
Advocating for Women Farmers' Right to Public Health Insurance

The Specific Union for Productive Farmer Women

Jordanian Civic Activists Toolkit II: Case Studies of Jordanian Advocacy Campaigns

Civil Society Capacity Building in Jordan
USAID Civic Initiatives Support Program
2013 – 2018



¹ Source: The information related to these four areas of rights are adapted from and found in Discover Human Rights: A Human Rights Approach to Social Justice Work, The Advocates for Human Rights (<http://bit.ly/1TmOp6v>). The New Tactics Method utilizes: safety and security; non-discrimination; participation; and protection-accountability. NOTE: The rights listed in these four “categories” may be placed in any area depending upon the context where the right is being violated. For example, Article 23: Right to join trade unions might be placed in “Safety and Security” rather than “Participation” where organizing or joining a union is dangerous.

² Universal Declaration of Human Rights (UDHR) Article 25 – Right to an adequate standard of living for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood circumstances beyond his control.

³ International Covenant on Economic, Social and Cultural Rights (ICESCR)– Article 12, the right of everyone to the enjoyment of the highest attainable standard of physical and mental health. (d) The creation of conditions which would assure to all medical service and medical attention in the event of sickness.

⁴ Convention on the Elimination of Discrimination against Women (CEDAW)– Article 12 (1.) States Parties shall take all appropriate measures to eliminate discrimination against women in the field of health care in order to ensure, on a basis of equality of men and women, access to health care services, including those related to family planning. (2) Notwithstanding the provisions of paragraph 1 of this article, States Parties shall ensure to women appropriate services in connection with pregnancy, confinement and the post-natal period, granting free services where necessary, as well as adequate nutrition during pregnancy and lactation.

⁵ (cont. next page)

Overview

Advocacy Issue

Women’s right to health care

Human Rights–Based Focus Area¹

Safety and Security (UDHR- Article 25² ; ICESCR – Article 12 (d)³); and CEDAW – Article 12⁴

Scope of Advocacy

Local

Advocacy Action Areas⁵

A challenge for many civil society organizations is distinguishing between being busy with activities and implementing tactical actions that strategically advance an advocacy effort. In order to help organizations better assess how to expend precious resources, the Legacy Tool offers four action areas that are needed to conduct any advocacy campaign: internal capacity building, research, mobilization and engagement with decision makers. This case provides insights into all four action areas: internal capacity building, research, mobilization and engagement with decision-makers. This case provides insights into all four action areas:

- internal capacity building
- research
- mobilization
- engagement with decision-makers

Tactical Aim

New Tactics in Human Rights has identified four primary human rights-based tactical aims: prevention, intervention, restorative and promotion. This case demonstrates:

- intervention

Campaign Period

12 July 2015 – 31 March 2017

Brief Summary

The Specific Union for Productive Farmer Women (the Union) campaign “**Advocating for Women Farmers Right to Public Health Insurance**” intervened in systemic barriers, providing women farmers’ access to their right to health care. This advocacy campaign shed light upon several critical areas of women farmers’ life experience directly impacting their right and access to public health insurance:

- **Working conditions:** Women farmers are exposed to work risks without provisions for public health and safety (e.g., heat, chemicals and pesticides, scorpion bites, and dangerous methods in transporting farmers to the work areas). Additionally, usually employers of mainly small farms do not ensure cleanliness or even available public spaces– such as access to toilets and potable water; nor do they provide meals for women farmers throughout the whole day.
- **Compensation:** Women farmers experience discrimination in their wage compensation. Women in agriculture work longer hours and for wages that fall below the minimum wage as specified in the Jordanian labor Law (220 JOD per month). For example, daily wages for the women ranged from 3 – 6 JOD per day. To put this within a health perspective, a visit to a public health center which is not always available costs a minimum of 1 JD without including the cost for medication. While a visit to a private clinic that may be more available is a minimum of 10 JOD per visit. This expense, relative to a woman’s wages, is beyond affordability.
- **Barriers to access the right:** A family earning less than 300 JOD per month has the right to free health care. However, confirmation of such eligibility is required from up to nine agencies. This creates barriers that are largely insurmountable for the people who qualify, due in part to the lack of the monetary resources needed to pursue their right. The government as well was not promoting this right or directing eligible people to it.

Achievements

The Union itself is a key achievement. It is the only all women union in agriculture production and the first of its kind in Jordan and neighboring Arab countries. All its members are female farmers and women agricultural associations from all over the Kingdom. The Union, located in Ajloun governorate, was established in 2007 in Jordan and is currently a member in The Jordanian Farmers Union⁶ and the World Farmers’ Organization⁷. In addition to addressing farming issues, the union addresses concerns of women in agriculture in general, and in this case women’s right to health.

Through the use of the New Tactics in Human Rights **Strategic Effectiveness Method** and support from Mr. Faisal Abu Sondos, a method coach, the Union learned and applied the method to this advocacy effort.

⁵The identification of the four action areas outlined in the Legacy Tool comes from the advocacy experience of Mr. Faisal Abu Sondos, former Executive Director of The Royal Conservation Society of Jordan (JREDS). Mr. Abu Sondos has been a New Tactics Method Trainer since 2010 and Lead Method Trainer since 2011. While using the New Tactics Strategic Effectiveness Method in his own organizations’ advocacy efforts and coaching other civil society organizations in using the Method he identified these four action areas to assess progress. The benefits and drawbacks regarding the use of technology in each of these advocacy action areas needs examination in relation to the appropriateness for the intended target groups and goals of an advocacy campaign.

⁶ http://www.jfu.org.jo/about_ar.html

⁷ <http://www.wfo-oma.org/members.html>

To carry out the campaign, the Union mobilized its member association, Shamaa Charity for Family Care in North Ghor who then also mobilized the women farmers themselves and four other local civil society organizations: Al-Kawthar Women Organization, North Shuna Women Organization, Sufrah Women Organization and Women's Dialogue Organization. While North Ghor was the identified geographical area, the campaign was specifically implemented in the communities of Northern Shouneh. These are particularly poor areas in North Ghor, with a population of approximately 16,000. These communities rely predominately on agricultural work for their livelihoods.

The Union successfully mobilized women farmers to avail of their right to health insurance. The Union's member associations, along with five partner organizations, coordinated, mobilized and transported 739 women farmers to complete applications and procedures for obtaining health insurance in governorate offices in Irbid. As a result, *558 of those women gained their right to free public health insurance*. This campaign reached beyond the women farmers themselves. When considering these household have an average of six dependents, the outreach and results of these women taking action, *this campaign succeeded in bringing health insurance to over 3,300 people in these communities*. Without the support of the Union, these women would not have had the resources to fulfill all the requirements to access their right to health insurance.

Advocacy Action Areas

Internal Capacity Building

The advocacy increased the strength of the Union through specific skill building of association members as well as raising awareness of the Union's work among women farmers in more communities. The Union engaged internal association members and external resources from local women's organizations directly in the Northern Shouneh area to carry out this advocacy campaign.

Research

The Union's first focus was to gain women farmers' access to public health insurance. Due to the difficulty of securing this for one specific segment of the society, the Union started their effort by conducting research to be used as a source for advocating for the issue. The research focused on legal analysis of the issue in order to understand the impact of the lack of access to public health insurance on women farmers.

The Union utilized a number of research techniques to better understand and prioritize the issues facing women farmers:

1. focus groups with 30 women farmers were conducted in two localities (Sakrah in Ajloun and Southern Shouneh in Balqa) which provided foundational information;
2. legal analysis of the Jordanian health law and regulations was conducted when health insurance emerged as a top priority issue in the focus groups; and based on the results they chose Northern Shouneh in Irbid to concentrate the campaign in one specific area. This is one of Jordan's poverty pocket areas where a majority of women are working in agriculture.
3. a brief questionnaire based on the results of the focus groups and legal analysis was distributed to 250 women farmers in northern Shouneh to identify women farmers who meet the eligibility criteria for free

health insurance as set by the cabinet instructions. An impressive 153 questionnaires were returned indicating eligibility for free health insurance.

Mobilization

This advocacy required significant mobilization that naturally gained momentum through word of mouth stories of success. At the beginning of the campaign the Union engaged members from its member organizations to take part in the discussions and planning sessions. After defining the campaign's target locality, the Union engaged 267 participants from Union member associations and other women's organizations to participate in outreach sessions conducted to inform women about the regulations, eligibility criteria, and how to apply.

A core group of three teams was made up of Union member associations and the other women's organizations in North Ghor joining the campaign: the Shamaa Charity for Family Care, Al-Kawthar Women's Organization, North Shouneh Women's Organization, Sufrah Women's Organization and the Women's Dialogue Organization. The Union set out to reach 250 women in one village in North Shouneh to apply for health insurance. But the information spread. The Union succeeded in coordinating, mobilizing and transporting 739 women to complete application procedures for obtaining health insurance.

Engaging Decision Makers

The Union engaged the Director of the Social Development Directorate, the MoSD office in Northern Shouneh. This support included accompanying the Union to provide outreach seminars to women farmers, promote the health insurance structure, help document eligibility, and assist in addressing bureaucratic barriers. Based on this experience of women farmers, the Union identified as one of the recommendations to the Ministry of Social Development is to take action to simplify the application process.

Key Lessons

Internal Capacity Building

Overcoming the challenge of limited skills and human resources

The USAID-CIS provided the Union with a variety of training opportunities that yielded an overarching strategic plan and an analysis of the Union's training needs. Capacity building trainings went beyond advocacy skills to include report writing, computer and English language skills, organizational transparency, gender analysis, and the development of the Union's organizational strategic plan. CIS staff assisted the Union's leadership in reviewing, understanding, analyzing and communicating the results of the research components that were conducted.

Twenty-four Union representatives were trained on the main concepts of advocacy and in the New Tactics method. The method provided the Union with a structured process to work according to a planned and organized system. The Union set up specific teams to carry out advocacy activities and responsibilities which channeled their time and effort. This helped staff to be productive, feel empowered and to think systematically. It was important for the Union to minimize unnecessary activities to conserve resources. The Union did not need to focus time and energy on expanding the number of stakeholders. The critical stakeholders were willing and actively engaged to reach the campaign goals. Additional stakeholders were naturally reached through the word of mouth of the women who gained their health insurance and shared this achievement with

Thinking, planning, organized, stronger. I am not worried that I will fail in my campaign. I know the goal and the steps. I have the goal so I will reach it. I have all the factors to achieve my goals. In other methods I felt lost, not sure what to do next. Advocacy is hard, but this [New Tactics Strategic Effectiveness] method made all the steps clear and organized.

