



Public Health Policy Advocacy Toolkit

**An educational guide from
the APHN Public Health
Policy Committee**

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INTRODUCTION TO APHN AND THE ADVOCACY COMMITTEE

The Association of Public Health Nurses (APHN) is the professional organization for all practicing public health nurses (PHNs). APHN members serve in the governmental public health system at the local, state, federal, territorial, or tribal levels, and in community-based organizations, clinics/health systems, and academic institutions.

APHN's members are actively engaged in local, state, and national collaborative partnerships that promote and improve the public's health through excellence in public health nursing practice. Today, PHNs remain the largest professional discipline within the governmental public health workforce, and improving their capacity to assure the foundational public health capabilities within health departments is a key strategy to improving population health and a key priority within APHN.

The Public Health Policy Committee is one of the twelve committees that comprise APHN. Guided by the APHN mission to advance the practice of public health nursing to promote the public's health, the APHN Public Health Policy Committee works to:

- 1. Identify opportunities for APHN to be the voice for Public Health Nursing at the national level.**
- 2. Advise the APHN Board on important legislation related to public health nursing & the health of the public.**
- 3. Educate APHN membership on their role in advocacy & policy change.**
- 4. Advocate for policies that promote the role of the public health nurse & the health of the public.**

To join a committee, please contact OpsMgr@phnurse.org.

GOALS OF THE PUBLIC HEALTH POLICY ADVOCACY TOOLKIT

1

Provide an overview of advocacy and the policy making process.

2

Strengthen the ability of organizations and individuals to advocate for policy change using a variety of effective advocacy strategies.

3

Share tools and resources for public health nurses and other public health professionals engaging in advocacy.

4

Establish a framework for identifying policy goals, creating a plan of action, and effectively building the case for change.

"Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it's the only thing that ever has."

- Margaret Mead -

PART 1: ADVOCACY AS A TOOL AND STRATEGY

WHAT IS ADVOCACY?

Advocacy is participating in the democratic process by taking action in support of a particular issue or cause. Advocacy is the active support for policies and programs that can improve health in families and communities.

WHY IS IT IMPORTANT TO BE AN EFFECTIVE PUBLIC HEALTH ADVOCATE?

Public health nurses and other public health professionals are on the front lines of responding to public health needs related to communicable and chronic disease, natural disasters, and preventive health services. Members of the Association of Public Health Nurses (APHN) and other public health organizations are in a great position to advocate for what is known to be effective in promoting health and preventing disease.

In order to create effective public policy, it is very important for public health professionals who are knowledgeable about factors that influence health within our communities, including social determinants of health, to be involved in the policy formation process. As constituents and members of the public health community, public health professionals are often asked to provide educational information and advice to decision-makers, such as policy makers and other public representatives.

As public health professionals, our acquired knowledge and diverse experiences can provide the basis for strong and effective public health policy and the achievement of health equity. Consistent with our standards of practice, it is our obligation and ethical responsibility to incorporate the identified needs of populations in policy development and implementation. It is also our professional duty to develop the skills needed to advocate for public health and the public health workforce before decision-makers.

ADVOCACY AS A STRATEGY

Advocacy is also a strategy to influence decision-makers when drafting laws and regulations, distributing resources, and making other decisions that affect public health issues, infrastructure, and the workforce. The purpose of utilizing advocacy as a strategy is essentially about three things:

1. Creating needed policies when none exist.
2. Reforming harmful or ineffective policies.
3. Ensuring good policies are implemented and enforced.

The goal of advocacy is **policy change**.

ADVOCACY VS. LOBBYING

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

ADVOCACY

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

Advocacy includes activities such as participating in a town hall meeting or demonstration, conducting a public forum or press activity, or developing an issue brief for your state or local policymakers on a particular public health issue. These types of activities do not constitute lobbying as long as you are not urging a policymaker to take a position or action on specific legislation. Public health professionals should know their organization's expectations around advocacy and whether they are advocating with their organization or as a private citizen.

LOBBYING

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

ARE PROFESSIONAL ORGANIZATIONS LIKE APHN ALLOWED TO ADVOCATE OR LOBBY?

APHN has been granted tax-exempt status by the Internal Revenue Service (IRS), and must follow specific laws pertaining to advocacy and participation in political campaigns. Tax-exempt organizations are allowed to engage in lobbying and advocacy activities related to specific issues, legislation, and regulations but are not allowed to intervene in a political campaign for or in opposition of a certain candidate or policymaker. As an organization, APHN is involved in advocacy around improving public health. When you are participating in advocacy activities as a member or leader of APHN, it is critical to understand these advocacy and lobbying guidelines. Members of other public health organizations should learn more from their organization's leadership.

Larger organizations like the American Public Health Association (APHA) and the American Nurses Association (ANA) employ staff that are registered as lobbyists with the U.S. Senate and House of Representatives. This requires the organization to report the amounts expended on their lobbying activities. APHN does not have paid lobbyists and relies on APHN members to advocate on behalf of public health nursing and issues that affect health in our communities. Another important distinction to keep in mind is that APHN is not lobbying when it is asked to present testimony or respond to an inquiry before the federal or state legislature. Provided that the content of the testimony is for educational purposes and does not instruct legislative action, this is advocacy.

As an organization, APHN also has to be concerned with the question, “How much lobbying is our association allowed to do?” Whenever the association expends resources—staff and/or funding—on lobbying activities, we must track these expenditures for APHN’s tax records.

In addition, a not-for-profit organization may not spend more than 25 percent of its permitted lobbying total on grassroots lobbying. What is the difference between grassroots lobbying and direct lobbying? Grassroots lobbying is appealing to the general public to contact the legislature about an issue. Direct lobbying is contacting government officials or employees directly to influence legislation.

