envisioned to be the national node to review progress and ensure permanence, coordinate with national nutrition plans, and serve as a forum for information sharing and advocacy with policy makers and leading decision-makers in the relevant sectors.

Presently in the Russian Federation there is a broad range of potential partners both from international, regional and from national levels. It may be useful to build partnerships: at an international level to get support from these organizations, at a regional level for coordination and regional spill-over effects as a substantial amount of salt importation / exportation is taking place between regions, and at national level for approval of a mandatory USI or other binding legal instrument.

At national level the Public Council has a key role to play as it is the most important alliance at federal level on which advocacy activities should be built. The Public Council through its advocacy activities could then set up regional ID alliances among all sectors and have an umbrella role in all those activities. For setting up regional ID alliances the Public Council will need to identify credible counterparts at each level. For example the Public Council could use existing structures such as the Confederation of Consumer Societies (KONFOP) and its local NGOs to act as a nucleus as well as an engine to pull together supportive coalitions for USI or other binding legal instrument at regional level. Women's groups, medical institutes, education groups and other appropriate partners such as spokespeople and the media could also be used for building alliances among stakeholders on promoting USI or another legal binding instrument.

### **3.4. Advocacy Communication Tools and Channels**

Once we have identified our primary and secondary audiences and developed key messages for each segment of the audience the choice of advocacy communication tools and channels will be finalized. Advocacy communication tools and channels will be matched to specific audiences once they have been agreed upon and pre-tested.

#### **3.4.1. Advocacy Communication Tools**

In order to convey the compelling message that IDD needs to be eliminated by 2005 through the approval of mandatory legislation for the production, consumption and import of iodized salt, a variety of advocacy communication tools need to be developed and used as appropriate in target audiences.

Some of these tools may already exist, in which case experts will need to see if they are effective, if they should be reworked or not. After having chosen the tools these will need to be pre-tested in focus groups before deciding which ones produce and to use.

Suggested tools of choice:

An advocacy information tool kit should be developed that can be used for policy-makers and related partners to advocate for effective elimination of IDD. The content of the information kit could be adapted depending on the specific audience. The advocacy tool kit could comprise the following tools:

- Brochure / leaflet

A brochure presenting key information on IDD and how it can be prevented could be prepared. The brochure could use pictures, graphs and IDD information as pertaining to various sectors.

- Policy Brief

A short policy brief spelling out what IDD and its functional consequences if nothing is done could be prepared. This policy brief will be in content very similar to the fact sheet,

but will be geared at high-level policy makers and presented by a champion or a group of multi-sectoral representatives.

- Publications

A series of publication could be written using scientific epidemiological data to make a case on the benefits and cost of eliminating IDD. These publications could possibly get coverage in medical journals. Such publications would be useful for high-level advocacy in scientific and parliamentary milieus.

- Fact Sheet

The fact sheet could be a one page brief presenting what IDD is, the functional consequences of IDD if nothing is done to prevent it and the benefits: costs of eliminating IDD. The fact sheet could use some graphics, epidemiological data and pictures.

- Speaking points

Speaking points could be prepared for legislators. These speaking points would help legislators to formulate arguments in favor of universal salt iodization legislation.

- Flash PowerPoint presentation

A short PowerPoint presentation that summarizes the information contained in the brochure and the publication could be used to make a case on producing, consuming and importing iodized salt on a mandatory basis. This would be provided on a diskette or CD-Rom.

Other suggested advocacy tools geared at high level policy-makers include:

- Logo

A distinct logo for the IDD elimination campaign could be developed. This logo could appear on all tools.

- Profiles Computer modeling PowerPoint presentation

The Profiles computer modeling PowerPoint presentation would present all the epidemiological data as well as Profiles spreadsheets used to make a case for the elimination of IDD. At the difference from the short PowerPoint presentation, this presentation would be highly technical and much longer.

