



Generating Media



SGAC Media Guide

How to Publicize an Event

- Contact Caiti, SGAC's national media coordinator, for a list of reporters local to the area in which you are holding your action. With the exception of Washington, DC; Chicago; San Francisco; New York City; Columbus, Ohio; and a few other smaller cities, SGAC does not have press lists yet. Therefore, as you are more likely to know the local media, it will probably be advantageous if you help to develop the press list along with Caiti.
- Write a media advisory to send out to news outlets (newspaper, TV, radio). The media advisory is essentially an invitation to the event; it should tell who, what, where, why and when. See the sample media advisory for an idea of what this should look like; contact Caiti for help in writing if necessary. This should ideally be sent out to the press list three days prior to your action/event so that it will be entered into the daybooks. Important: always send this in the text of an email – not as an attachment.
- The day after the media advisory is sent, you will need to call the media outlets. This can be a time-consuming task, so you will probably want to divide up the media outlets to be called amongst a few people. Ask if they received it; if yes (which is hopefully the answer!), ask what reporter would be most likely to cover it. Try to then contact that person and pitch the story to them. Say "My name is _____. Did you receive our media advisory sent out on _____?" Then explain the reason for the action and why it is important (and exciting, and that they should cover it!). If you have the time and resources, try to make it relevant to the individual reporter. Keep your call short – about 30 seconds – otherwise you will lose the reporter's interest and probably get hung up on. If they have not received your media advisory, confirm that you have the correct email (chances are you don't) or get a fax number and re-send. Again, enter into the text of the email message.
- On the day of the event (or, if the action is early in the day, the night before) you will need to send out the press release. See the sample press release for an example. Basically, it will share the same two paragraphs of the media advisory, but will include a more in-depth discussion of the event, including a couple of quotes from people. If there are other organizations participating in the action, make sure to include this info. This should be written as a full news story, as some smaller papers will simply reprint press releases to fill space or meet deadlines. Follow "inverted pyramid" style - the most important aspects of the story should be at the top of the page, followed by details of decreasing urgency.
- If possible, try to follow up reporters again on the day of the event – focus on those who expressed an interest in the event.

Other Ways to Use the Media

- Letters to the editor (LTEs) are a great, quick way to raise awareness about SGAC and global AIDS issues. Frustrated about an inaccurate article in the paper? About a lack of coverage on the global AIDS crisis? Then write an LTE! See the sample LTE for help and feel free to contact Caiti for talking points.
- If you have a little more time and would like to further express your opinion, try writing an op-ed — a signed opinion piece traditionally published on the page opposite a paper's editorials. You can submit these to your school newspaper and local newspapers, and probably be successful in having them printed. Again, see the sample op-eds for a general idea of what's necessary.

Next Steps

When you do make it in the press, make sure to share with other SGAC chapters! Please send out any media hits your chapter gets over the sgacchapters@yahoo.com listserve. It's a great way to let other chapters know what you're doing, and it also encourages other chapters to do good media work.

Finally, remember that the steering committee members are always here to help. Specifically for media related events, Caiti can guide you in the right direction, and assist with media work and press calls; so do not hesitate to ask for help. She may be reached via email at caiti@fightglobalaids.org or via phone at 541.990.0472.

Sample Op-Ed: Abbott

Twenty-five years after the recognition of the AIDS virus, the disease has become a global pandemic, with over 40 million people currently infected and over 8,200 people dying from AIDS every single day. However, current medical advances in antiretroviral medications for treating this disease can drastically improve and prolong life for those who can get access. In 1996, after the introduction of anti-retroviral drugs for AIDS patients in the U.S., the death rate due to AIDS dropped precipitously by 70%. Tragically, though, as a result of corporate and pharmaceutical greed, the vast majority of people in need of life-saving drugs do not have access to them. Only 1 out of 6 people who are in need of treatment are receiving it: 99% of AIDS deaths occur outside of North America and Western Europe. The majority of the people lacking treatment and dying from AIDS live in the Global South (defined as most of Africa, Asia and Latin America).

The chief excuse offered by the pharmaceutical industry for not making life-saving medicine available to those in need is that of money: if they don't make a profit off of their drugs, they claim, then they won't have enough money for research and development. This logic, however, is flawed. In reality, drug companies

spend significantly more money on marketing and lobbying than on research and development. In 2004, U.S. drug company sales amounted to \$218 billion dollars; they spent \$60 billion on marketing, \$116 billion on lobbying the U.S. government and a mere \$38 billion on research and development. How is this right?