If an issue is to be decided through a ballot initiative or referendum, appeals to the public are considered direct lobbying, because the public in this instance acts as the legislature. This is helpful to nonprofits that elect to come under the 1976 law, as they may only devote 25 percent of their total lobbying expenditures to grassroots lobbying. APHN does not engage in grassroots lobbying, nor does the association have a lobbying budget.

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

Keep in mind that this is just an overview of advocacy and lobbying guidelines. The Internal Revenue Service (IRS) website provides more detailed information on lobbying guidelines for nonprofit organizations.

WHY SHOULD PROFESSIONAL ORGANIZATIONS PARTICIPATE IN ADVOCACY EFFORTS?

There are a lot of good reasons why professional organizations such as APHN should actively participate in the public policy development process. First and foremost, we can make a difference as an organization and in concert with other interested parties. Our creative thinking can help find workable solutions to public health problems. In fact, advocacy, telling our legislators what we want, is at the very heart of democracy. Policy makers need to hear our stories as public health professionals and learn from our expertise in order to address the root causes of public health issues and assist populations in need.

WHY SHOULD PUBLIC HEALTH PROFESSIONALS PARTICIPATE IN ADVOCACY EFFORTS?

For public health professionals, including public health nurses, effectively telling our stories can help build our credibility as a profession and increase visibility for public health, public health nursing, and more importantly, for the populations we serve. By sustaining a vocal and noticeable presence throughout the policy-making process, public health professionals can ensure that vital public health programs and services are protected and supported - both fiscally and politically.

If we don't advocate for the support of public health issues, including infrastructure and workforce needs, we can't expect that others will. We will cover organizational and individual advocacy more in-depth later in the toolkit.

PART 2: UNDERSTANDING THE PUBLIC POLICY PROCESS

The legislative process can sometimes seem complicated and overwhelming. This section discusses legislative procedures at the federal level, which are important to understand for advocacy purposes.

HOW DOES A BILL BECOME A LAW?

- 1 EVERY LAW STARTS WITH AN IDEA**

 That idea can come from anyone, even you! Contact your elected officials to share your idea. If they want to try to make it a law, they will write a bill.
- 2 THE BILL IS INTRODUCED**

A bill can start in either house of Congress when it's introduced by its primary sponsor, a Senator or a Representative. In the House of Representatives, bills are placed in a wooden box called "the hopper."



Here, the bill is assigned a legislative number before the Speaker of the House sends it to a committee.
- 3 THE BILL GOES TO COMMITTEE**

Representatives or Senators meet in a small group to research, talk about, and make changes to the bill. They vote to accept or reject the bill and its changes before sending it to:

the House or Senate floor for debate or to a subcommittee for further research.
- 4 CONGRESS DEBATES AND VOTES**

Members of the House or Senate can now debate the bill and propose changes or amendments before voting. If the majority vote for and pass the bill, it moves to the other house to go through a similar process of committees, debate, and voting. Both houses have to agree on the same version of the final bill before it goes to the President.



DID YOU KNOW?
The House uses an electronic voting system while the Senate typically votes by voice, saying "yay" or "nay."
- 5 PRESIDENTIAL ACTION**

When the bill reaches the President, he or she can:

✓ APPROVE and PASS
The President signs and approves the bill. The bill is law.



THE BILL IS LAW

The President can also:

 - Veto**
The President rejects the bill and returns it to Congress with the reasons for the veto. Congress can override the veto with 2/3 vote of those present in both the House and the Senate and the bill will become law.
 - Choose no action**
The President can decide to do nothing. If Congress is in session, after 10 days of no answer from the President, the bill then automatically becomes law.
 - Pocket veto**
If Congress adjourns (goes out of session) within the 10 day period after giving the President the bill, the President can choose not to sign it and the bill will not become law.