- Petition

A petition as a tool for supporting the elimination of salt iodization through mandatory legislation that gathers signature from various institutions such as consumer groups, the Russian Medical Center, bodies affiliated to the Ministry of Economic Development etc. could be an effective way to voice multi-sectoral support. This petition would then be submitted to Parliament and would represent the endorsement of legislation from a bottom-up approach. Such a petition would provide various parliamentary commissions with support in their deliberations for an adoption of the USI law or other legislative instrument.

- Official guidelines

The Ministry of Health may want to endorse a decree stating that physicians recommend the consumption of iodized salt to health attendants and other parties they work with. This could be one effective way to counter the flow of alternative iodized products.

- Press broadcast commentary or coverage

The debates that are held between high-level policy makers on the elimination of IDD could be covered in the press either through a radio broadcast commentary or a newspaper article.

- Poster

A poster conveying a compelling message on the impact of IDD e.g. decreased intellectual capacity and worker productivity if no iodized salt is consumed, could be prepared. This poster could be hanged up in major high-level policy debates, forums and parliamentary sessions.

- Video / educational documentary

The video could be a type of documentary on IDD elimination in the Russian Federation depicting IDD over the last 50 years, goals to be pursued, strategies etc. The video would mainly show how easy it is to avert IDD through the production, consumption and import of IDD. This video could be showed at the opening session of a high-level forum or parliamentary debate.

- Newsletter for networks and coalitions

Networks may want to consolidate their alliance and growing membership in the form of a newsletter in which they could share their efforts in advocating for eliminating IDD. This newsletter could then also be a source of information (progress report) for policy-makers who could then consider how to draw in specific expertise into the process.

- IDD hotline

It could be useful to have an information hotline for all types of questions arising on IDD and its elimination through mandatory salt iodization legislation. This hotline could be phone, radio, newspaper or web-based.

- Salt label pin

A salt label pin could be produced that high-level policy-makers would be given at forums, parliamentary sessions etc. Wearing the pin would represent participation in the IDD elimination debate. The salt label pin would be large enough to include the name of the policy-maker as well as key information on the benefits of iodized salt; fictive information on: a fortificant used, the expiry date of the product, the manufacturer's details; and a seal from the Ministry of Health.

### **3.4.2. Advocacy Communication Channels**



The information on what IDD is and the benefits of eliminating IDD that is presented in the various advocacy communication tools can be disseminated through various channels to high-level policy-makers.

Suggested channels are:

- Coordination mechanism

The Public Council is not only a key primary audience, but is also an important communication channel to disseminate information on IDD as one of its roles is to coordinate advocacy activities. This channel could be used to quick off the advocacy process for the elimination of IDD through mandatory legislation. This channel could also serve to coordinate multi-sectoral advocacy activities.

- Forums

A forum may be an excellent channel to reach influential policy-makers. For example a well-respected body could organize a forum at which experts would be brought in and epidemiological tools such as Profiles would be used to convince policy-makers on the benefits of having mandatory iodized salt production, consumption and import. At the end of the forum recommendations would be developed that could be submitted to the President's Office and to Parliament for their endorsement. These recommendations could also be used to support the work of the Public Council.

- Roundtables

A roundtable gathering stakeholders with different views could be organized as an opportunity to reach consensus on issues of common concern such as USI legislation and endorse recommendations for action.

- Seminars

A seminar could be organized to discuss the implications of IDD elimination from scientific, economic and educational and health perspectives. Scholars would facilitate the discussion between different stakeholders.

- Champions

Champions are a key channel for convincing selected audiences. The role of champion is to put a problem on an agenda, bring a solution to the attention of decision-makers and galvanize political consensus. Presently Anatoly Karpov, the famous chess champion, has become UNICEF's Good Will Ambassador. Goodwill Ambassador Karpov plays a key role in advocating for the elimination of IDD through USI as he has access to influential politicians. Other policy advocates for specific audiences could be identified.

- News events

The media (television, newspapers and radio) is vital in disseminating information about IDD and its elimination as well as in broadcasting high-level policy makers' debates on the subject. Special news events on IDD debates, forums etc. could take place.

- National IDD elimination day

A national IDD elimination day could take place throughout the nation. It would be led by a high-level figure gathering a lot of support. Various events around the federation would take place on broadcasting the importance of eliminating IDD.