- Zainab Al Momani

other women. In this way, the goal to reach 250 women actually reached far beyond this targeted number.

The Union was able to contract consultants for specific areas of expertise, but this proved challenging in the area of advocacy. While having a consultant/ researcher with a grasp of advocacy would facilitate the research process and the ensuing analysis that would eventually feed into establishing a certain position of an advocacy campaign, it is not always possible to find researchers with such specific expertise. In such cases, it becomes essential to establish a clear scope of work up front, select the most suitable candidate, and to then work closely with them throughout the entire process in order to facilitate the necessary research information and analysis that is vital for any advocacy campaign.

Research

Research informs the direction of advocacy

It is critical to learn from research conducted on an issue. Be prepared to shift direction based on new information. The focus groups confirmed for the Union that women farmers designated a priority for health insurance. The Union contracted an expert for legislative analysis to explore legal exceptions to gain health insurance for women farmers. This avenue to secure health insurance for women farmers through legal reform proved difficult to pursue. However, upon further review, the legal analysis uncovered the fact that many women farmers already had the right to free health insurance due to their level of poverty⁸. The discovery of this critical information transformed the Union's advocacy effort by focusing their campaign on this right and facilitating women farmers' access to gain their health insurance. The Union decided to focus on a specific locality to pilot the process and support women farmers to apply through this existing mechanism. They selected Northern Shouneh, and after working with the local CSO members of the Union and others, they designed a questionnaire to identify the women who meet the eligibility criteria. The results showed that 63% of the women farmers did not have health insurance.

Mobilization

Flexibility is essential in advocacy

The Union encountered distinctive challenges in the local environment. The New Tactics method contributed to the Union's flexibility by aiding their selection of the right people – those that believed in their vision, their capabilities, and to be open minded. When applying the method, they were better able to consider the unique differences and features of people in each area. The Union was able to keep an open mind and flexibility when coping with advocacy campaign changes to achieve their goal:

- willingness to change direction based on new information – this shifted the campaign from seeking a special group exemption to claiming the right to free health insurance based on income eligibility
- tactical and resource assessments – this shifted resources from a planned roundtable meeting that was no longer necessary, to channeling funds to provide transportation for women farmers that made it possible for them to actually apply and gain free health insurance in the piloted area.

With openness and flexibility these different elements resulted in the most successful outcomes.

⁸ Families who earn less than 300 JOD per month, and meet other qualifications, are entitled to receive free health insurance. Other sources of income may disqualify a person from eligibility such as having a family member who is in the army or owning a car or other assets.

Considerations for the Role of Media

It is important to consider the purpose and timing of outreach to the media. The Union was operating at full capacity during this advocacy campaign. Additional media outreach during the campaign would have been counter-productive. In fact, media outreach could have seriously hampered the Union's ability to carry out the campaign in the targeted community. The Union succeeded in reaching over 700 women in just one community without any media assistance.

At the same time, the Union recognized the significant role that media can play in educating the public about their right to health insurance. The Union decided to engage media after the successful implementation of this advocacy campaign. They assigned a media consultant to conduct outreach to the media. This has resulted in the Union's advocacy success being reported beyond their usual area, including articles written and TV interviews being broadcasted. The important decision by the Union to tell this advocacy story to the media is intended to inform not only women farmers about the Union itself, but that all families who earn less than 300 JOD per month have a right to free health insurance.

After the end of the campaign, the MoSD has recently issued a manual to facilitate the process of access to free health insurance as per the eligibility criteria. The Union will continue to work with them to ensure that the process is accessible for poor women farmers.

Engagement with Decision Makers

Understand the process of decision making

At the start of the advocacy campaign, the Union had identified the Ministry of Health as the most logical and appropriate decision-making body for gaining health insurance for women farmers. Over the course of the campaign, the Union came to understand that rather than the Ministry of Health, it was actually the Ministry of Social Development that provides the final decision and approves free health insurance. This is due to eligibility requirements specifically for families with monthly incomes of 300 JOD or less.

Identify and remove barriers

This advocacy effort reveals the often complex and difficult problem for citizens to navigate governmental institutions. In order to gain free health insurance, a family must verify a monthly income of 300 JOD per month or less requiring nine agencies in the verification process (e.g., tax, social security, licensing departments, etc.). It is important to note that some women farmers are illiterate, which adds another significant barrier to accessing one's right to health insurance. Although the Union informed women farmers in the targeted community of their right to free health insurance, very few were taking steps to apply. Women farmers found it impossible to take time off from their work, collect the requirements from all the different agencies, nor did they have financial resources for transportation.

In order for the advocacy effort to be successful, the Union had to step in to assist in removing these barriers. The Union coordinated with the Director of the Northern Shouneh office of the Ministry of Social Development (MoSD) to determine the requirements. Within a one-month period, the Union coordinated with government agencies to prepare them for dozens of women arriving for each visit, rented small buses to provide the transportation, and accompanied the women to the numerous departments in order to complete their application process. The Union documented how many women did or did not receive health insurance. For example, Jordanian women farmers married to non-Jordanians

The organization has the same objective, everyone knows what this is. People are assigned responsibilities and applying this [New Tactics Strategic Effectiveness] method helped them to set an example for others. [Our Union members] were able to recruit others because of their ability to do this. They are all feeling empowered. They have been trained, aware and looking to a better future.

– Zainab Al Momani

did not receive health insurance for their children nor their husbands. Additional advocacy is needed regarding this discrimination against Jordanian women, their children and spouses.

Without the support of the Union, very few of the women farmers would have had the resources needed to fulfill all the requirements. The Union made recommendations to the MoSD to simplify the application process to address the procedural barriers in the relevant government agencies. As mentioned, the MoSD recently released a manual to facilitate the process. However, further work will be needed to ensure that procedural barriers are addressed.

Organizational Impact of Advocacy

Case Study Framework – New Tactics Strategic Effectiveness Method

The Method contains five important steps that assist you in developing the strategy and tactics for your campaign. The Method helps you recognize your areas of strength and challenge as you develop your strategic path for advocacy – your journey of change:



1. [Identify the Problem](#) from a human rights-based perspective
2. [Create a Vision](#) using a human rights-based approach
3. [Map the Terrain](#) by viewing your context through the lens of human relationships
4. [Explore Tactics](#) to more strategically select goals and prevention, intervention, restorative or promotion tactics to address human rights issues
5. [Take Action](#) to advance advocacy action areas of building internal capacity, research, mobilization and engagement with decision makers.

The application of the Method can further be examined within your own organization through a series of reflection questions provided after each step.

We will use the Specific Union for Productive Farmer Women (Union) campaign advocating for *women farmers' right to public health insurance* to demonstrate the New Tactics in Human Rights Strategic Effectiveness Method in practice. Twenty-four Union representatives were trained on the main concepts of advocacy and in the New Tactics method. New Tactics trainer, Faisal Abu Sondos provided additional method coaching and mentoring to the Union throughout their advocacy campaign.

Step 1 – Identify the Problem

Human rights issues are often very broad and complex, yet the resources to address them are limited. It is difficult to create a plan of action to address a broad issue. It is important to narrow the focus and choose a place to begin an advocacy effort, defining the specific issue or problem as clearly as possible. Equally important is that the problem be expressed as a violation of a particular human right because there are legal obligations and mandates to respect and protect those rights. This makes an important change in the perception of the problem from one that may be solved by charity, to one that requires action based on universal mandates and legal obligations.

It is important to recognize that from the first step of identifying your problem, you are already engaging in strategy and tactics. This first step often begins with a broad definition of the problem. Then you work your way to a more tightly defined, human rights-based, and agreed-upon issue for action. This step is re-visited through on-going assessments and evaluation to better refine the problem to address the underlying sources. Using a human rights-based approach, you begin by asking, “What rights are being neglected, abused or denied in this situation?” This makes it possible for the community to move beyond what they feel is “needed.” This transforms the community’s relationship with those who want to empower the community as well as with those with the power to address the injustice. This step provides an essential foundation to know yourself, requiring everyone to think and respond differently.

The Union sought more information to “know yourself” by conducting focus groups with women farmers. A range of problems emerged rooted in unhealthy conditions under which they were forced to work and gender discrimination including (see Research):

- Unhealthy work conditions which disproportionately impact women (safety and security):
 - Lack of basic facilities (potable water, toilets, food) or if provided lack cleanliness
 - Exposure to extreme heat, chemicals and pesticides, scorpion bites
 - Unsafe methods used to transport farmers to and from work areas
- Gender discrimination:
 - agricultural wages fall below the minimum wage set by Jordanian Labor Law and women receive lower wages than men for the same work
 - working hours are longer than specified by the Jordanian Labor Law
 - women working in agriculture are not covered under the social security system which is required for gaining health insurance



This method provided a more methodological approach to my advocacy work. I can better define the process. I am now aware of a systematic methodology that follows a great way to go step by step; and develop a work plan and better way to review it. I can set the right borders for the problem. I can be greatly specified on the problem and therefore find a solution to the problem

- Zainab Al Momani

UDHR – Article 25:

1. Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and **medical** care and necessary social services and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control. 2. Motherhood and childhood are entitled to special care and assistance. All children, whether born in or out of wedlock, shall enjoy the same social protection.

Jordan is a signatory to the International Covenant on Economic, Social and Cultural Rights (ICESCR). The bold text is relevant to women farmers' health and their right to health insurance:

ICESCR – Article 12

1. The States Parties to the present Covenant recognize the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.

2. The steps to be taken by the States Parties to the present Covenant to achieve the full realization of this right shall include those necessary for:

(a) The provision for the reduction of the stillbirth-rate and of infant mortality and for the healthy development of the child;

(b) **The improvement of all aspects of environmental and industrial hygiene;**

(c) **The prevention, treatment and control of epidemic, endemic, occupational and other diseases;**

(d) **The creation of conditions which would assure to all medical service and medical attention in the event of sickness.**

Jordan is a signatory to the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW): CEDAW – Article 12 (1) States Parties shall take all appropriate measures to eliminate discrimination against women in the field of health care in order to ensure, on a basis of equality of men and women, access to health care services, including those related to family planning. (2.) Notwithstanding the provisions of Paragraph 1 of this article, States Parties shall ensure to women appropriate services in connection with pregnancy, confinement and the post-natal period, granting free services where necessary, as well as adequate nutrition during pregnancy and lactation.

A vicious cycle emerged for women farmers. Unhealthy and unsafe work conditions result in a critical need for health insurance, yet the discrimination in their work classification, low wages, and long work hours prevent them from accessing or paying for health care services.