Brought to you by 

THE FEDERAL BUDGET

FEDERAL BUDGET IMPACT ON PUBLIC HEALTH

The Federal Budget matters to public health professionals because

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

THE FEDERAL BUDGET PROCESS

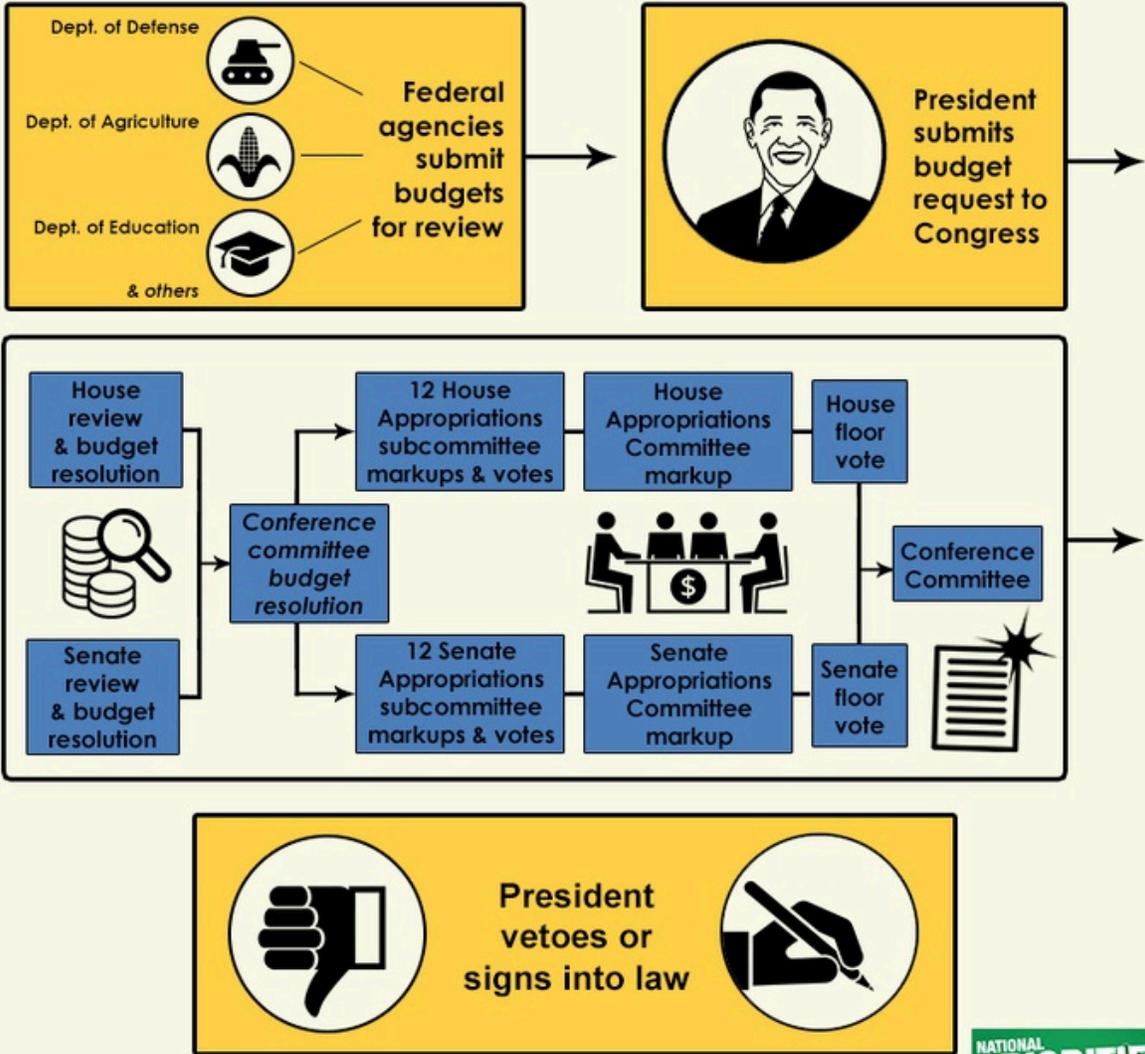
It's useful to think of the federal budget cycle in four phases.

1. Agency planning.
2. Budget review by the Office of Management and Budget. The first two phases together amount to the President's budget formulation.
3. The Congressional appropriations cycle
4. Execution of the budget by the agencies starting October 1, the beginning of the fiscal year.

It takes about two years to formulate, appropriate, and execute a single fiscal year's budget.

THE ANNUAL FEDERAL BUDGET PROCESS

The Annual Federal Budget Process



HOW A LEGISLATOR'S OFFICE WORKS

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

While a representative or senator does not usually personally see every incoming letter, they or a member of their staff has reviewed the response that was drafted in response to a particular issue. Legislators regularly receive numerous pieces of communication from their constituents, but it is important to note that individual letters, whether from an individual constituent or from a grassroots organization, carry far more weight than a form letter or postcard campaign. Before choosing an advocacy strategy, it can be helpful to contact the legislator's office to find out which method of communication is preferred.



PART 3: ORGANIZATIONAL ADVOCACY

THE DEVELOPMENT OF APHN POLICY POSITIONS

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

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

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

'Sign-ons' are joint letters sent by APHN and other agencies or partners to members of Congress, committees and other policy makers. APHN partners with other Council of Public Health Nursing Organizations (CPHNO), including APHA and ACHNE, as well as ASTHO and other ASTHO affiliates, the Nursing Community Coalition (NCC), and other organizations.

WHAT CONSTITUTES APHN POLICY?

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

Although it is best when advocacy initiatives are well planned, sometimes opportunities for advocacy arise quickly and there is little time for preparation. For example, a policy maker may ask APHN about the feasibility of a program or project and need an answer very soon.

APHN might be invited to participate in a media event, or come to an important meeting to brief policy makers. These opportunities for advocacy may not lend themselves to extensive policy research and analysis, or to our usual policy adoption process. However, they can be important opportunities for advocacy.

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



APHN'S POLICY ANALYSIS STEPS

Policy analysis provides a basis for choosing appropriate advocacy strategies.

Policy analysis includes:

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

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

APHN'S PUBLIC POLICY & ADVOCACY PROCESS

Policy/Advocacy issues come to APHN's attention through

- Members
- Partners
- Legislators
- Published Reports



Issue is referred to the APHN Public Policy Committee

- Assessment (gather data, perform environmental scan)
- Analysis of data by the committee
- Recommendation to APHN Board of Directors
 - Including advocacy method recommendation (sign-on letter, phone calls, position paper, etc.)



APHN Board of Directors may

- Agree or disagree with recommendation
- Agree or disagree with recommended advocacy method
- Refer matter back to the Public Policy Committee for further analysis



Recommendation is implemented

- Progress is tracked on implemented advocacy measures

PART 4: INDIVIDUAL ADVOCACY

BEING AN EFFECTIVE POLICY ADVOCATE

PHNs have an important role to play in educating public officials and the public about public health issues and concerns. Here are some tips about being an effective advocate:

1. **Learn about the legislative process.** Generally, the earlier APHN can get involved, the better. And remember, when it comes to getting legislation passed: timing is everything.
2. **Participate in APHN's listserv.** APHN members are kept apprised of key issues through the listserv, including relevant public information and updates.
3. **Participate in Coalitions.** APHN participates in coalitions that represent its organizational values and objectives:
 - Association of State and Territorial Health Officials
 - National Association of City and County Health Officials
 - Council of Public Health Nursing Organizations
 - Alliance of Nurses for Healthy Environments
 - Climate for Health
 - Nursing Collaborative on Climate Change and Health
 - Nurses on Boards Coalition
 - Future of Nursing Champion Nursing Council
 - The Nursing Community Coalition

Note: APHN membership/participation on coalitions may change over time; contact APHN leadership with questions about current coalition affiliation.

