Planning and implementing a community-based public health advocacy campaign: a transport case study from Australia

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SUMMARY

Facilitating community action is a key goal of health promotion. This paper describes a public health advocacy framework. It then presents a case study of its application for planning community action by a community alliance concerned about increased heavy traffic on roads through a small regional city in the South West region of Western Australia. The case study illustrates defining the public health problem, the solution and the target for action; and the implementation of a comprehensive range of strategies including a media advocacy strategy to attract public attention, to reframe media messages, and to provide a policy alternative to government and industry. The campaign was evaluated in terms of process and outcomes, and was successful in putting pressure on key stakeholders and achieving the alliance’s two main goals. The case study demonstrates the value of a well-planned campaign and including public health advocacy in public health practice, as an important strategy to facilitate the creation of healthy environments through healthy public policy.

Key words: environment and public health; media advocacy; public health advocacy; sustainable transport; environment

CONTEMPORARY PUBLIC HEALTH

To optimize health, public health interventions must address environmental, social, political and economic factors as well as individual behaviour (WHO, 1986). Public health’s mission includes creating the ‘conditions’, and ‘environment’, in which people can be healthy (Wallack and Dorfman, 1996). Hence, contemporary public health practice involves not only attempting to change individual behaviour but also influencing the policies and practices that create the conditions for change.

Public health advocacy

Public health advocacy has been used to advance policies in several public health areas, including gun control [e.g. (Chapman, 1998)], injury prevention [e.g. (McLoughlin and Fennell, 2000)] and tobacco control [e.g. Mindell, 2001; Ashbridge, 2004)]. It involves creating and maintaining effective coalitions, ‘the strategic use of news media to advance a public policy initiative, often in the face of opposition’ (Chapman, 2004), and ‘the application of information and resources to effect systemic changes that change the way people in a community live’ (Christoffel, 2000). It often involves bringing together disparate groups to work together for a common goal.

Chapman argues that advocacy remains a ‘Cinderella branch of public health practice’ with insufficient attention given to its development
through university programmes, textbooks and journals (Chapman, 2004). Yet, to be effective, public health advocates require skills in strategic analysis, community organizing and use of the media (Woodruff, 1995; Chapman, 2004).

Strategic analysis explores three central questions: what is the problem, what is the solution and who is the target for change (Woodruff, 1995). Answers to these questions, focuses the advocates’ energies on the steps to be taken to achieve key goals (Woodruff, 1995) and for each strategy to be interrogated for its relevance for achieving the campaign objectives (Chapman, 2004).

The basic premise of ‘community organizing’ is that people can change the environment more effectively by working together, rather than alone. Since reform typically involves changing the status quo with opposition coming from governments, industry and community interest groups, solid public support is essential for change to occur. Moreover, the process of strengthening collective capacities to facilitate change is intrinsically health-enhancing because self-determination is critical to community development (Woodruff, 1995).

Media advocacy is defined as the strategic use of media to pressure policy-makers to act (Wallack, 1994). Mass media campaigns focus on bringing about individual change (Wallack, 1994) and providing the public (and politicians) with a rationale for the need for change (Green and Kreuter, 1999). Conversely, media advocacy focuses on applying strategic pressure on key decision-makers through the media (Wallack and Dorfman, 1996), with the aim of bringing about changes to policies, regulations and legislation that influence social, environmental or economic causes of ill-health (Wallack, 1994).

Public opinion is shaped by news coverage of issues and government’s perceptions of public opinion influences the development of policy, laws and resource allocation (Holder and Treno, 1997). Thus, media advocacy goes further than simply gaining the attention of the news media (Wallack and Dorfman, 1996). Used effectively, it involves addressing clearly defined media advocacy objectives, framing the issue to make it more salient and memorable (Chapman, 2004). Rather than being a stand-alone strategy, media advocacy is a tool for advocates who want to magnify their efforts via the media (Woodruff, 1995). It is central to public health advocacy (Chapman and Lupton, 1994), and many authors have articulated tips to maximize its effective use (Wallack and Dorfman, 1996; Chapman, 2004).

There is a dearth of public health advocacy literature (Chapman, 2004). Thus, this paper describes the application of a public health framework for a community advocacy campaign conducted from mid-1999 to early 2001 that was designed to reduce heavy traffic on roads through a small regional city in the South West region of Western Australia (Figure 1).