One of the benefits of using the New Tactics method was to focus the Union's advocacy by developing a well-defined problem statement. At the beginning of their process, the Union identified a general problem statement: *female farmers don't have health insurance.*

A reflection on this problem statement provides an opportunity' to examine the development of the boundaries of the Union's advocacy campaign. It is critical to lay a solid foundation for advocacy on the human rights based approach. The human rights foundation made it possible for the Union to focus their time, energy and resources to make a real impact on the lives of those most marginalized.

- “who” has the problem: although the lack of health insurance may be a concern for all women farmers in Jordan, the Union narrowed their campaign focus to women farmers in North Ghor.
- “what” is the problem: when the problem is based on the violation or denial of one's universal rights this ensures that the focus remains on those most vulnerable and marginalized. Women farmers face discriminatory practices in the agricultural sector which directly relate to **Article 25** of the Universal Declaration of Human Rights regarding their **right to a standard of living adequate for the health and well-being of [her]self and [her] family.** (See text of Article 25 of the Universal Declaration of Human Rights, and **Article 12** of the International Covenant on Economic, Social and Cultural Rights (CESCR).

It is important to note that the Union could have chosen to address the issue of raising women farmers' wages. However, the Union responded directly to the women farmers' concern regarding their lack of health insurance.

Human rights based problem statement: **Due to an inadequate standard of living, women farmers in North Ghor are denied their right to health insurance.**

Human Rights-Based Focus Area⁸

The human rights framework provides an essential operating guide based on recognized international principles and standards for advocacy efforts. When applying human rights for advocacy efforts, it can be helpful to view these rights and responsibilities through four focus areas: safety and security; non-discrimination; participation; and **protection-accountability.** The Universal Declaration of Human Rights (UDHR) provides the basis for subsequent international agreements.

This case provides an excellent example for illustrating how human rights are indivisible and interconnected. We will examine the Union's advocacy campaign as it relates to the *Safety and Security* focus area. The benefits of focusing on this area do not diminish the importance of the other areas at work in this case. While core principles of human rights are being violated in this case, such as systematic discrimination faced by women farmers, the Union responded to the priority for health insurance stressed by women farmers themselves. A focus on the safety and security area allows for an examination of how the right to health is a primary building block for one's ability to access and enjoy other rights. Health is an integral component of one's right to an adequate standard of living.

⁸ (Cont. on next page)

Advocacy Action Areas

Internal Capacity Building

In the problem identification phase, an internal capacity challenge emerged. The Union leadership had difficulty understanding and interpreting the extensive legal research it had commissioned. They sought to identify the legal avenues for women farmers to access their right to health insurance. Contracting legal expertise for such research is essential, however, it is not uncommon for such research to be set aside or not applied to advocacy campaigns due to the complexity of the information. There was a communication challenge. The Union had difficulty explaining their advocacy goals for the expert to best understand what research was needed. In addition, the legal expert was unable to communicate the results or interpret the information in a way that could be understood and used to inform the Union’s campaign. For example, the expert had difficulty pinpointing gaps as well as translating challenges on the ground and relevant perspectives. In this case, the Union was very fortunate that the legal expert shared his report in the presence of another consultant who grasped the importance of the low-income threshold for health insurance eligibility which transformed the campaign.

Research

Research at the problem identification phase is critical. The Triangle Analysis⁹ can be very useful to guide research to pinpoint whether the problem lies with one, a combination or all three of the following areas:

- **Content:** the written laws, policies, and budget priorities or the absence of these.
- **Structure:** the state and non-state mechanisms for implementing a law or policy and allocation of funds. Such structures include the police, courts, hospitals, credit unions, ministries, and health and social programs, etc.
- **Culture:** the values and behavior that shape how people deal with and understand issues, the “unwritten laws” of behavioral expectations. These values and behavior are influenced by such things as gender, class, custom, religion, ethnicity, and age.

The discovery from the legal research directly informed the Union’s campaign to advocate for **women farmers’ right to public health insurance**. The components of this research are outlined below.

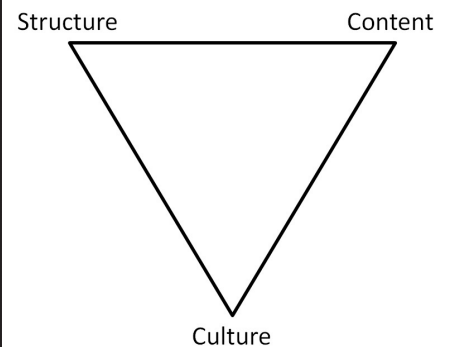
Research – Content (Legal Review)

Social Security System

Social security systems are meant to provide a safety net. For Jordanians, the total contribution is designated at 14.5% of one’s wages. Women are eligible to take social security at age 55 and men at age 60.

Women farmers face discrimination related to the law as most are not considered part of the agricultural classifications eligible for participation in the social security system. These classifications are limited to:

- Agricultural engineers
- Working with bees (honey)



⁸ Source: The information related to these four areas of rights are adapted from and found in **Discover Human Rights: A Human Rights Approach to Social Justice Work, The Advocates for Human Rights** (<http://bit.ly/1TmOp6e>). The New Tactics Method utilizes: safety and security; non-discrimination; participation; and protection-accountability. NOTE: The rights listed in these four “categories” may be placed in any area depending upon the context where the right is being violated. For example, Article 23: Right to join trade unions might be placed in “Safety and Security” rather than “Participation” where organizing or joining a union is dangerous.

⁹ “Triangle Analysis” originates from Margaret Schuler in *Empowerment and the Law*, 1986. The text is adapted from Lisa VeneKlassen and Valerie Miller, **A New Weave of Power, People, and Politics: The Action Guide for Advocacy and Citizen Participation**, 2002.

Research – Structure

Social Safety System

The structures for implementing the social security system impact people differently. As an employee, the employer pays about 65% of the social security system fee and the employee pays about 35% of the fee, with the payment automatically taken from the paycheck. For Jordanians without employers, their participation in the system can be a challenge. The Jordanian law provides an open system, meaning anyone can pay their share without an employer contribution. For example, if someone is working outside the country, such as those who work in the Gulf, they can choose to pay the entire contribution themselves which is in this case 16.75% of the wage subjected to social security. This open system depends upon a person's capacity to know, understand, and pay the full contribution.

The Union's legal consultant provided information on the structure of the law which is helpful in understanding the underlying discrimination faced by women in the agriculture sector. For example, when farm laborers work without a contract, they work on a per day basis for payment. There is no "employer" providing a payment share into the social security system. For the employer to enroll part time or per day workers in the social security, the work relationships should be organized or systematic (for example to work for a specific number of hours per month). Women farmers working relationships are usually not systematic meaning that they would not be enrolled in social security. Farmers do not know they need to be enrolled in the social security system so they can be eligible for health insurance in case this condition of the current law is enforced. In addition, they would need to pay the whole share. As women farm laborers making 3 to 6 JOD per day, a daily wage that is even less than their male counterparts, this is not viable. For such low wage workers, paying into the system is beyond their capacity as they don't make enough for daily living expenses as it is.

Structural barriers for determining income eligibility of women farmers

Over the course of the campaign, the challenges of overcoming structural barriers to gain health insurance became evident. While the law provides for those with inadequate standards of living to gain their right to health insurance, the process to determine their income eligibility is exceedingly difficult. The process requires a person to prove their income eligibility by getting officially stamped documents from as many as nine different agencies. Even though women farmers became aware that they could gain free health insurance, they could not overcome the structural barriers of these procedures in order to access that insurance. Women farmers, with little or no literacy, could not fill out the necessary forms. Even those with education required assistance to understand the verification processes needed from different government agencies, such as proof from the tax office of an applicant's base income.

The content and structure review conducted by the Union mentioned a provision in the law that became critical for the campaign. The provision states that families with incomes at or below 300 JOD per month are eligible for free health insurance. This information provided the direct legal foundation for the Union's advocacy campaign for marginalized women farmers in Northern Shouneh to access their right to health insurance. This provision directly addresses the Union's problem statement: ***due to an inadequate standard of living women farmers have been denied their right to health insurance.***

Research – Culture

The Union utilized a gender lens to design research methods that were appropriate for their target group – women farmers. The Union utilized two types of research to gain gender responsive information from women farmers: **focus groups and questionnaires**.

The Union conducted two separate **focus groups** with a total of 30 women farmers participating, one in Ajloun and one in Balqa. These focus groups gave women farmers the opportunity to voice their many concerns. The focus groups were made up only of women. This helped the women overcome and address cultural barriers for expressing their concerns. At the same time, this process made it possible for the Union to identify priority concerns emphasized by the participants – such as the lack of health insurance.

The Union developed a brief **questionnaire** based on the results of the focus groups as well as the legal research. The purpose of the questionnaire was to validate the priority of health insurance and the potential income eligibility. The Union distributed 250 questionnaires in Northern Shouneh. A team from Shamaa Charity for Family Care, the Union's local partner, conducted home visits and collected the results. The questionnaire was intentionally conducted through face-to-face interviews to overcome the cultural legacy of low educational attainment among women farmers. The interview process yielded an impressive 153 returned questionnaires. The Union then compiled all the questionnaire results which confirmed that 63% of women farmers did not have health insurance. In addition, basic income questions provided evidence to the Union that a significant number of women farmers and their families in these communities were potentially income eligible for free health insurance.

Reflection for Your Organization:

Step 1 – Identify the Problem

Utilizing these human rights-based focus areas for outreach and message development can help to mobilize different constituencies to participate in your advocacy campaign. Advocacy efforts do not necessarily take place within a set, linear time frame. Take time to reflect on the following:

Know yourself

Explore the [human rights-based focus areas](#) to assist your own problem analysis and development of a human rights-based statement.

- How can your advocacy benefit from a rights-based problem statement?
- How can this example inform your exploration of the human rights advocacy focus areas?
- What kinds of research will help you to better understand your problem?
 - How can research help you to identify the differences in how various marginalized groups experience the problem (e.g., girls, women, people with disabilities, specific minority groups, youth, elderly, etc.)?
- What did you learn about yourself and your organization through the in-depth exploration of the identified problem?

TIPS: Identifying your problem statement

- Check your statement to ensure it is human rights-based to provide others with an understanding of the right that is being violated, abused or denied.
 - What international human rights articles or conventions can you identify that are important for advocating on your issue?
- Provide a brief context as to why the problem exists by using the advocacy focus areas to discuss the unique aspects of your context.
 - How can you connect the right to daily life experience to offer a basis for engagement of stakeholders and accountability from decision makers?
 - How does your target group experience the problem? How do other marginalized groups experience the problem (e.g., girls, women, people with disabilities, specific minority groups, etc.)?
 - What national laws or policies can you find that are important to know or for advocating on your issue?