POLICY ADVOCACY METHODS

1. **Write Letters.** A well-written letter from a constituent is one of the most influential ways of communicating with a legislator. Contact your Senators and Representatives urging them to sponsor, vote for and act on behalf of public health programs and services. Writing to a public official does make a difference. They know that every person who writes represents many others who feel the same but do not write.
2. **Make Phone Calls.** Make telephone calls to your elected officials about pending legislation, regulations, or other priority public policy matters to describe how a change in law would affect PHN programs and constituents.
3. **Testify.** You as an individual, and APHN as a group, have the public health nursing expertise legislators need before they make related decisions about the budget, regulations, or new laws that affect public health. Find out when the appropriate committees are holding hearings on subjects related to APHN's mission and ask permission to testify in person. Include in your testimony data about the impact of your services along with public health nursing recommendations for action on the public policy issue.
4. **Make In-Person Visits to Legislators and Other Policy-Makers.** Every citizen has the right to seek a meeting with his or her legislator, councilperson or other elected representative. See "Tips for Successful Legislative Visits.
5. **Be an "Inside Advocate."** Government employees are often in the position of helping the legislative process from their official positions, and just by performing normal job duties such as providing education, can help to shape legislation or the policy making process.

Tips to employ these and additional policy advocacy methods are available in Part 5: Advocacy Tips and Tools.

INSIDE VS. OUTSIDE ADVOCACY STRATEGIES

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

"Inside" strategies may include:

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

For the most part "inside" strategies are carried out by or in coordination with advocates who work on a regular basis at the U.S. Capitol.

An effective campaign also requires “outside” strategies, aimed at educating the public and/or changing public perception around an issue. Some of these activities may include:

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

"Outside" and "inside" strategies should be coordinated to ensure that they make strategic sense. Points of coordination may include timing, targeting, specificity and continuity of messages.

COALITION BUILDING

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

Coalition building involves selecting strategic relationships. Coalition members must be informed and engaged on the issue(s), so it's important to have strong internal consensus between partners before devising policy and developing strategies for advocacy.

The advantages of joining or forming coalitions include:

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

There are also drawbacks to coalitions and coalitions may not always be the best strategy for advocacy. Sometimes, advocacy is more effective when done individually. Other times, the groups involved may not be in a position to make the compromises that are required to advocate as part of a group. Because coalitions have a consensus building function, they also take time. If public health nurses or public health nursing organizations are advocating for an issue that requires immediate action, we may not have the time to join, build, or agree on a common agenda within a larger coalition.

A coalition is effective only when its issue has merit and the coalition members are organized, informed, truly in agreement as to goals, and dedicated to communicating the importance of the effort. Coalition building calls for establishing and developing contacts that work well together. Through coalitions, we can raise greater awareness of public health issues, build on relationships with government entities, and help shape laws and policies that affect public health.

Effective coalitions may be built with organizations with varied agendas, coming together over a specific issue where there is common ground, but these agreements must be very carefully brokered with complete agreement on terms among all parties.

Key considerations in determining strategic alliances in coalition building include:

- How many potential members can we identify?
- How focused do we need to be?
- What is the level of interest, energy and expertise needed?
- With whom can we work well?
- With whom do we agree on basic agenda?
- Who has the time and resources needed to help?

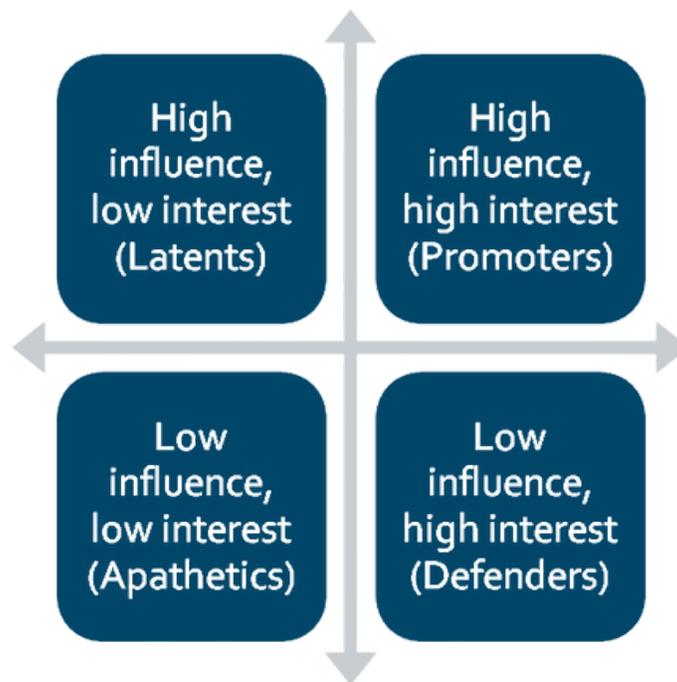
- Who needs to be at the table to be credible?
- What is the effect of excluding certain groups?
- How many potential members can we identify?
- How focused do we need to be?
- What is the level of interest, energy and expertise needed?
- With whom can we work well?
- With whom do we agree on basic agenda?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

Before contacting legislators or decision-makers, it is important to consider where they are likely to stand on an issue and how much influence they may have related to the public policy issue. The goal of contacting legislators is to persuade them to act on policy recommendations.