An example of a pharmaceutical company in possession of life-saving medicine who is not making it available to the people in need is Abbott Laboratories. One of the top drug companies in the world, Abbott made \$19.7 billion dollars in sales in 2004, with \$3.2 billion dollars in profit. They spent \$4.9 billion in marketing and administrative costs, and only \$1.7 billion for research and development. The CEO of the company, Miles White, is one of Forbes' 500 highest paid executives: he takes home an annual salary of 5 million dollars. Does this seem right? Somehow, the argument that they must charge such high prices for their medications just doesn't add up. Frankly, it seems like an industry gone askew. Is corporate greed more important than the lives of 40 million people?

Abbott recently announced that their new AIDS drug Aluvia – which costs approximately \$7, 500 per year per

patient in the United States – will be made available for only \$2,200 dollars in 49 countries (including India, China and South American and Asian countries). They are promoting this as “giving preferential pricing” to these countries. Of course, the simple reality is that most of the people living in these 49 countries live on less than \$2 a day. How can someone with that income possibly afford the over \$2,000 price tag for Aluvia? The answer, of course, is that they can't.

To save lives, Abbott must register Aluvia in all countries in the Global South, commit to publishing an affordable price in low and middle income countries and offer licenses to generic companies to lower the price. Lowering the cost of a drug from \$5,000 to \$2,200 simply isn't sufficient. Too many people have already died from AIDS, and the numbers are only increasing: this is a matter of life and death. People should not be condemned to die because they cannot afford the astronomical price of a life-saving medication. We have the resources and technology to stop AIDS. Where is the corporate and political will to do so?

Caiti Schroering
National Media Coordinator,
Student Global AIDS Campaign

Sample Op-Ed: Health Workers

The countries of the Global South (most of Africa, Asia and Latin America) are hit the hardest by the AIDS pandemic. One of the essential elements in addressing this crisis and treating the people infected with this disease is a responsive health care system with adequate health care workers. Unfortunately, it is the countries that are hardest hit by the AIDS crisis that also suffer from a severe shortage of health care workers. Consequently, they are incapable of appropriately addressing the crisis. It is estimated that in sub-Saharan Africa alone – where the majority of the world's 40 million people infected with HIV/AIDS live – that at least 1 million new health care workers are necessary in order to meet basic health care needs.

One of the chief reasons for this shortage of health care personnel can be attributed to the iniquitous policies of the International Monetary Fund (IMF). Essentially, the IMF mandates set financial targets that countries must meet to reduce their deficits. In order to meet these demands, countries must cut services; inevitably these cuts are made in education and health spending. The end result is that there is no money to hire sufficient numbers of health workers or to pay these workers a living wage.

Additionally, there are simply not nearly enough medical schools to train the necessary number of new doctors and nurses

– this is also connected to the fact that because of IMF policies, the funds to build medical schools are non-existent. Where the schools do exist, the graduates usually leave to practice in the U.S. and other Western countries, where they can make a higher, living wage. Moreover, the majority of the people taking care of the sick and dying (especially in sub-Saharan Africa) are women. It is imperative that in addition to building schools, that there be a massive initiative to empower women through health care training and monetary compensation. If this is done, not only will the necessary multitude of health care workers be created, but women will achieve greater social status, an essential component in the fight against HIV/AIDS.

This coming year, several organizations that are involved with global AIDS advocacy – including the Student Global AIDS Campaign (SGAC), American Medical Student Association (AMSA), Health GAP, and Physicians for Human Rights are attaching this shortage of health care workers to their advocacy focus to achieve universal access to AIDS treatment by 2010.

At present, Senators Dewine (R-OH) and Durbin (D-IL) are sponsoring a bill known as the Africa Healthcare Workforce Investment Act. While this bill is an initial step towards achieving a sustained African healthcare force, there is still much more to

be done. This bill will, however, serve to educate members of Congress during this fall election season about the healthcare worker shortage. It is important that a solid grassroots campaign on this issue, focused on targeting congresspersons running for office in the '06 midterms (as well as potential '08 candidates who are politicking), be in place during this fall. In addition, the White House is expected to come out with an announcement concerning this issue sometime in early 2007; this fall can also be used to educate and pressure the White House on some sort of action.

Finally, it is important that our actions not result in a situation where, instead of helping to educate and empower individuals in the affected countries, we end up with US doctors and nurses going to the Global South to serve for a couple of years and then leaving without having helped to develop or train others: this would most certainly not be a solution to the problem. It is critical that those of us working on this issue work closely with activists from the Global South to ensure that it is addressed in a way that works for the people it is meant to help.

Caiti Schroering
National Media Coordinator,
Student Global AIDS Campaign

Sample Letter to the Editor

Check out the original article here:

<http://www.chicagotribune.com/business/chi-0608140134aug14,1,3606463.story>

Dear Editor:

Abbott Laboratories recently announced that their AIDS drug Aluvia (a new formulation of Kaletra) will be available for \$2,200 per patient per year – down from \$3,500 to \$5,000 – in 45 countries considered “low income” or “lower middle income,” including India, Vietnam, China and countries in South America and Asia.