- Contest

A contest could be an effective way to disseminate information while also educating an audience on the benefits of iodized salt. For example there could be a national contest with an award to the salt producer manufacturing iodized salt with the highest quality: price ratio.

### **3.5. Strengthening Human Resources: Capacity-building and Awareness Raising**

Once we have drawn up the framework of the advocacy strategy such as identifying key audiences, advocacy communication tools and channels that can be used to reach our goal of eliminating IDD, specific capacity-building and awareness raising suggestions for each audience to implement the advocacy strategy each at their individual work level will be provided. Given that the Russian Federation is an enormous country and given that iodized salt has mainly reached out to one third of the country, regional training mechanisms will need to be spelled out that covers the whole territory.

A generic advocacy module could be developed that can be used to train different audiences at national and regional levels. The idea is that parties trained in advocacy understand how advocacy works as a tool so that peers can then be trained further.

Suggested capacity-building areas include:

- The capacity building of high-level policy-makers at national and regional levels on the importance of iodizing salt and how to advocate for the elimination of IDD may want to receive priority attention given the goal of the strategy.
- The training of members of the Public Council in advocacy including alliance building with a focus on IDD elimination may also want to receive priority attention given the key mandate of the Public Council in furthering the goal of this strategy.
- Equipping Goodwill Ambassador Karpov with advocacy tools to strengthen his role as an advocacy champion for salt iodization among policy-makers may also want to receive priority attention.
- It may be useful that some key parliamentarian national and regional members go on a study tour to some neighboring countries to see what type of legislation has been endorsed and what type of regulations have been put in place.
- The different ministries such as health, agriculture, economic development, education and trade, and their affiliated bodies could be trained on how to implement the advocacy strategy from their sector's perspective. Respective roles and responsibilities would be explored, providing a platform to future multi-sectoral commitment and collaboration to IDD elimination.

- Salt producers could be trained in consumer demand and packaging, quality insurance and management. Moreover, the marketing personnel of each leading salt manufacturer could be further trained in up-to-date approaches and methods for marketing salt based on international experience.
- Study tours could be provided for key salt producers to visit some Western countries' salt production plants. This would be beneficial in expanding contacts and exchanging experiences with colleagues from neighboring countries.
- Associations including consumer groups and NGOs could undergo a hands-on advocacy training module for eliminating IDD as they could be important partners to the Public Council in advocating and in building alliances.
- Training could also be provided to the public media organs and related partners in preparing effective advocacy communication tools to promote the prevention and elimination of IDD.

Suggested awareness raising areas include:

- Raising awareness among government officials and affiliated partners about the consequences and elimination of IDD on national and regional levels may want to receive high attention through various channels such as sensitization workshops, forums, news events etc.

## **4. Action Plan**

### **4.1. Action Plan**

The Action Plan brings together the issues that have been identified in part 1, the solutions that have been developed in part 2 and 3, and the political support that needs to be built up as also depicted in part 3. The Action Plan summarizes the key points developed in the advocacy strategy that constitute windows of opportunities in reaching the goal of eliminating IDD by the year 2005.

The Matrix of the Action Plan will be developed once the core part of the strategy has been agreed upon.

### **4.2. Monitoring and Evaluation**

This part touches upon aspects of monitoring and evaluation of the Action Plan. A more detailed discussion could be developed in another paper.

As part of the advocacy cycle it is essential that there be a systematic monitoring of the implementation of the Action Plan to detect flaws and oversights in the targeting of the audiences, in the product, in the choice of communication tools and channels, as well as in the strengthening of human resources.

In order to ensure the full success of the Action Plan it may be worth to consider setting up in the planning phase of the advocacy cycle a multi-sectoral working at program level, in addition to the mandate of the Public Council, to advise on the implementation of the advocacy strategy and have an active role in monitoring and evaluation.

### **4.3. Budget**

In order to implement the advocacy strategy there needs to be a commitment to plan sufficient financial resources. The budget will be annexed to the advocacy strategy once there is a consensus on its content and that all activities have been finalized in the Action Plan.

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