IDENTIFYING LEGISLATORS/ DECISION-MAKERS TO CONTACT

It may be helpful to think of legislators in terms of where they are likely to stand on the issue in order to use appropriate advocacy strategies.

The following grid is one way to analyze potential interested parties. Using this analysis process, interested parties that fall into the Promoters category are some of the most important interested parties related to your advocacy efforts as they have great interest in the topic and a high level of influence. On the other hand, people who are apathetic have little interest in the topic and minimal influence - they are likely not the most important interested parties to contact.



People interested in being defenders of an issue, may be helpful to help promote your advocacy efforts even though they have minimal influence, while you may be able to provide more information about the topic of interest to people who are latent who are not initially interested in the topic but have the potential to influence movement around the public policy issue.

PART 5: ADVOCACY TIPS AND TOOLS

WRITTEN COMMUNICATION



TIPS FOR EFFECTIVE WRITING

- Be clear about what you want (what is your ask?)
- State your concern for the issue clearly in the first paragraph
 - Be sure to include how public health practitioners, communities, and those you serve would be affected by a proposed change in the law
- Include the number if a bill is involved (House bill: (H.R. HB, AB or Senate bill: S., SB)
- Tell a story or example to make the issue real
- Include key information and use examples to support your position
 - Describe your practice and the patient population you serve (see page 36)
- Frame your message in terms of local effect
 - How does an issue affect the community's health facilities, local public health agency, nurses and other constituents of the legislator's district?
- Address only one issue in each communication and try to keep it to one page

- Know the committees on which your legislators serve and indicate in the communication if the bill is being brought before those committees
- Ask for a direct response with their position
- Timing is important
 - Try to express your opinion on a bill when it is in committee
- Use your own stationery, not hospital or agency stationery
 - Do not give the impression that you are speaking for an organization unless you are a designated spokesperson
- Sign your name with RN after it. Include any other credentials you may have, PhD, DNP, PHN, APHN-BC, etc.
- Personalize your communication
 - Legislators pay more attention to these than to ones mass-produced. Form letters and response cards should be used only if you have no other alternative for expressing your opinions
- Edit carefully
 - Invite a friend or colleague to read your letter and provide feedback
- Read your letter aloud and listen to the flow, grammar and tone
 - Revise your communication if needed
- Be sure your correct address is on the communication and envelope, if used
- Send a copy to the legislator's staff
- Keep a copy of all communication that you send

ADDRESSING WRITTEN COMMUNICATION

When addressing a legislator in a letter, use the following format depending on who you are sending the letter to.

<p>President of the United States</p> <p>The Honorable (full name) The White House Washington, DC 20500</p> <p>Dear Mr. President or Madam President:</p>	<p>Governor</p> <p>The Honorable (full name) State Capital (Capital Address)</p> <p>Dear Governor (last name):</p>
<p>Members of the U.S. Senate</p> <p>The Honorable (full name) United States Senate Washington, DC 20510</p> <p>Dear Senator (last name):</p>	<p>Members of your State Senate</p> <p>The Honorable (full name) (State) Senate (Office Address)</p> <p>Dear Senator (last name):</p>
<p>Members of the U.S. House of Representatives</p> <p>The Honorable (full name) United States House of Representatives Washington, DC 20515</p> <p>Dear Representative (last name):</p>	<p>Members of your State House of Representatives (or Delegates)</p> <p>The Honorable (full name) (State) House of Representatives (Delegates) (Office Address)</p> <p>Dear Representative or Delegate (last name):</p>





EXAMPLE OF LETTER

Date

The Honorable (Name)

Governor of (State)

Office of the Governor

Address

Dear Governor (Name):

I urge you to sign (Bill Number), known as the Tobacco 21 bill. I am urging you to sign this bill because tobacco use is the #1 cause of preventable disease and death, and 95% of smokers started smoking before the age of 21. Nicotine kills. There are no good health outcomes related to nicotine use.

(State) is seeing a recent increase in smoking, electronic cigarette use, cardiovascular disease and premature death. Smoking is responsible for at least 30% of cancer deaths. Smoking is directly responsible for \$5.49 billion in health care costs and \$5.27 billion in lost productivity.

Governor (Name), please let's join the states of (List states) in making our state a Tobacco 21 state. Please let's join the many municipalities in (State) who have passed their own Tobacco 21 ordinances. They are (List municipalities, counties, etc.)

I am a public health nurse (add all relevant background).

As a public health nurse, my "patient" is the population (specify how many people you serve and from where). I improve the health of the whole population by protecting communities from health threats, preventing diseases/reducing risk, promoting healthy living.

Sincerely,

(Your Name)

(Your Address)

(Your Email)

(Your Phone Number)



EXAMPLE OF EMAIL

Members of Congress have an e-mail address that ends in house.gov or senate.gov. Your message should use the following format to begin:

(Your name)

(Your Address)

Dear Governor (Last name),

I urge you to sign (Bill Number), known as the Tobacco 21 bill. I am urging you to sign this bill because tobacco use is the #1 cause of preventable disease and death, and 95% of smokers started smoking before the age of 21. Nicotine kills. There are no good health outcomes related to nicotine use.

(State) is seeing a recent increase in smoking, electronic cigarette use, cardiovascular disease and premature death. Smoking is responsible for at least 30% of cancer deaths. Smoking is directly responsible for \$5.49 billion in health care costs and \$5.27 billion in lost productivity.