Step 2 – Create a Vision

It is essential to have a vision of what you want to accomplish. If you do not know where you want to go, it is difficult to get there and hard to know if you have arrived. Communicating a clear human rights-based vision can inspire and motivate others to join you. Your vision plays an integral part in the development of your strategy and tactics. A vision provides a compass for making decisions when advocacy conditions shift and change. You must **know yourself** and the future reality you want to create.

As the Union worked to develop a vision, they sought to better understand the government’s role in providing health insurance. In the early stages of their campaign, the Union believed that the Ministry of Health was the primary agency accountable for health insurance. In order to inform their vision, they looked to the Ministry of Health’s vision: Providing quality medical service to all Jordanians.

For a broader view, they looked to the Jordan Poverty Reduction Strategy, 2013–2020¹⁰, which stated: *By 2020, all Jordanians achieve an improved state of well-being; enjoy quality basic services, higher living standards, and gainful employment; and experience inclusion, equality and resilience.*

The Union decided upon a vision, **all Jordanians enjoy their right to health care**, that embodies the human rights based approach and helps the government to fulfill its own strategy.

Reflection for Your Organization

Step 2 – Create a Vision

A vision can evolve over time. Take time to reflect on the following:

Know yourself

Discuss and develop your own vision statement.

- How can your vision statement be utilized for your advocacy (e.g., unifying your staff, outreach to allies, message development, engagement with stakeholders and decision-makers)?

TIPS: Creating your vision statement

- Check your vision statement to ensure it is **human rights-based** to unite others around the right you are seeking to be fulfilled.



Due to an inadequate standard of living, women farmers in North Ghor are denied their right to health insurance.

¹⁰ Jordan Poverty Reduction Strategy, 2013–2020, page 17, <http://www.jo.undp.org/content/dam/jordan/docs/Poverty/Jordanpovertyreductionstrategy.pdf>

- Frame your vision as a **positive statement** that addresses the identified problem.
- Make your vision statement **broad** enough to guide the current campaign and **provide direction** for your future advocacy efforts.
 - Can others outside of your organization or network see themselves in your vision for the future?
 - How have you involved and actively engaged those who are marginalized in creating the vision (e.g., girls, women, people with disabilities, specific minority groups, etc.)?
 - Does your vision exclude others? If so, this is not a human rights-based vision.
- Review your vision on a regular basis to evaluate and **embrace broader visions** to guide greater gains.

Step 3 – Map the Terrain

It is critical to understand the social, cultural, political, and economic context in which advocacy takes place. Human rights-based advocacy is about changing people’s attitudes and behaviors as well as the policies and institutions that are formed and maintained by people. New Tactics in Human Rights has developed and adapted specific tools to help guide you through this process of identifying people, groups, organizations and institutions working for and against change in your situation. Whether your work is at the local, national or international level, [mapping the terrain](#) of relationships allows you to identify more opportunities for taking action. This step requires an exploration of all three sources of knowledge: **know yourself, know your opponent, and know the terrain.**

No matter what human rights issue we are seeking to address, decisions about the issue are always made by people. The more we can learn, understand and know about the people involved, the more successful we will be in addressing issues of concern to us and our community. As we examine this case, consider the ways in which you have worked to identify the people, organizations, institutions and relationships involved in your own organization's issues. The information you have gathered can be organized using the tactical map and spectrum of allies tools to enhance the exploration, identification of appropriate targets, and selecting of tactics (see Step 4 – Exploring Tactics).

As we examine the Union’s campaign for **Women Farmers’ Right to Public Health Insurance**, we will explore how their research and stakeholder identification process can be illustrated by the tactical map and spectrum of allies tools. These tools can be used and applied at any point in your campaign to assist you in your strategic and tactical analysis.

Using the Tactical Map Tool

When using the tactical map, it is crucial to determine a face-to-face “central relationship” between two individual people. These two people represent the human rights problem you are seeking to address. Why is this important? Human rights violations, at the core, are personal experiences. Therefore, the resolution of those violations must also be personal. Human rights-based advocacy efforts seek to change the problem for those who are experiencing the violation and hold accountable those who are perpetrating or making the violation possible through their actions or inaction.

The benefits to using the tactical map tool for exploring your advocacy “terrain” is that we often miss the wide array of human relationships that are connected to, involved with, invested in and surrounding an issue.

This case study provides an opportunity to highlight how the terrain of the Union’s advocacy campaign can be illustrated through the tactical map tool. When using the tactical map tool, it is important to identify a face-to-face relationship that best represents the human rights problem identified. Review

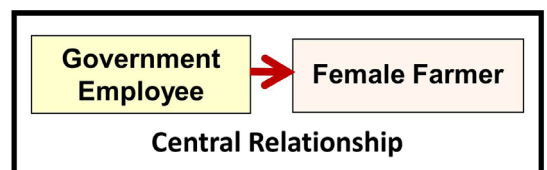


Figure above: An example of the central relationship of the Tactical Map tool.

Figure Below: The tactical map serves to provide a “birds-eye” view to illustrate the range of organizations engaged in an issue. It is important to note that there were many more organizations involved in the process than are indicated on this tactical map. For example, the tactical map highlights five specific women’s organizations identified in the community. However, it is important to recognize that the Union has a total of 17 associations with 5,000 women farmers. Not all the Union member associations or the women farmers themselves were involved in this campaign. North Ghor was the identified geographical area. As the campaign developed, it was implemented in the specific community of Northern Shouneh.

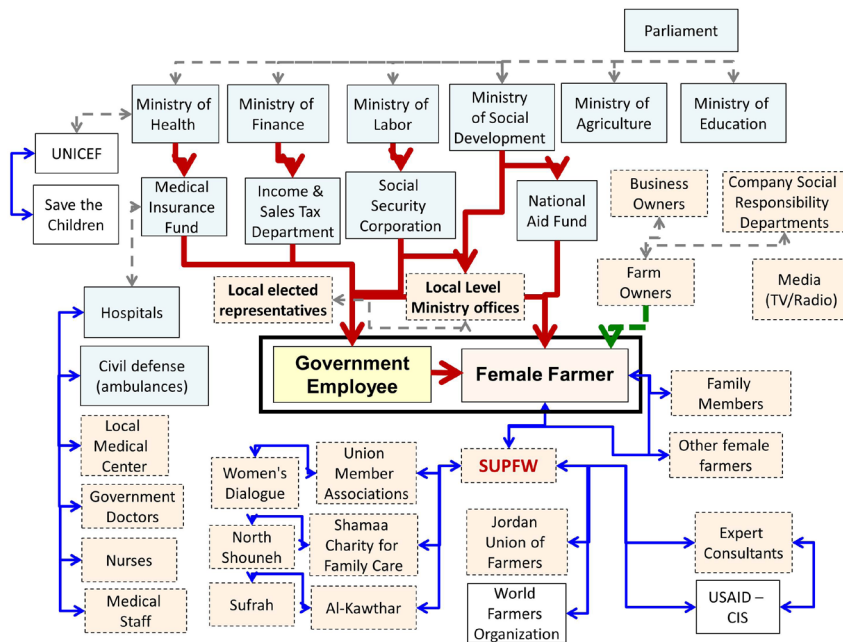
the Union’s problem statement in order to determine a central relationship: **Due to an inadequate standard of living, women farmers in North Ghor are denied their right to health insurance.**

Whose right is being violated or denied? In this case for example, a **female farmer** who lives in North Ghor/Northern Shouneh.

Who is the person violating the person’s right or standing in the way of the right being fulfilled? In this case for example, a **Government Employee**, at the local level office in a face-to-face encounter who must provide the authorization required for that female farmer to gain her right to health insurance.

Perhaps even more complex in this human rights situation, is that a female farmer must encounter at the face-to-face level nine employees in different agencies in order to validate her information before gaining health insurance.

This kind of situation helps to highlight the importance of identifying the face-to-face relationship at the center of the tactical map. In most cases, you want to identify a person by name experiencing the violation and interested to change the problem. However, in situations where a person could be endangered by being identified, it is not recommended to reveal their true name. The general “female farmer” and “government employee” is sufficient to understand the central relationship of the problem. The Union’s tactical map example provides the central relationship along with identified relationships at the local community level, government institutions at the national level, and international level relationships.



Tactical map key:

- Light orange box with dotted line = civil society entities (people, groups, organizations, etc.)
- Light blue with gray solid line = government bodies
- White box with gray solid line = funders and international entities
- Relationship lines:
 - Power relationship: One directional solid red arrow
 - Mutual benefit relationship: Bi-directional solid blue arrow
 - Conflict relationship: Bi-directional dotted yellow arrow
 - Relationship unclear / Research needed: Bi-directional dotted gray arrow

It is essential to include where your own organization is located on the map – the Union is identified as SUPFW in red. If you cannot put yourself or your own organization on the map, then reconsider your involvement in the issue.

Every person, group, association, institution, governmental body, etc., is a possible point for taking action. It is not possible, however, for an organization to focus on each and every point on the tactical map. Additional research is necessary at this stage to be strategic in your use of limited resources to select your points of action wisely.

For example, when identifying government institutions, it will be especially important to do additional research to identify the actual people within the institution. People doing the work inside the institution make the decisions, not the “institution”.

At the time of the initial tactical mapping, the Union was focused on the Ministry of Health as the primary government agency required for gaining health insurance. In order to gain an understanding of the health insurance process, a visit was made to the Medical Insurance Fund. A woman government employee in charge of approving benefits through the Fund was very helpful. Although she could not give a formal letter, she provided information regarding the decision

from the Cabinet and Prime Minister about the regulation and who is eligible. As a result, she provided critical information for the Union's campaign. The Ministry of Social Development provides the final approval based on income eligibility to gain health insurance. This approval is gained only after going through numerous procedures. This identified a new primary target for taking action for the advocacy campaign on the tactical map – moving from the Ministry of Health to the Ministry of Social Development.

TIPS for using the tactical map

Consider when finding the “central relationship”:

- Whose rights are being violated, abused, denied?
- Who is violating, abusing or denying another person's right in this situation?
- Is this truly a face-to-face relationship?

NOTE: *There is no face-to-face relationship between a person and an institution.*

- Is there a face-to-face relationship in this problem that is being overlooked?

Using the Spectrum of Allies Tool

The “[Spectrum of Allies](#)” tool heightens our awareness and understanding of the people, groups, or institutions that span the full range of possible engagement with our specific advocacy campaign. Those who we believe would support our efforts may actually have perspectives and goals that would counter or oppose our efforts. At the same time, those we initially think might be passive or active opponents may, in fact, support our rights-based advocacy efforts. A key point to remember is that individual people make up groups, associations and institutions.