**CASE STUDY: ROAD TRANSPORT OF BLUE GUMS**

**The context**

Western Australia (WA) is Australia’s largest state covering ~2.5 million km². Its southern region (the Great Southern Region) contains some of the State’s prime agricultural land and is also a premier tourist destination. In the past decade, Tasmanian Blue Gum tree plantations have emerged as a growth industry. Designed as a product to offer tax relief to high income earners, there has been a rapid increase in the plantations in the southerly areas of the region (TIRES, 2000). In 2001, ~300,000 tonnes of the 65,000 hectares of these Blue Gums was harvested for the first time (Tingay and Associates, 2000). They were processed into woodchips for overseas export via the Albany Port, a small coastal regional city servicing the region (Figure 1).

It is estimated that by 2015, ~25 million m³ of hardwood pulpwood will be produced in the Great Southern Region (WADR, 2000). At full production (expected by 2007) some three million tonnes of woodchips per year could be exported from the Albany Port from static and mobile chip mills (TIRES, 2000). The Port is located less than 2 km from the heart of the city of Albany. The main road accessing the Port is a key route for residents and tourists travelling to and from the city.

Initially, it was proposed that the majority of timber would be processed at a static chip mill located some 14 km north of the city of Albany, with the chips being transported to the port by rail. However, in late 1998, the three major Blue Gum companies announced that, for economic reasons, they intended to transport the woodchips to the port by road. This announcement raised concern in the local community. If transported by road (heavy truck capacity 45
tonnes), it was estimated that by 2007 there would be 370 heavy truck movements per day through Albany en route to the Port (DPI, 2002) compared with 24 rail movements per day if transported by rail (train capacity 1000 tonnes) (Tingay and Associates, 2000). Albany also is in the heart of the wheat growing area. With combined grain and woodchip transport movements to the Port, it was estimated that by 2010, the truck movements through Albany would grow to ~860 per day (DPI, 2002).

Strategic analysis
A strategic analysis of the Albany woodchip road transport problem was undertaken using Woodruff's framework (Woodruff, 1995).

What was the public health issue?
Road safety is a significant issue in Western Australia. Since 1996, Western Australia has had the second highest road fatality rate per population in Australia (RSC, 2001). The Great Southern Region bears a higher road safety burden than the rest of the State. Between 1987 and 1997, 5% of fatal crashes and 4% of serious injuries requiring hospitalization occurred in the Great Southern which has only 3% of the State population (RSC, 1999). Compared with the rest of the State, a greater proportion of fatal road crashes involved trucks in the Great Southern. Between 1990 and 1999, 5.3% of vehicles involved in fatal crashes in Western Australia were articulated trucks (also called semi-trailers), but these trucks were involved in 7.9% of fatal crashes in the Great Southern (personal communication, Road Safety Council of Western Australia, 2003).

Globally, transport-related problems are of great public health significance (Haines et al., 2000; Granados, 1998). Transport issues affect populations, not just transport users and, globally, traffic injuries are one of the leading causes of death and disability (Peden et al., 2004). Road

Fig. 1: Map of Australia highlighting the southern region of Western Australia.
traffic accounts for a substantial share of particulate matter, which has both immediate and long-term health effects, noise and the emission of CO₂, a major greenhouse gas (Dora, 2000).

A decade ago, the UK Royal Commission for Environmental Protection noted that despite higher externalized costs associated with transporting goods by road (e.g. accidents, road congestion, air and noise pollution) road transport of freight had increased at the expense of rail transport (RCEP, 1994). Australian road transport carries 71% of the total domestic freight-task tonnage, compared with 24% by rail (ABS, 1997).

The UK Royal Commission for Environmental Protection estimated that as much as 4.5% of the gross domestic product (GDP) was spent on traffic-related pollution, noise, vibration and climate change costs (RCEP, 1994). In 1993–94, the Australian transport industry was said to have contributed 5.7% to the total Australian GDP, i.e. $22.39 million (ABS, 1997); however, this ignores the costs associated with the transport industry. For example, transport-related injuries are estimated to cost $6.6 billion per annum, including loss of earnings, family and community losses, pain and suffering, vehicle damage and insurance administration. Road transport generates the majority of accidents and the highest costs of all transport modalities in Australia (ABS, 1997).

Globally, there are concerns about the disproportionate investment in road infrastructure. Moreover, in many countries, more sustainable modes of transport (i.e. goods transport by rail and public transport) are losing market share (WHO Europe, 1999).

Thus, as demonstrated, transport policies are a key determinant of health (Dora, 2000; Wilkinson and Marmott, 2003) and transport planning is an important public health issue. A considerable proportion of transport planning occurs at the local level and there are opportunities to influence public health at the local and regional level (WHO Europe, 1999).