Governor (Name), please let's join the states of (List states) in making our state a Tobacco 21 state. Please let's join the many municipalities in (State) who have passed their own Tobacco 21 ordinances. They are (List municipalities, counties, etc.)

I am a public health nurse (add all relevant background). As a public health nurse, my "patient" is the population (specify how many people you serve and from where). I improve the health of the whole population by protecting communities from health threats, preventing disease/reducing risk, and promoting healthy living.

Your name

Your address

Your phone number

Note: Although members of Congress have e-mail addresses, for some it may not a preferred means of communication. Some utilize online forms that require information signifying you are a constituent. This is one reason it is helpful to contact a legislator's office to find out preferred communication methods.



VERBAL COMMUNICATION

TIPS FOR EFFECTIVE IN-PERSON COMMUNICATION

The following are some tips when planning a visit with a legislator:

- Make an appointment in advance
 - When calling to schedule an appointment, identify yourself as a constituent and clearly state the purpose of the meeting. You can use the following script as a guide:
 - *“Hello. I am your name from your hometown. I would like to schedule an appointment to meet with Senator/Representative last name to discuss state the purpose of the meeting/topic.”*
 - Legislators have endless demands on their time. Don't be disappointed if your legislator is unavailable at the last minute, in which case you would meet with a staff member.
- *Prepare for the meeting*
 - *Do research beforehand*
 - *Know whom your legislator is, which party they belong to, and any positions they may have taken on the issue you wish to discuss*
 - *Research their voting record, position statements, ratings from special interest groups and other pertinent information.*

When you see something that is not right, not fair, not just, you have to speak up. You have to say something; you have to do something.”
-John Lewis

- Know the issue
 - Although you do not need to be an expert on every aspect of a bill, you need to know basic information about the issue that is being addressed
 - Try to anticipate the arguments against your position, and be prepared to address them
 - Be organized
 - Have brief (one or two-page) written materials available. It should state the issue, your position and requested action
 - Also, consider your elevator pitch on the issue (more to come on elevator pitches, including examples, later in this section!)
- Respectfully explain your position and inform your congressman or senator - attack the problem, not the person
 - Be concise, stick to basics, and stay focused
 - You may only be given 15-20 minutes to speak with them
- Most legislators do not have a health care background
 - Make no assumptions about their level of knowledge of public health, nursing, or health care systems/delivery
 - Use the same principles you use when educating members of your community
 - You may not be able to answer all of the legislator's questions, but offer to find the answers whenever possible
- Frame your message in terms of local effect
 - Hearing how an issue affects the community's health facilities, local public health agency, and nurses and other constituents of the legislator's district will be important to communicate

- Maintain a professional appearance and attitude
 - Dress in professional attire.
 - Maintain a courteous attitude
 - Although it is appropriate to disagree with the positions held by a legislator, having a disagreement evolve into an argument is not helpful for public policy advocacy efforts.
- When you leave the meeting, be sure the legislator knows your position and the expectations you have of them
- Finally, send any additional information that you said you would provide after the meeting.
- Follow up your visit with a thank you note to the legislator and staff you met with.
 - Restate your position, any key take aways that you want them to remember (statistics and numbers are always helpful) and requested action in the note.



IMPORTANCE OF AN ELEVATOR PITCH!

An elevator pitch is a brief, engaging summary delivered in 30-60 seconds that introduces you, your idea, or your company. It's an effective way to make a strong first impression and spark interest.

Here are key reasons why an elevator pitch is essential:

- **Strong First Impression:** It captures attention and leaves a positive impact.
- **Opens Opportunities:** Connects you to potential investors, customers, and partners.
- **Showcases Value:** Highlights your skills and what you bring to the table.
- **Facilitates Networking:** Useful for introducing yourself at events and interviews.
- **Demonstrates Confidence:** Articulating your ideas clearly shows confidence.
- **Supports Communication Strategy:** Serves as a foundation for presentations and profiles.
- **Increases Credibility:** Effectively communicates your value and importance to the listener.



An effective elevator pitch proves valuable in various scenarios where time or space for your message is limited. This includes advocating for a cause through social media or digital communication, presenting advocacy or policy change information in person, such as in a group or classroom setting, or encountering your representative on their way to a meeting or event. Let's look at some examples.

PREPARE YOUR ELEVATOR PITCH! and practice it often!

Public Health Nursing elevator pitch example:

Public health nurses work across the 50 states and the US territories to improve the health of the whole population. Our “patient” is the population we serve locally, state-wide or nationally.

We use our nursing, social, and public health science skills to deliver the 3 P’s: Protect the health of populations, Prevent disease/reduce risk, and Promote healthy living. We do this for the lasting benefits to our society.

Public Health elevator pitch example:

Public health is what we as a society do collectively to create healthy and safe places to live, learn, work and play. It is the science and art of protecting the health of populations, detecting and preventing disease/risk reduction, and promoting healthy lifestyles through organized efforts and informed choices of society, organizations, public and private communities, and individuals.

Public health responds to risks using evidence-based interventions. Public health is an invisible shield that improves and saves lives and has since 1798.

“When the world is silent, even one voice becomes powerful.”

— Malala Yousafzai



EXAMPLE OF IN-PERSON DIALOGUE

Legislator: (Standing up to shake hands)

"Good afternoon! Thank you for coming in today. Please, have a seat. What's on your mind?"

Constituent: (Sits down, holding a folder of research and statistics)

"Thank you for taking the time to meet with me. I'm here to talk about Tobacco 21, the policy raising the minimum age to purchase tobacco and vaping products to 21. As you know, tobacco use remains the leading cause of preventable death, and we believe this law can help reduce smoking rates among young people."