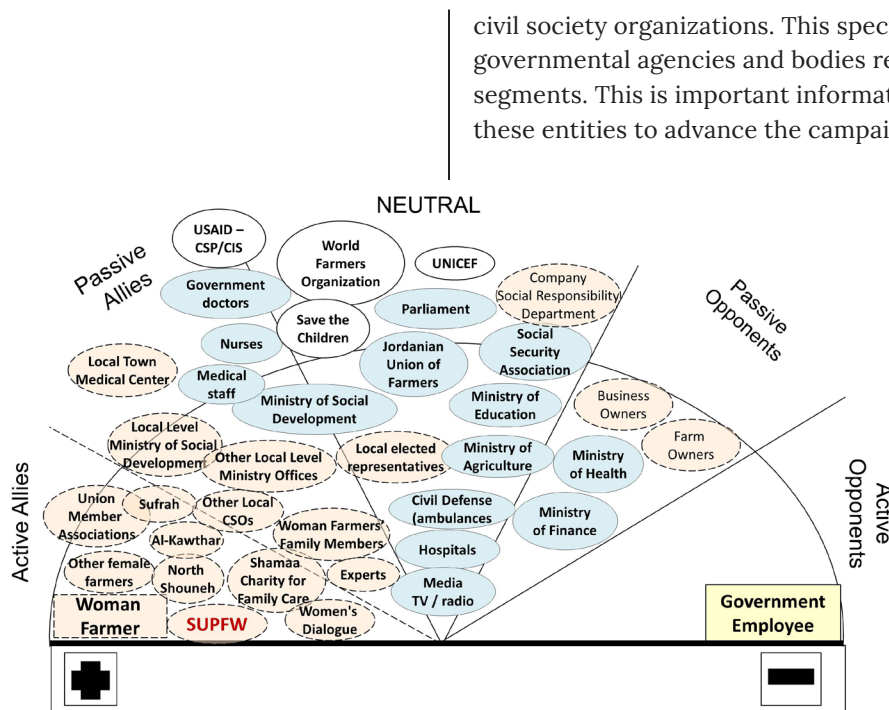
Even when a particular group or institution takes a stance against us, there may still be individuals within the group or institution that will support our advocacy effort.

Internal Capacity Building

The Union effectively used the spectrum of allies tool to identify and assess active allies and passive allies with potential for becoming actively involved in the campaign. The tool also helped identify governmental agencies in a neutral position that also had local level offices where decision makers could be directly engaged. A benefit of using the spectrum of allies tool highlighted for the Union that they had no active opponents for this particular campaign. This aided the Union in continually assessing its internal capacity to engage and respond to decision makers. At the same time, this case helps to understand why the “government employee” remains as an “active opponent” on the spectrum of allies. This person represents the actual person who has the power to deny the woman farmer her right to health insurance. In this case, if by no fault of her own – illiteracy, lack of income, or her ability to present the required documents to claim her right to health insurance, the “government employee” could still deny her right.

Mobilization

The spectrum tool provides insights into potential organizations and external resources that can be mobilized as allies. The Union's spectrum shows a significant number of active allies from their association members and other



civil society organizations. This spectrum has an unusually large number of governmental agencies and bodies represented in the passive ally and neutral segments. This is important information when selecting tactics for mobilizing these entities to advance the campaign. Initially, the Union mobilized their active

allies in their research efforts to conduct focus groups. The Union was very successful in re-engaging their active allies and the support from governmental agencies in the passive allies position to facilitate women farmers in gaining their health insurance (see Steps 4 and 5).

Reflection for Your Organization

Step 3 – Map the Terrain

Mapping the terrain provides information and insights for mobilizing allies and building coalitions. The tactical map and spectrum of allies tools provide critical support when exploring and [selecting tactics](#) to advance your advocacy effort.

Figure Above: The "spectrum" is a tool to continually revise as you conduct research, analyze new information and carry out tactics to engage and move different targets towards the active ally segment of the spectrum.

It is vital to any campaign to identify people, organizations and institutions that can provide on-going support and assistance for planning, outreach, and mobilization.

Take time to reflect on the following:

Know Yourself

Consider how you can use the New Tactics tools to more thoroughly “map the terrain” and understand your context related to the identified problem:

- Have both women and men participated in the process of mapping the terrain? If not, do the results of your tactical map reflect/include gender related aspects such as differences in relational contacts, power relations, and decision making?
- Who are your allies – those who support your position or efforts on an issue; and those who will **actively** work together with you?
- What kind of **mobilization** is needed to engage your network of people, groups, and organizations to better understand the problem you've identified within your context?

Know your opponents / Know the Terrain

- Who are your opponents – those who do not support your position or efforts on an issue; and those who will actively work against you?
- Who do you need to mobilize in this phase of your advocacy to better understand the terrain (e.g., people with specific areas of expertise)?

TIPS: Mapping your terrain

- Put PEOPLE at the center:
 - Whose right is being violated, abused or denied?

- Who is violating, abusing or denying another person's right in this situation?
- What kind of research is needed to help you determine:
 - Who else is involved, interested or invested in this issue?
 - Who carries responsibilities for addressing this issue?
 - Who are potential allies and opponents regarding this issue?



Step 4 – Explore Tactics

Tactics are the actions you take to move toward your goal and advance your journey of change. Used well, tactics can build influence and change the terrain of human relationships. There are many tactics available to human rights advocates, and more are being developed every day! The more [tactics you study and learn](#), the more you can adapt tactic ideas to meet your needs and keep your opponent off balance. This step explores and compiles information from all three sources of knowledge: **know yourself, know your opponent, and know the terrain**. This step will highlight the following areas of strategic and tactical development:

- Human rights-based tactical aims
- Strategic goals for advancing your **journey of change**
- Advocacy Action Areas: internal capacity building, research, mobilization, and engaging with decision makers
- Technology: challenges and benefits

Human Rights-Based Tactical Aims

Most organizations seeking to advance human rights can only accommodate one or two primary tactical aims within their institutional frameworks. This is due to the time they take to learn, the investment in staffing and the difficulties of raising funds, and the measurement of performance and effectiveness. Having a clear understanding of your tactical aim helps you to more effectively select the tactics to reach your goals in addressing your identified problem. New Tactics in Human Rights has identified four primary human rights-based tactical aims: **prevention, intervention, restorative, and promotion**.

Ask yourself – Is your primary aim to:

- **prevent** an imminent abuse from taking place now and in the future?
- **intervene** in situations of long standing denial or abuse of human rights for individuals and communities that are marginalized or excluded?
- **restore** and rebuild the lives of victims and communities after abuse – to help them heal, seek justice, reconciliation, or redress?
- **promote** human rights by building respectful and engaged communities or policies and institutions where human rights are understood, strengthened, and respected?

As we examine the journey of change in this case, study the goals and the tactics selected to move the advocacy forward. In addition, as we explore each action area and the tactics selected, consider how your own tactics support and interconnect to advance your own campaigns. This will assist you in being more

strategic and tactically effective in your advocacy efforts.

Developing the Journey of Change

Return to your problem statement for guidance when developing specific goals to assess progress on your journey of change toward your vision.

Problem statement: **Due to an inadequate standard of living, women farmers in North Ghor are denied their right to health insurance.**

Vision statement: **All Jordanians enjoy their right to health care.**

It was at this point when the scope of the advocacy became a critical discussion. At the beginning of the process, the Union felt they needed to cover the entire country of Jordan. In steps one to three of the method, the Union narrowed its focus to the area of North Ghor. With the assistance of New Tactics mentor, Faisal Abu Sondos, the Union made the decision to further concentrate its energy and resources specifically on the North Shouneh community. There were two significant reasons for this decision: this community is considered one of the highest poverty areas of Jordan and almost everyone in the community works in agriculture.

There were also organizational reasons for this choice. Northern Shouneh is an area where the Union has a good, solid representation through its local community based organization member. The member also had connections in place with the local director of the Ministry for Social Development in Northern Shouneh.

The combination of these points provided guidance and an excellent opportunity to test their ability to reach a specific advocacy goal on their Journey of Change. The Union set its strategic direction with the overall campaign goal that **all women farmers in North Ghor get medical insurance** with the following milestone goals:

Goal #1:

250 women farmers in North Shouneh gain health insurance by March 2017

Goal #2:

Advocate with the Ministry of Social Development to simplify the health insurance application process

These goals provide an opportunity to reflect on the tactical aim for addressing the human rights violation outlined in the Union's problem statement. Examining the tactical aim helps to ensure that the targets and tactics selected to address the problem will reach the intended purpose. The Union focused on intervention as the tactical aim for this advocacy effort. The intended purpose of the advocacy is to intervene in the long-standing denial of women farmers' right to free health insurance based on their lack of an adequate income.

It is important that the immediate goal is "SMART" to ensure an ability to evaluate concrete progress toward the goal.

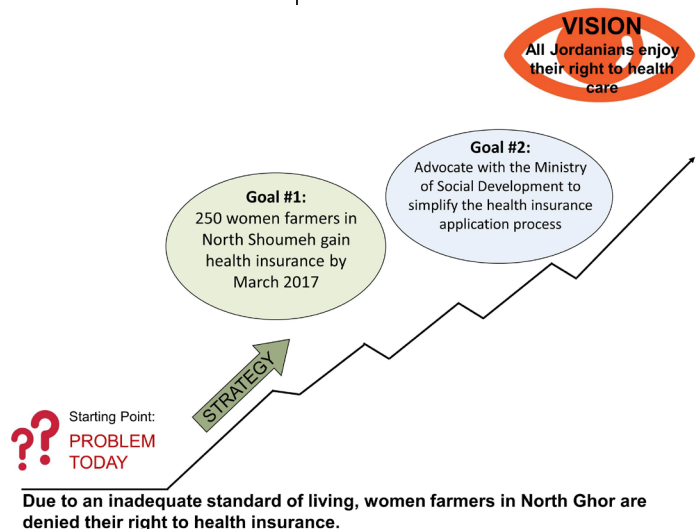


Figure above: This journey of change visual provides an overview of the Union's immediate and longer-term goals.

Specific: women farmers in North Shouneh will gain health insurance.

Measurable: a total of 250 women will gain health insurance

Attainable: The Union determined that it was realistic for 250 women to gain insurance within the time period

Relevant: the goal addresses the stated problem (women farmers are denied their right to health insurance) and the purpose of the advocacy (to intervene by assisting women farmers to gain their right to health insurance)

Time bound: by March 2017 women farmers will gain their right to health insurance.

It is important to note that the Union discussed a number of alternative ways in which women farmers might get medical care.