What was the local problem to be addressed?
The community identified the ‘problem’ as the potential impact of increased road transport on the road traffic accidents and the health of the local population. A situation analysis found that contradictory government policy and legislation potentially stood in the way of potential community action.

Transport policy and practice in the Great Southern Region is guided by the Southern Province Transport Strategy (DOT, 1998), which recognizes the need for transport planning using a whole-of-system approach. Key objectives include to ‘minimize the adverse impacts of transport activity on communities’ and to ‘develop and manage a transport system which is coordinated and takes account of total needs and costs’. Despite policies and guidelines, the local and state authorities seemed prepared to accept the chip mill proponent’s wish to use road rather than rail to transport the woodchips. The reason for the lack of action became evident when the Albany Hardwood Plantation Agreement Act (AHPA) of 1993 was reviewed. The 1993 Act specifies a number of undertakings restricting the State government and any of its instrumentalities or agencies from applying discriminatory taxes or processes on the Albany Plantation Forest Company of Australia (the chip mill proponent). The Act also appeared to restrict the State or any other local authorities from obstructing the company’s operations with respect to the transport of the timber or woodchips produced.

The solution and the target
In August 1999, the Albany Region Community Development Alliance (referred to as ARCDA) was formed at a public meeting called by a state politician in response to announcements by the Blue Gum companies that they would use road trains to transport woodchips to the Albany Port. Twelve community groups formed the coalition in response to concern about the range of potential health, economic, environmental and social problems associated with the emerging Blue Gum industry.

ARCDA aimed to be a clearing house for public issues and commercial developments, where the community felt the need for ‘better or more balanced public knowledge’. The objective of the group was to provide a forum to discuss and debate concerns on public issues and commercial developments. ARCDA articulated six major objections to the use of road instead of rail to transport woodchips as follows: (i) road safety concerns; (ii) cost to taxpayers of road upgrades and maintenance; (iii) impacts on tourism; (iv) health impacts of diesel air pollution; (v) increased greenhouse gas emissions; and (vi) negative impact on the social amenity of the city.
In addition, ARCDA proposed two solutions to the problem as follows: (i) that woodchips be transported to the port using rail rather than road; and (ii) that a feasibility study be undertaken for the establishment of an inland freight depot, linked by rail to the port for a variety of bulk freight items, including woodchips.

Chapman highlights the importance of ‘sound bites’ and the need for a ‘pithy, memorable and repeatable’ summation of the essential argument of the debate (Chapman, 2004). Based on these needs, ARCDA’s ‘Chips on Rail’ campaign was born. The primary targets identified for the advocacy activities were the chip mill proponent, other members of the timber industry, the state government and the Albany City Council.

Strategies

Public meetings

Woodruff argues that there is a need to involve the community to strengthen its collective capacities to bring about social change (Woodruff, 1995). Thus, ARCDA organized monthly public meetings, featuring invited multisector guest speakers from agriculture, planning, industry and academe. ARCDA’s activities were designed to elicit and promote public opinion and action about the need to pressure the industry and government to transport woodchips by rail rather than road and regularly attracted between 30 and 100 people representing community and industry groups, city councillors and the general public.

One pivotal public meeting discussed the concept of an inland freight depot linked via rail, as a key solution to transporting Blue Gum chips to the port, along with other commodities produced in the region. All key stakeholders were invited to attend, including representatives from major government transport and road management departments, and timber and farmer industry groups. The meeting outcome was a motion to the Minister for Agriculture to fund a feasibility study for an inland freight depot linked to the port by rail. This strategy became a focus for the ‘Chips on Rail’ campaign.

Petition

To garner wider community support and to facilitate an opportunity to express community concern (Chapman, 2004), ARCDA initiated a petition stating that the health, safety and environmental impacts of road transport were unacceptable to the community. The petition was framed to highlight the social dimension of the woodchip transport issue and that government initiate a cost neutral rail freight system to transport woodchips to the port by rail from an inland assembly area. It was signed by 59 community members and tabled in the Legislative Council in May 2000.

Fact sheets

Memorizing the most compelling points of one’s argument is essential for the success of an advocacy campaign, particularly when dealing with the media (Chapman, 2004). ARCDA members conducted desktop research and produced and disseminated information sheets. The ‘fact sheets’ collated data from government and other agencies’ reports. Fact sheets were distributed at public meetings and topics included: estimated woodchips to port movements; road transport and safety; diesel and health; regional road use by trucks and associated costs; chip mill site location options; a copy of the Western Australian Government’s Regional Development Policy principles (which emphasized ‘the need for regions to plan and manage their own future’); a summary of the AHPA Act; and the then State opposition party’s transport policy.