Legislator: (Nods, leaning forward)

"I've heard some discussions about it. The federal law already sets the age at 21, but some argue it won't really stop young people from getting these products. What's your take?"

Constituent: (Pulls out a fact sheet)

"That's a great point, and I understand the concern. However, research shows that most underage tobacco users get their products from peers who are just a few years older. When the legal age was 18, high school students could easily get cigarettes and vape products from 18- or 19-year-olds. By raising the age to 21, we disrupt that supply chain and make it harder for younger teens to access these harmful products."

Legislator: (Nods thoughtfully)

"Interesting. But don't you think if young people want to smoke or vape, they'll find a way—regardless of the law?"

Constituent: (Acknowledges the concern, then responds calmly)

"That's a valid concern, but let's look at the data. States that have implemented Tobacco 21 have seen a significant drop in youth smoking and vaping rates. In fact, after the law passed in places like California and Massachusetts, youth tobacco use declined by over 30%. It's not just about enforcement—it's about creating a cultural shift where tobacco use becomes less normalized for young people."

Legislator: (Sits back, considering the argument)

"I see. But what about small businesses? Some convenience store owners worry this will hurt their sales. Do you think that's a fair concern?"

Constituent: (Empathetic tone, but firm response)

"I completely understand that concern. But the reality is that youth tobacco sales make up a small fraction of overall revenue for retailers. And while businesses may feel a short-term impact, the long-term benefits—reduced healthcare costs, fewer smoking-related illnesses, and a healthier workforce—far outweigh that. Plus, with fewer teens getting addicted, we're actually preventing future lost productivity and healthcare expenses for the state."

Legislator: (Pauses, nods)

"You've given me a lot to think about. What do you propose I do next?"

Constituent: (Smiling, handing over a petition signed by local residents)

"We'd love for you to support state-level Tobacco 21 legislation to ensure consistent enforcement and better public health outcomes. Here's a petition signed by over 500 constituents who agree. Would you be open to sponsoring or co-sponsoring a bill on this?"

Legislator: (Looking over the petition, nodding)

"This is compelling. I'll review the data and discuss it with my colleagues. I appreciate you coming in and sharing your perspective."

Constituent: (Standing up, shaking hands again)

"Thank you for your time. I appreciate your consideration, and I hope we can work together to make this happen!"



TIPS FOR EFFECTIVE PHONE CALLS

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

When calling be sure to do the following:

- Clearly identify yourself and the issue
- If you know a staff member, ask for that person
- Briefly state what you want the legislator to do, and refer to previous correspondence you may have had with the legislator (past letter or visit)
- Ask the legislator's staff to respond to your request and to update you on the outcome of the issue
- Make a note of the name of the person you spoke with and direct your future communication to this person

Let's see what it might sound like if you, the constituent were to call your legislator's office regarding an advocacy issue...



EXAMPLE OF A PHONE CALL DIALOGUE

Legislative Aide: *"Hello, you've reached the office of Senator/Representative [Last Name]. This is [Aide's Name], how can I help you?"*

Constituent: *"Hi, my name is [Your Name], and I'm a resident of [City/District]. I'm calling to ask how [Senator/Representative Last Name] plans to vote on the upcoming Tobacco 21 bill."*

Legislative Aide: *"Thank you for reaching out. The legislator is still reviewing the bill and speaking with constituents. May I ask, are you in favor of the bill?"*

Constituent: *"Yes, I strongly support it. Raising the legal tobacco age to 21 will reduce youth smoking and vaping, which is a growing public health crisis. Studies show that most underage users get these products from peers who are just a few years older. By increasing the age, we cut off that supply chain and prevent addiction before it starts."*

Legislative Aide: *"I understand your concern. Some people worry that this law could hurt small businesses that rely on tobacco sales. What are your thoughts on that?"*

Constituent: *"I respect small businesses, but research shows that youth tobacco sales make up only a small portion of total revenue. Meanwhile, the healthcare costs of smoking-related illnesses put a huge financial burden on taxpayers. This bill is about protecting public health and saving lives in the long run."*

Legislative Aide: "That's helpful to know. I'll make sure to pass along your comments. Would you like me to note your name and address for our records?"

Constituent: "Yes, please. And I'd appreciate it if [Senator/Representative Last Name] could share their stance with me before the vote. Is there a way to follow up?"

Legislative Aide: "Absolutely. You can call back later this week, or I can take down your email so we can send you any updates."

Constituent: "Great! My email is [Your Email]. Thanks for your time—I hope the legislator will support this important bill!"

Legislative Aide: "Thank you for calling. I'll make sure your message is passed along. Have a great day!"

*Many of us didn't choose to become activists. We were activated.
~Cori Bush*

ADDRESSING FALSE HEALTH NARRATIVES

According to the Public Health Communication Collaborative (PHCC), misinformation is partially inaccurate, or misleading. Often it is spread unintentionally..

Health misinformation, disinformation and malinformation are all serious threat to public health. As Dr. Vivek H. Murthy, 19th and 21st Surgeon General of the United States proclaimed, “It can cause confusion, sow mistrust, harm people’s health, and undermine public health efforts.”



- Health **misinformation** is false, partially inaccurate, or misleading that is usually spread unintentionally.
- **Disinformation** is a claim that is false and spread intentionally with the intent of causing an emotional response.
- **Malinformation** is when accurate information is intentionally manipulated by taking information out of context or sharing incomplete information to cause harm.