- Mobilize farm owners to have a contract for women farm workers that includes medical services, and if she must get medical care, she does not lose her daily wage.
- Develop a fund within the Union for emergency medical care needs for women. Part of this fund could be raised from the women themselves, their member organizations and through donor contributions.
- Through the Union, coordinate with international organizations providing mobile medical care units to provide care to women farmers.

Any of these options would have significantly changed the advocacy campaign. Following a human rights based approach directly impacted and guided the Union's campaign goals. When the Union learned of the right to free health insurance for people with inadequate standards of living, that knowledge provided the clear advocacy path.

TIPS: Creating your “journey of change”

Know yourself

- Consider how can you ensure participation of your target group in setting desired outcomes and results.
- Identify goals or milestones to create your “journey of change.” These goals need to be “SMART” – specific, measurable, achievable, relevant and time bound so you can monitor your progress, evaluate your successes, and know what remains to be done.
- Consider making specific goals that relate to each of the action areas: internal capacity building, research, mobilization and engagement with decision makers.

Advocacy Action Areas

In carrying out advocacy, these action areas (internal capacity building, research, mobilization and engaging decision makers) provide guidance for developing your milestones. It is important to understand that each action area supports the others and helps you monitor your progress and evaluate both your shortcomings and successes (See Step 5). Developing goals for each action area can provide timing priorities to ensure different aspects of the campaign are working together.

The tactical map provides a way to visually identify the targets for each action area. The spectrum of allies highlights where these targets are positioned on

the spectrum. The positions based from active allies to active opponents provide critical insights for tactic selection for reaching and succeeding with the identified targets. The most effective tactics are interconnected and mutually support the advancement of other tactics. Consider how to engage your target groups and how your own tactics are interconnected in order to advance your own campaign. We will use the tactical map and spectrum of allies tool to illustrate the targets of the advocacy action areas selected in this case. As we examine the action areas and the tactics selected, consider how your own tactics are interconnected in order to advance your own campaign.

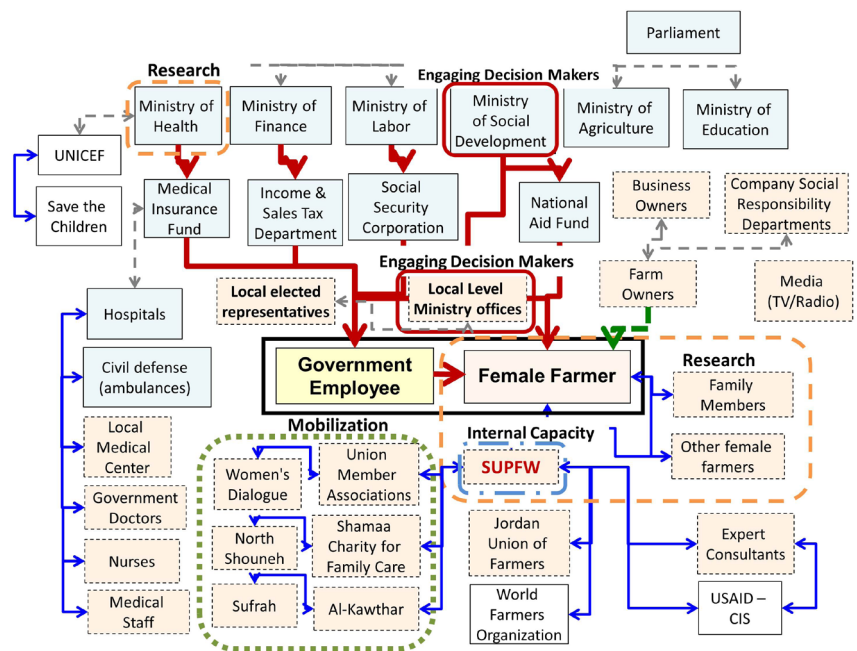


Figure above: This tactical map highlights the location of the tactical targets for each of the four action areas.

Key Light orange circle with dashed line = civil society entities

- SUPFW: Light orange circle with dashed line in Bold RED text
- Light blue circle = Jordanian government entities
- White circle = international related entities
- Advocacy Action Areas:
 - Internal Capacity = light blue dotted and dashed line
 - Research = orange dashed line
 - Mobilization = green dotted line
 - Engaging Decision Makers = solid red line

Examine the tactical map below to identify where the advocacy action area targets are located. Notice the power relationships in the Union’s map – the one directional solid red lines – that highlight the many governmental agencies involved. The Union initially identified the Ministry of Health as the government decision maker for gaining health insurance. Rather than trying to seek an exemption for women farmers through the Ministry of Health, the research of laws and regulations revealed a better option already existed. In order to claim the right to health insurance based on an inadequate living standard, the Ministry of Social Development has final decision making power. However, a significant number of local level ministry offices of the identified government agencies on the tactical map must also be engaged before the final application for health insurance can be submitted to the Ministry of Social Development.

On the spectrum of allies, notice the location of these same targets. The legal research focused on the Ministry of Health, located in the passive opponent segment of the spectrum. This location was due to the Union’s assumption that gaining a special exemption in the law and regulations for women farmers would likely be opposed by the Ministry of Health.

Also locate on the tactical map and spectrum of allies the other research area: these are the women farmers as individuals and as part of the Union’s member associations. They were active participants as well as implementers of the **research**. As the Union’s purpose as an organization is to advocate on behalf of women farmers, these targets are located in the active ally segment.

Locate the targets for **mobilization** on the spectrum, these are the Union’s association members and other civil society organizations located in the active ally segment. The Union was able to effectively identify the national level governmental agencies, located in the neutral category on the spectrum, which had local offices where decision makers could be directly engaged. These specific local level government agencies were placed in the passive ally segment. The Union did not see these agencies in opposition to their campaign goal to gain health insurance for women farmers. On the contrary, employees working in these agencies also live in and have an understanding of these communities.

By placing these agencies in the passive ally segment, this helped the Union to pay specific attention to the kinds of tactics needed to engage these employees and move the agencies into becoming active allies to facilitate women farmers in gaining their right to health insurance (see Step 5).

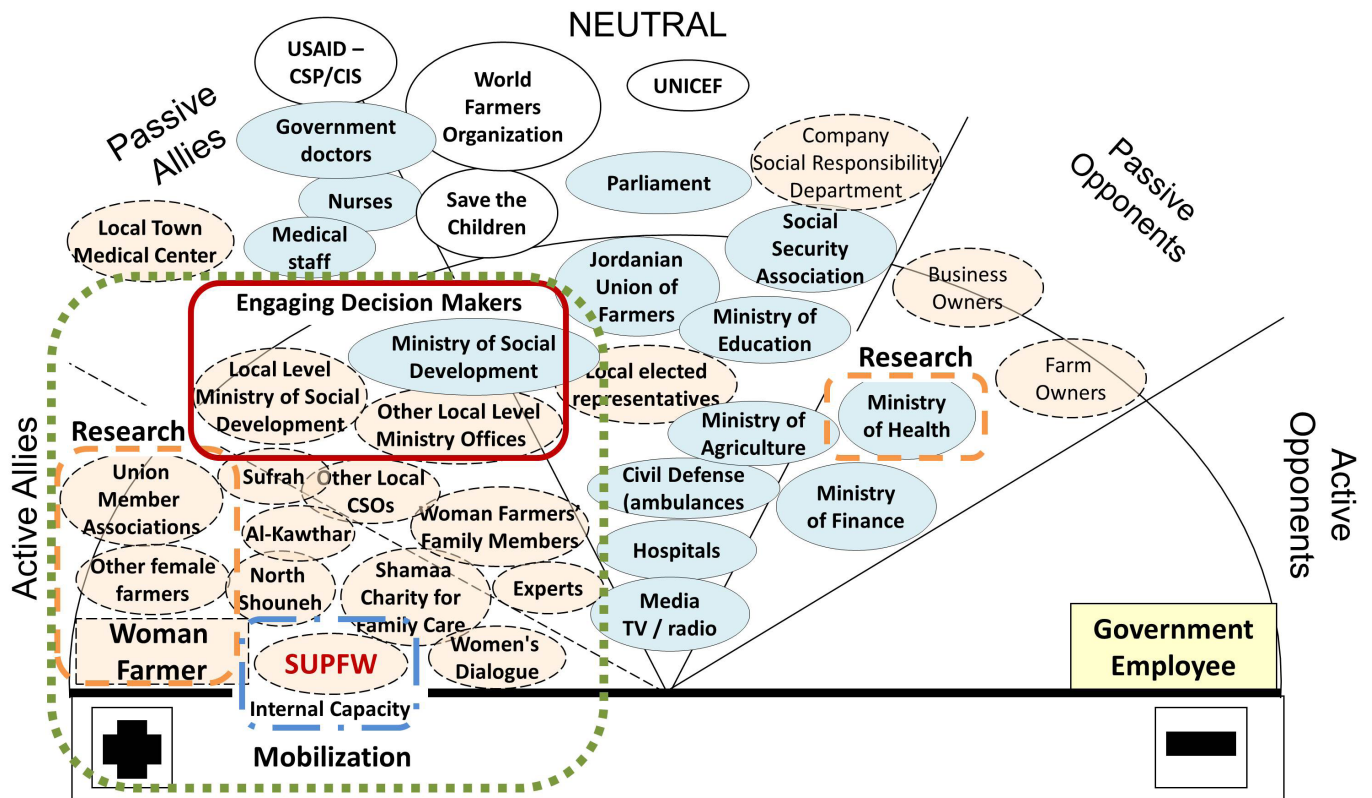


Figure above: This spectrum highlights the location of the tactical targets for each of the four action areas. Note the concentration of targets focused in the "Active Allies, Passive Allies and Neutral" segments.

Spectrum of Allies Key with Advocacy Action Areas

- Light orange circle with dashed line = civil society entities
- SUPFW: Light orange circle with dashed line in Bold RED text
- Light blue circle = Jordanian government entities
- White circle = international related entities
- Advocacy Action Areas:
 - Internal Capacity = light blue dot and dash line
 - Research = orange dashed line
 - Mobilization = green dotted line
 - Engaging Decision Makers = solid red line

Step 5 – Take Action

Without taking action, nothing about the problem you've identified will change. The Strategic Effectiveness Method provides opportunities at each step to take action, monitor, and evaluate your progress. The process helps you to acknowledge successes and learn lessons from the very first step of your advocacy effort. The Method returns you to Step One so you can assess your knowledge – **know yourself, know your opponent** and **know the terrain** – and evaluate how your advocacy actions have impacted your identified problem. Take time to determine what has changed and what requires further effort.

As we examine the actual implementation and outcomes of this campaign, reflect on how your organization documents and acknowledges your achievements – internally to your organization staff and network members, but also externally to highlight your progress on your journey of change.