Letter writing

During the strategic analysis, ARCDA identified an apparent contradiction in government transport policy and legislation governing hardwood plantations in the Great Southern Region. ARCDA sought legal advice on the AHPA of 1993. This advice revealed that the state’s Transport Act would override the AHPA Act if public safety was compromised by the transport of woodchips by road. The advice became the subject of correspondence between the ARCDA and the Minister for Transport.

To help generate debate, ARCDA members and attendees at public meetings were encouraged to write letters to the editors of the two local newspapers and politicians using the fact sheets as background material. To facilitate letter writing, pro forma letters containing the addresses of politicians and a space for people to express their views were distributed at public meetings. However, feedback was received that people preferred to sign a letter rather than write their own. Thus, a form letter about the need for
rail to be used to transport woodchips was developed and members of the general public were encouraged to sign and send to politicians.

**Media advocacy**

ARCDA used the media to promote the Chips on Rail campaign with the aim of influencing public opinion and also opinion leaders and policy-makers. Jernigan and Wright suggest that one of the most important framing decisions for advocacy campaigns is the choice of spokesperson (Jernigan and Wright, 1996). An experienced local public health officer became ARCDA’s key media spokesperson (i.e. the first author M.G.). The selected spokesperson was experienced in using the media and was able to transfer his skills, knowledge and experience in tobacco and alcohol control to the transport issue. He was available for contact by media personnel at all times, thereby ensuring strong, professional relationships. Using some of the conventions of newsworthiness such as controversy, conflict, injustice and irony (Wallack, 1996), the spokesperson established ARCDA’s credibility through his relatively conservative appearance and by adopting a calm temperament. If the spokesperson had appeared to be a stereotypical ‘greenie’, establishing the credibility of the organization among the mainstream population may have been more difficult (Jernigan and Wright, 1996).

Gaining media access provided visibility, credibility and legitimacy to the Chips on Rail campaign. News stories often focus on the plight of victims (Wallack, 1996). Initially, ARCDA framed messages in terms of the likely impact of the massive increase in large road trains on local residents living along the road routes to be used. These messages were sufficiently controversial to engage the local print and broadcast media. Knowing the opposition’s arguments is essential for effective advocacy (Chapman, 2004). ARCDA attempted to anticipate opposition and maintain appropriate media visibility to communicate its position. As suggested by Jernigan and Wright, controversy was planned and handled carefully (Jernigan and Wright, 1996). For example, ARCDA called a public meeting about a proposed route to the Port for trucks, which would reduce travel time and costs. Because the route cut through prime residential land it generated controversy and interest by the wider community and highlighted the problem of large numbers of road trains through a tourist town. However, media messages were generally positive and proactive. Press releases were generated announcing each meeting and activity, with follow-up after meetings to provide a strong communication link with the local media.

Apart from limited advertising of some of the public meetings, ARCDA did not use any paid advertisements to gain exposure to advance their issues. Nor did ARCDA pay for any of its speakers, spokespersons or meeting facilitators.

**Evaluation**

It can often be difficult to attribute direct contribution made by advocacy to achieving a desired outcome (Wallack and Dorfman, 1996). The overall impact can be evaluated in terms of whether the proposed policy change was adopted. For media advocacy, process evaluation revolves around whether or not the issue got in the media, how the issue was framed from a policy perspective and, whether the media coverage advanced the issue.

During the Chips on Rail campaign, ARCDA sent 11 press releases and the 2 local newspapers published 25 articles (excluding letters to the editor, community service articles and announcements).
relating to the transport of woodchips to the mill and the inland freight depot. Six articles were on page one, thirteen were on page three and six were on page five. In line with ARCDA’s shift in strategy, after the initial phase of the advocacy campaign, most articles were framed in terms of a broader public policy perspective rather than a personal, victim focus. Not all published articles were the direct result of an ARCDA press release, but ARCDA’s media advocacy strategy contributed to putting the issue on the public agenda. Several radio interviews were generated during the period, plus one TV interview. ARCDA was satisfied that the media coverage advanced the issue at nearly every point during the campaign period.

Outcome

Wallack and Dorfman suggest that assessing outcomes for a media advocacy strategy involves assessing whether (i) the issue got on the public agenda; (ii) it put pressure on and mobilized key decision-makers; and (iii) the policy was enacted or change occurred (Wallack and Dorfman, 1996).