ADDRESSING FALSE HEALTH NARRATIVES

A systematic approach to addressing this threat to public health includes the following steps:

1. Track the narratives in use and their contexts. Outside your circle, you can learn about such narrative threats by receiving PHCC's Trending Narrative Alerts at:

<https://publichealthcollaborative.org/alerts/>

2. Assess the risk level posed by the narrative threat. Is it low-risk, meaning its reach is limited with minimal impact on health? Is it medium-risk, indicating the potential for rapid spread and/or dissemination among specific populations? Is it high-risk, suggesting that the narrative will spread quickly and/or significantly influence health-related decisions?

3. Develop your response to the narrative threat. One option is **PREBUNKING**. This strategy is most effective against low-risk and medium-risk narrative threats. Prebunking serves as a preventive intervention that addresses knowledge gaps, emphasizes facts, and dissects the tactics employed to propagate the narrative threat.

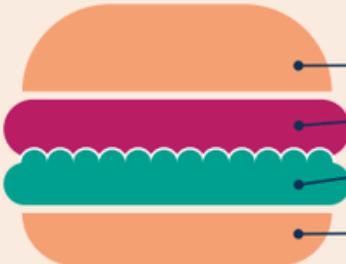
Another option is **DEBUNKING**, which directly counters false claims. Use straightforward language and clearly explain why the narrative is false. DEBUNKING can be more challenging than PREBUNKING, as false narratives often go "viral." Those who encountered the false narrative in the "viral" context may not necessarily be reached through DEBUNKING.

ADDRESSING FALSE HEALTH NARRATIVES

The Truth Sandwich Method is a simple but effective way to correct (Debunk) health-related misinformation by placing accurate information at the beginning and end of your response, while addressing the misinformation in the middle.

Truth Sandwich Method for Debunking

Break down debunking with the Truth Sandwich method:



1. Always start your Truth Sandwich with a **fact**
2. Introduce a **warning** that you are resharing a false claim
3. **Explain the misinformation**, including any tactics that helped it spread
4. Finish your Truth Sandwich with a **fact**, replacing the misinformation with correct information

FACT	Childhood vaccines are extremely safe and effective at preventing the spread of disease.
WARNING	You might have heard an old myth....
MISINFORMATION	that falsely connects vaccines and autism.
FACT	This is not true. Research shows there is no link between vaccination and autism. In fact, vaccines are the best way to keep your child safe from deadly diseases.

This approach helps people remember the facts, minimizes the risk of reinforcing the false claim, and makes your message clearer and more trustworthy.

ENGAGING IN SOCIAL MEDIA

Public health nurses play a vital role in shaping how communities understand and respond to health information. In today's digital age, misinformation, disinformation and malinformation spreads rapidly, often causing confusion or even harm. By engaging on social media-both in one-on-one conversations and in broader discussions-nurses can provide clear, accurate, and trustworthy explanations that cut through the noise. This active participation not only protects communities from harmful myths but also builds public confidence in health guidance.

Public health nurses are also encouraged to seek out ongoing education and training-many resources are freely available-to strengthen their ability to recognize, address, and prevent the spread of health-related myths.

Current Resources

<https://publichealthcollaborative.org/>

<https://www.infodemiology.com/>

<https://www.cdc.gov/ccindex/index.html>

<https://debeaumont.org/resources/communicating-about-public-health-toolkit/>

ADVOCACY TIPS TO REMEMBER

Regardless of which method you utilize to contact a legislator or decision-maker, remember the following tips:

- **You are a source of information.** Legislators have limited time, few staff members and, at times, limited time to devote to any one issue. You are someone that can fill in the information gap.
- **Maintain credibility.** Give accurate information. You will lose credibility if you do not do your research and inadvertently give false or misleading information.
- **Know your supporters.** The legislator will want to know what group, individuals, state agencies and/or other legislators are working with you and/or your organization on the issue(s) you are presenting.
- **Know your opposition.** Be prepared by understanding the opposition's viewpoint. Anticipate their arguments and provide the legislator with rebuttals and answers to those arguments.
- **Remember that you are developing a relationship.** Make the legislator aware of connections you have to the issue, even if you think it is insignificant. It could make a difference. Make more than one contact with the legislator.
- **Do not be afraid to admit you don't know.** If your legislator asks you for information you do not have or asks something you do not know the answer to, tell them you do not know the answer and offer to obtain the information for them. Provide this information in a follow-up meeting, phone call, or letter.
- **Have a specific ask.** When you want a vote, information or answers to questions, ask directly and be specific.
- **Follow-up.** Later, follow-up with an inquiry to ask if the legislator did what they said they would. Thank them if they did, or ask them for more information if they did not vote as they said they would.

TIPS FOR HEALTH ADVOCACY

APHN
ADVOCACY FOR HEALTH EQUITY

QUICK TIPS

FOR HEALTH ADVOCATES

WHEN SPEAKING WITH LEGISLATORS

Remember the 3 C's

When talking about your particular issue be sure to remember the 3 C's:

- **CLEAR**
- **CONCISE**
- **CONSISTENT**

Know your legislator

• Get to know your legislator and their platform before you ask for support

• Find the local office that you would like to visit and contact them to set up an appointment.

• Confirm your appointment beforehand & follow up with a thank you email after

Know your Issue

• Have your elevator speech ready but keep it flexible.

• Connect data with real life stories—nothing is more powerful!

• Bring some information and a card to leave for policymaker or staff to call with their questions.

Get Involved

• Get involved in with your professional society—from national ones like APHN to local and state ones focused on your issues or profession.

• Join your specialty societies for “days” at the legislature or other advocacy events they endorse.

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