The campaign made notable achievements regarding the goals they set out to achieve. The results are summarized below according to:

- Each **action area** (internal capacity building, research, mobilization, and engagement with decision makers)
- **Target** groups and constituencies
- **Tactics** selected and their **objectives** to achieve the first milestone on the journey of change
- **Outcomes** that highlight and acknowledge the small to large achievements.

The Union leveraged the legal foundation for the right to free health insurance for those denied an adequate living standard to achieve major results in their campaign. By effectively implementing tactics in the following advocacy action areas, the Union greatly exceeded their strategic goal for **250 women farmers in North Shouneh to gain health insurance by March 2017**. The Union:

1. built the internal capacity of the Union members' leadership and members to carry out human rights based advocacy
2. coordinated the mobilization of Union member associations, civil society partners, and women farmers to claim their right to free health insurance
3. engaged decision makers at the local level to support and facilitate women farmers' applications to grant health insurance.



As an organization, we started to work according to the New Tactics [Strategic Effectiveness] Method, a system, planned and organized. Time and effort were spent on planned activities. Staff started to feel empowered and to think systematically. Now we start to think in the future and how we will apply the method in all our projects.

– Zainab Al Momani

Advocacy Action Areas

Internal Capacity Building

Target: Union's board members and leaders of member associations

Tactic: *Capacity building trainings in human rights advocacy, organizational management and campaign implementation skills*

Objective: To build a common understanding of human rights based advocacy among the Union's member associations to identify, plan and carry out advocacy campaigns with women farmers.

Outcomes: One four-day human rights advocacy training was conducted with twenty-four (24) women leaders from the Union's member associations. The training introduced the New Tactic method for practical application to the concerns of women farmers. The training provided a common language and understanding of advocacy which was accessible to all the women, including illiterate women leaders. This fostered cooperation and team spirit. A significant outcome of the training process was the decision to focus the Union's efforts on the specific locality in North Ghor. When preparations started at North Ghor, with the local union member and the other women CBOs, **three campaign teams were formed:** Questionnaire Development; Outreach to Women Farmers, and Outreach to Health Insurance Providers (see Mobilization).

Additional trainings were given to a total of 267 women coming from Union member associations and participants from other additional associations from the North Ghor area. This provided an opportunity for the Union to introduce their general work as well as the goal of the advocacy campaign to a significant number of women. The Union itself gained additional technical support training in the areas of organizational management and transparency, and specific English language and computer skills.

Internal Capacity Reflection

Know yourself

- Consider how can you ensure participation of your target group in setting outcomes and results. Have women and men in your target group participated in setting the outcomes and results? Do the desired outcomes and results reflect/include gender related aspects such as addressing roles, power relations, access to resources and decision making?
- Consider the internal capacity of your organization for carrying out advocacy, what current support mechanisms are in place?
- For specific advocacy campaigns, discuss the kinds of structures that could be of most benefit for carrying out the campaign. What additional supports are required? How can you enhance your capacities?
- How might technology be used to support and build your internal capacity? What challenges might you face when using technology tools?
- As you explore tactics for building "internal capacity", don't forget that active and passive allies can be mobilized to support and enhance your own organization's capacity. What allies can you engage and rely upon for leadership and implementation roles?

Know the terrain/Know your opponent

- How might technology be used to build external support?
- What challenges might you face regarding opponents or your context when using technology tools?

Research

Target: Ministry of Health

Tactic: *Conduct a legal review of the laws, regulations and related bodies concerning health insurance*

Outcomes: A legal consultant conducted the health law research and reported how difficult it would be for the Union to advocate for a legal exemption for women farmers as a special group to gain health insurance. As this was the initial intention of the Union, they were focused on the Ministry of Health as the decision-making body for such an exemption. What was considered a minor point in the research, the right of free health insurance for those who lack adequate livelihood with incomes of 300 JOD or less per month per family, emerged as the critical component for the Union's campaign. This resulted in a pivotal shift in the advocacy campaign and directed the Union's efforts toward the Ministry of Social Development.

Target: Women farmers

Tactic: *Conduct focus groups*

Objective: To gain a better understanding of the problems faced by women farmers in Jordan

Outcomes: The Union contracted a consultant to conduct up to two separate focus groups with a total of 30 women farmers participating. These focus groups gave women farmers the opportunity to voice their many concerns. The focus groups were made up only of women to overcome and address cultural barriers of women speaking out about their issues of concern. This process identified the lack of health insurance as a priority concern of women farmers.

Target: Women farmers in North Shouneh

Tactic: *Conduct face-to-face interviews with a questionnaire*

Objective: To validate health insurance as a priority and the degree of potential income eligibility among women farmers in the specific communities of North Shouneh.

Outcomes: This tactic emerged organically and was not part of the original plan. The Union's **questionnaire team** developed the questionnaire and distributed 250 to Union Member Associations and local partner organizations. The questionnaire was very short, with six questions. An impressive 153 completed questionnaires were returned. Families validated health insurance as a priority. The face-to-face interviews also provided accurate information regarding economic situations. Of the 153 questionnaires returned, 130 families reported incomes at or below 300 JOD per month and confirmed they had no health insurance. This showed the level of trust in the local union organization and the overall union's campaign.

The Union took the added step to test a group of women farmers to apply for health insurance based on the questionnaire information that families had provided. All of these families received health insurance. The results of the questionnaire and the test application process provided critical information that informed and directed the campaign's subsequent mobilization of eligible women farmers and their families to apply for health insurance (see Mobilization).

This eligibility information for the right to health insurance based on the lack of adequate livelihood was later provided in media interviews to highlight the situation of women farmers.

Research Reflection

Know yourself

- What forms of research do you need to better understand your identified problem?
 - Rights-based information: What tactics would help you gain more knowledge of the human right that is being violated or obstructed? Consider how gender, age or disabilities might factor into the problem and your research tactics.
 - Technical information: What tactics would help you gain more knowledge of how structures and procedures are implemented? Consider how gender, age or disabilities might factor into the implementation of procedures and regulations.
 - Legislative information: What tactics would help you gain more knowledge of the laws and policies? Consider how gender, age or disabilities might factor into the development of laws and policies.
 - Social information: What tactics would help you gain more knowledge of the cultural and social structures or barriers? Consider how gender differences, such as roles between men and women, power relations, access to resources and decision making might factor into the forms of research you choose.

Know the terrain

- Consider how you can use the New Tactics tools :
 - Use the “tactical map” tool to identify people, organizations and institutions that have special expertise regarding your identified issue
 - Use the “spectrum of allies” tool to discuss appropriate tactics for engaging experts based on their position as allies, neutrals or opponents
- How can research be used to build awareness and to mobilize allies?
- How might technology help or hinder your research efforts?
 - What kinds of technology would benefit your research?
 - What kinds of technology are useful in compiling information on your issue?
 - What kinds of technology are useful for analyzing results?

- How are marginalized groups excluded from access or use of technology (e.g., women, people with disabilities, etc.)

Know your opponent

- How can research be used to counter opposition from opponents?
- How can research be used to develop recommendations for action to engage decision-makers?
- How will decision-makers (allies and opponents) react to the results of your research?
- What considerations do you need to make regarding the method or technology you've selected?

Mobilization

Target: Women leaders from the Union member associations and partner civil society organizations

Tactic: *Formation of campaign teams*

Objectives: To organize and mobilize leadership to carry out the advocacy campaign

Outcomes: These three teams, set up through the advocacy training process, were responsible for organizing the Union's efforts to reach the advocacy goal. This served to successfully channel their energy into the campaign and mobilized the Union's administrative members towards the women farmers. The teams distributed roles and responsibilities in the following way:

1. *Questionnaire Development Team*

This team created a brief questionnaire that was used to validate health insurance as a priority and identify income eligibility among women farmers.

2. *Outreach to Women Farmers Team*

This team coordinated Union member associations to conduct face-to-face questionnaire interviews with woman farmers and their families. This team made it possible to determine the extent of potentially income eligible households for the right to free health insurance. This team ensured that illiterate women farmers were included in the questionnaire interview process, conducted follow-up outreach, and provided accompaniment of women farmers to complete the health insurance application. The team mobilized 739 women to complete procedures for obtaining health insurance. This included organizing transportation for the women to each government agency where they were required to submit their application for official review and stamp. This team also tracked the number of women farmers and their families who were granted or not granted health insurance. Over 70% of women farmers who applied were granted health insurance. The 558 approved applicants included other family members, such as spouses and dependents, for a total of more than 3,300 people.

3. *Outreach to Health Insurance Providers Team*

This team met with a range of people responsible for health care to build support and cooperation for facilitating women farmers to gain their right to

health insurance including:

- Government agencies, employees and elected representatives. For example, each ministry has a director in each governorate (e.g., Irbid), and then section leaders at the local community levels (e.g., Northern Shouneh) such as the Ministry of Health, Ministry of Social Development, Licensing Department, etc.; and government employees included doctors, nurses and other, hospital personnel.
- Private Parties: companies and institutions that have social responsibility departments; farm owners and other business owners that have responsibilities for making payments to the social security system on behalf of their employees for gaining access to health insurance.

This team played a crucial role in understanding the process for application and preparing the different agency employees to receive large groups of women farmers to present their application forms. Each application required official review and stamps to move each application for health insurance forward (see Engaging Decision Makers).

Mobilization Reflection

Know yourself

- What mobilization efforts will be required to achieve your “journey of change” goals?
- What special considerations might marginalized groups need in order to be mobilized (e.g., women, people with disabilities, etc.)
- What capacity do you have for such efforts?
- How might you gain additional capacity?

Know the terrain

- Use the [tactical map tool](#) to discuss:
 - What people, organizations and institutions are involved in your issue that may need to be mobilized?
 - What additional research do we need to conduct to have a better understanding of those involved or impacted (e.g., women, people with disabilities, other marginalized groups, etc.)
 - What additional research do we need to conduct to have a better understanding of those who carry responsibilities regarding the issue?
- Use the [“spectrum of allies” tool](#) to consider appropriate tactics for those identified in each segment. For example:
 - Active allies – what tactics will engage your allies to become even more active in working with you toward the goal?
 - Passive allies – what tactics will increase the interest and willingness of these allies to move to the “active ally” position?
- [Selecting tactics](#): Do the tactic choices reflect/include any gender related aspects such as difference in roles between men and women, power relations, access to resources and decision making?