There was no formal assessment of the prominence of the issue on the public agenda. However, anecdotal reports from various community members indicated that a high level of community awareness was generated. Clearly, the local media viewed the transport of woodchips of public interest because it continued to report on the issue.

A number of documents were reviewed to assess pressure on key decision-makers. The Environmental Appraisal and Management Plan produced for the chip mill company included nine comments about discussions held with stakeholders (two local councils, four state government departments). Eight of these comments specifically mentioned the need or preference for woodchips to be transported to the port from the mill by rail. The plan also reported that community involvement had led to the project being modified to accommodate public concerns and ideas. Local government approval to build the chip mill eventually included the need for rail spur approval to be obtained before building commenced. In its ‘2020 Planning Strategy’, the City of Albany also included the issue of an inland freight depot and the need to encourage greater use of rail freight transport as an alternative to road freight (Albany City Council, 2001).

A local Member of Parliament and the Minister of Transport initiated meetings with the Alliance confirming that ARCDA had been successful in raising the issue with key decision-makers. Moreover, another government agency asked ARCDA for information used in the fact sheets in order to prepare material for its government minister. Unsolicited comments from government and other agency personnel to ARCDA members provided additional feedback about the effect of the advocacy. In addition, a timber industry group pleaded with ARCDA not to use the media but to go directly to them with issues. Together this feedback provided evidence that pressure was being experienced by key decision-makers as a result of ARCDA’s media strategy.

In terms of outcomes, a feasibility study was funded in 2000 for an inland port (for receipt of bulk export items) linked by rail to the port, as a potential solution to the problem of large numbers of road trains on public roads. The Western Australian Labor Party’s 2001 transport policy highlighted the need to ‘encourage inter-modal transfer terminals...based on the community initiative developed in Albany’ (Western Australian Labor Party, 2001). The Labor Party was elected into Parliament in 2001. The goal of providing a rail link was achieved and continues to be used by one timber company. Another company that has not yet commenced transporting woodchips intends to use rail and a third company is using road transport. The fact sheets produced by the Alliance continued to be used in media items and letters to the editor on the topic (the most recent new items with Alliance information published in mid-2005).

DISCUSSION

Although still considered the ‘Cinderella’ of public health practice (Chapman, 2004), public health advocacy is an important strategy required for creating policy and environments supportive of health. In the Chips on Rail campaign, it was used successfully to achieve ARCDA’s two main goals, i.e. the transport of woodchips by rail and an inland port feasibility study. The achievement of these two goals had the potential to reduce heavy traffic on local roads.

The case study presented highlights the importance of defining the problem, solution and
target group as well as message framing (Woodruff, 1995; Chapman, 2004), and the importance of being well informed and identifying a credible spokesperson (Jernigan and Wright, 1996). It confirmed that ‘media advocacy is most successful when linked to a strong community organizing base and a long-term strategic vision’.

As suggested by Holder and Treno public health advocacy used by well-organized community-based groups has potential to build local skills, confidence and capacity (Jernigan and Wright, 1996). It is therefore consistent with the Ottawa Charter goal of facilitating community action (WHO, 1986) and could be a key role for public health practitioners.

Prerequisites for effective public health advocacy campaigns include time for research, planning and implementation, as well as travel, telephone and postage costs (McLoughlin and Fennell, 2000). It also requires level-headed, well-informed individuals—even trained volunteers—to play roles behind the scene roles (e.g. research) and to front the media and key stakeholders. As community groups rarely have sufficient financial resources to mount public information campaigns about local issues, media advocacy can be successfully used to focus community attention on specific local problems and solutions.

Nevertheless, effective public health advocates also require skills. Chapman argues that insufficient attention is given to advocacy in undergraduate and postgraduate public health degree courses (Chapman, 2004). Public health practitioners require training in planning and implementing advocacy campaigns including working effectively with the news media. Well-trained public health advocates have the potential to work with and empower community members to facilitate community action. One of the legacies of the ARCDA campaign was that community members felt empowered by the experience and success of using a public health advocacy approach. This success will facilitate community action in future campaigns.

CONCLUSION

Public health advocacy is an important tool that may be under-utilized by public health practitioners. A public health advocacy framework can be used to work with local community groups to solve local problems with local solutions. Successful campaigns are those that identify the public health problem, the solution and the target; use credible spokespersons to work with the media and key stakeholder groups and include a wide range of well-targeted strategies designed to involve the wider community and put pressure on key stakeholder groups and decision-makers. However, like all public health tools, effective public health advocacy requires skills, and universities are encouraged to offer undergraduate and postgraduate students training to facilitate effective action.

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