- What opportunities for leadership and implementation can you share with allies to enhance your own organization's capacities and advance your advocacy campaign? How are you ensuring the representation of your target group (e.g., women, people with disabilities, marginalized groups) in the leadership and implementation processes?
- How might technology help or hinder your mobilization efforts?
 - What is the purpose of using technology (communication for coordination, outreach for awareness raising, outreach for mobilizing action, etc.)?
 - Who does not have the ability to access or use the technology you are considering?
 - How can you reach those who do not use technology?

Know your opponent

- How will opponents react to the forms of mobilization you have selected?

Engaging Decision-makers

Target: Ministry of Social Development

Tactic: *Provide seminars to women farmers to promote the health insurance structure*

Objective: To involve government ministry staff to ensure accurate information and assistance to ensure eligible women farmers' gain their right to health insurance

Outcomes: The Union, in coordination with the director of the Ministry of Social Development and other partner organizations, conducted meetings with women farmers and recorded the names of those eligible for health insurance. These organizations included: Shamaa Charity for Family Care, Al-Kawthar Women Organization, North Shuna Women Organization, Sufrah Women Organization and Women's Dialogue Organization. The director of the Ministry of Social Development from Northern Shouneh provided instructions regarding health insurance eligibility. As a result of these seminars and other outreach, 739 women farmers completed their application forms for health insurance.

These seminars enabled greater interaction between decision makers and community members. The Union was able to introduce women farmers to their rights, and specifically their right to health insurance. The Ministry of Social Development played a significant role in these seminars. As a result, the application process and the Ministry's role greatly helped to address the bureaucratic barriers.

Target: Government ministries and departments required for approving health insurance

Tactic: *Conduct face-to-face outreach and preparation meetings*

Objective: To activate the role of the Ministry of Social Development and relevant institutions to ensure they perform their roles in validating health insurance application forms

Outcomes: The Union's Outreach to Health Insurance Providers Team worked to

overcome the bureaucratic hurdles. As a result of visiting the Ministry of Social Development, the team received the form to apply for health insurance based on the lack of an adequate standard of living. The actual number of validating departments depends on each woman and her family situation. The application process required nine agencies to certify eligibility for health insurance for women farmers from North Shouneh. These included:

1. Ministry of Social Development
 - National Aid Fund
2. Social Security Corporation
3. Public Security Directorate, Driver and Vehicle Licensing Department (ensures the family does not own a vehicle or taxi that would generate income)
4. Ministry of Health
 - Medical Insurance Fund
5. Ministry of Awqaf Islamic Affairs and Holy Places
 - Zakat Fund
6. Ministry of Agriculture
7. Ministry of Finance
8. United Nations Relief and Works Agency for Palestine Refugees (UNRWA) (ensures the woman farmer does not receive medical services from UNRWA)
9. Aidoun Military Hospital, Irbid

The Union's outreach team conducted meetings with the ministries and departments that were required to fulfill the application process. It is important to recognize that these agencies are centralized in the governorate, but not the towns. This raised the concern regarding the transportation and logistical complications which are significant barriers for people seeking to access their right to health care. The Union has made a recommendation to the Ministry of Social Development to simplify the application process.

The Union coordinated with and prepared the government agency employees for large groups of women farmers coming to apply on specific dates. This was essential for facilitating the process for the women farmers. These ministries and departments serviced 739 women. The women were transported in groups of 25 to present their applications for official review. Each woman required official stamps for advancing their health insurance application. By transporting groups of women, this helped to ensure that the process for each group of 25 women could be processed smoothly and within one day. Without this kind of planning and coordination, the process could not be completed in one day.

This coordinated process activated the role of the Ministry of Social Development and the institutions to make sure they were ready to perform their roles. As a result, the success of 553 women farmers gaining health insurance far exceeded the Union's goal of 250.

Health insurance was provided for the entire family, not only for the father or the woman farmer as head of the family. The Union succeeded in gaining health

insurance for over 3,300 people (the estimated number of persons based on the family books that list the members of each family). These families are guaranteed this health insurance for a three-year period. They will need to verify their income eligibility again at that time. Women farmers expressed their great satisfaction with the assistance provided by the Union.

Engaging Decision Makers Reflection

These action areas provide excellent opportunities for engaging decision makers and acknowledging achievements reached along your journey of change. It is important to note that technology may help enhance your efforts in each area. Further, consider how technology can support your preparation for engaging decision makers to advance your advocacy efforts in each of the action areas that have been outlined:

Know yourself

- Internal capacity building:
 - Determine who within your organization or network are required to engage with decision makers (community members impacted by the problem, experts, influential allies, etc).
 - What forms of technology can enhance your internal support, communication and organizing structures to carry out your advocacy?
- Mobilization:
 - How will the tactics selected leverage your allies to reach decision makers?
 - Determine who within your organization, network and stakeholders are required for developing recommendations or demands for action for decision makers (e.g., women, people with disabilities, other marginalized groups, experts, etc.)?
 - How can technology enhance your outreach to your allies, other community members and decision makers?

Know your opponent

- Research:
 - How can research prepare you for engaging with decision makers who may oppose your position or recommendations?
 - What forms of technology can aid your research to determine the process for decisions; and who are the decision makers for your issue?
- Engagement with decision makers:
 - What forms of technology can help prepare you or help deliver recommendations to decision makers?

Know the terrain

- Mobilization:
 - Who will need to be involved or represented when presenting your recommendations or demands to decision makers?

- Engagement with decision makers:
 - What challenges do you face in your context when developing and delivering recommendations to decision makers?
 - How can you engage different target groups in decision making processes (e.g., women, people with disabilities, other marginalized groups, experts, etc.)?
 - What processes or procedures do you need to consider when engaging decision makers?
 - What preparations do you need to make to ensure that your recommendations or demands are clearly presented?
 - What considerations are needed to ensure the best results?

Monitoring, Evaluation and Future Advocacy

The overall results of the advocacy are provided in the outcomes highlighted above. This case highlights how crucial it is to monitor and evaluate throughout each step of the advocacy process. This allows you to be flexible; take advantage of timing opportunities; make changes when new information is gained, or when the context becomes more or less favorable for taking certain actions.

The New Tactics method provides on-going opportunities to conduct monitoring and evaluation throughout the entire campaign process. Three examples of this can be highlighted:

- ***New information***

New information regarding the right to free health insurance was revealed. Those lacking an adequate standard of living, 300 JOD per month or less, have the right and legal mandate to free health insurance. Knowledge of this right shifted the Union's advocacy focus from the Ministry of Health to the Ministry of Social Development.

- ***Evaluating tactics and resources***

The Union reduced the scope of its advocacy outreach from the whole of Jordan to the specific area of North Shouneh. This changed both the tactics and resources they needed to reach their goal. Even so, the Union would not have been able to reach its goal of women gaining health insurance without continuing to monitor and evaluate their progress. The Union discovered significant barriers made it impossible for women farmers to access their right. The complexity of the health insurance application process required visits to nine different agencies to gain the necessary verifications. This was far beyond women farmers' capacity. By recognizing these barriers and assessing their own resources, the Union shifted tactics. They coordinated with government agencies and organized transportation for over 700 women farmers. This facilitated the process for both sides: preparing the agencies for the groups of women and providing support to women farmers to claim their right to free health insurance.

It was also important for the Union to minimize unnecessary activities to conserve resources. In this case, they did not need to focus time and energy on expanding the number of stakeholders. The critical stakeholders were willing and actively engaged to reach the campaign goals. Additional

stakeholders were naturally reached through the word of mouth of the women who gained their health insurance and shared this achievement with other women. So, the initial goal to reach 250 women actually reached far beyond this number with a result of over 550 women actually gaining health insurance coverage.

- **Flexibility to respond**

The Union changed direction and tactics based on the assessment of their resources. The flexibility of the funders to understand the process and approve needed changes was a critical element. The Union was able to shift resources from a planned roundtable meeting that was no longer necessary, and channel those funds into transportation for the women farmers. This shift made it possible for women farmers to actually apply and gain the insurance.

During the course of documenting who did and did not receive health insurance, the Union noted that some types of cases were denied the right to health insurance.

- Women farmers married to non-Jordanians were not granted their right to free health insurance for their children nor their husbands.
- Women farmers with commercial registers of companies were not granted health insurance.

This information provides potential areas for future advocacy.

Return to Step 1: Identify the Problem & Step 2: Create a Vision

It is time to recognize the successful intervention in overcoming systemic barriers and celebrate that the Union exceeded its goal with 553 women gaining health insurance.

When reviewing the problem statement, ***due to an inadequate standard of living, women farmers in North Ghor are denied their right to health insurance***, the Union recognizes that not everyone who has the right to free health insurance in North Ghor has been able to access that right. Taking time to review where the problem stands currently makes it possible to assess if the Union's second goal is still relevant: ***Goal #2: Advocate with the Ministry of Social Development to simplify the health application process.***

The Union's advocacy experience clearly highlights the need to make the process more simple and accessible. The current legislation is present and good. The enforcement process is outlined and available. However, there are a number of significant gaps. First, citizens' lack the knowledge that this right exists and second, the government was not that open about informing citizens about their ability to access this right. The bureaucratic process to gain the authorization is overly burdensome especially for people living in poverty, having limited education and other resources. In order to gain this right, these women farmers required the assistance of this advocacy campaign. Their goal to advocate for a more simple and accessible process is definitely still relevant. They have also raised the awareness of women farmers in North Ghor who will require the Union's experience and assistance to access their right to health insurance. The Union will need to decide how to focus their energy and resources in the future.

Later on, USAID CIS encouraged the SUPFW to capitalize on what was achieved and to officially hold dialogue with relevant decision makers to facilitate access to this right. They were also encouraged to pilot a similar campaign in a new yet similar area to widen the access of another group of women farmers to this essential right.

Action Plan Reflection

Know yourself

Consider the status of your advocacy campaign:

- What has changed about the problem due to your campaign? What has changed for stakeholders? How have marginalized groups been engaged, empowered, participated in leadership and decision making? Are there any differences in the level of engagement of men and women?
- What specific milestones in the action areas of your internal capacity building, research, mobilization and engagement with decision makers have you achieved?
- How did you acknowledge and celebrate these successes?
- What are your next milestone priorities?

Know the terrain

- What aspects of the problem have not been addressed by your campaign?
- Are the next milestones on your journey of change still relevant based on the current context?
- How can you engage your allies in determining the priorities for the next milestone on your journey of change? How can women and other marginalized groups be more engaged, empowered, and participate in future leadership and decision making? Are there any differences in the level of engagement regarding men and women?
- What has changed about your understanding of the problem and context for taking action?
- What is required in the current context to move toward your vision?

Know your opponents

- How have opponents responded to the changes or impacts on the problem?
- How can you anticipate or monitor indications that your opponents may be preparing to launch a response?
- What preparations can you make for responding to any potential actions from opponents?