While this development is being promoted by Abbott as “giving preferential pricing” (the medication costs \$7,500 per year in the United States) to these countries, in actuality, their actions are a misleading gesture. The majority of people living in these 45 countries live on less than \$2 a day: how can someone of that income possibly afford the \$2,200 price tag that Abbott is offering? To save lives, Abbott must register Aluvia

in all countries in the Global South, commit to publishing an affordable price in low and lower middle income countries and work with generic producers to lower prices.

Caiti Schroering
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AIDS activists to march through DC, deliver 650 3-foot long ribbons to President, Congress

Call for a comprehensive plan to address the severe shortage of health care workers in the Global South and build a sustainable infrastructure for the training and retention of health care workers

WHO: Student Global AIDS Campaign

WHAT: Activists will march through Washington D.C. with 650 3-foot long red ribbons (each ribbon representing \$1 million dollars) to be delivered to congresspersons and the Senate. The march will end in front of the White House where the remaining red ribbons will be put on the fence of the White House for President Bush. The activists are demanding that Congress develop and the President sign, a comprehensive bill addressing the severe shortage of health care workers in the Global South (defined as most of Africa, Asia and Latin America).

WHEN: 12:00 Noon, October 16, 2006

WHERE: 1225 Connecticut Ave NW,
Washington, DC 20036, through
The streets of D.C. to the White House

WASHINGTON, DC – AIDS activists with the Student Global AIDS Campaign – joined by activists from the American Medical Students Association, Health Gap, and Physicians for Human Rights – will carry 650 3-foot long red ribbons through the streets of D.C., delivering them to Congress and the Senate. The march will culminate in front of the White House, where the remaining red ribbons will be left on the fence in front of the White House. The activists are demanding that political leaders address the dire shortage of health care workers in the Global South. They are calling on Congress to develop a bill that addresses this issue, and have President Bush sign it into action.

The Global South is where the majority of the world's 40 million people with HIV/AIDS live; in order to fight this pandemic, it is crucial that there be adequate doctors and nurses to treat people. Currently, it is estimated that sub-Saharan Africa alone needs at least 1 million new workers. As a result of spending ceilings placed on countries by the International Monetary Fund, countries must cut healthcare services because they cannot afford to hire sufficient numbers of health care workers or pay doctors and nurses a living wage.

To address this need, activists are calling on the United States to provide \$650 million dollars in 2007, which is 1/3 of the necessary funding (the rationale is that since the U.S. represents 1/3 of the world's wealth, it should provide 1/3 of the necessary funding) required to support countries in building a stable infrastructure to train and retain health care workers in the Global South.

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AIDS activists march through DC, deliver 650 3-foot long ribbons to President, Congress

Demand a comprehensive plan to train and retain health workers to fight AIDS in Africa

FOR IMMEDIATE RELEASE

Contact:
Caiti Schroering
caiti@fightglobalaids.org
541.990.0472

WASHINGTON, DC – Over 500 members of the Student Global AIDS Campaign will carry 650 3-foot long red ribbons through the streets of Washington, delivering them to the doorstep of the President. The march will culminate in front of the White House at 12:00 pm, where the students will gather for a rally in Lafayette Park.

The students, in solidarity with AIDS activists throughout the U.S. and the Global South, are demanding political leadership on the African health care worker shortage. The students are demanding the President develop and implement a comprehensive plan to train and retain health care workers throughout the Global South. It is currently estimated that sub-Saharan Africa needs at least 1 million new health care workers. For many African countries, there are fewer than five doctors per 100,000 people. Such a shortage exists as a result of a brain drain, International Monetary Fund wage and spending ceilings on social sectors in poor countries, and a lack of resources to train and retain health care workers.

Sydney Camel, a student at the Denison University chapter of the Student Global AIDS Campaign remarked, “A serious commitment by the President is needed to address not only the health care worker shortage in the Global South, but more broadly, the devastating HIV/AIDS pandemic simultaneously facing these countries.”

The cost to implement a comprehensive strategy to address the health care worker shortage is estimated at \$8 billion over the next five years. For this next year, an immediate \$650 million is necessary to establish a long-term strategy to adequately train and retain health workers in communities throughout Africa, Asia, and Central America.

“At the heart of the AIDS crisis is the weak and unsupported health systems that countries are faced to deal with on their own. The President must take the first step in addressing this crisis by committing \$650 million to programs that would strengthen systems and reversing IMF policies that prevent these countries from investing in crucial programs,” commented Anuja Singh from the Columbia University chapter of SGAC.

Activists are also demanding the President commit to reversing the tide of the brain drain. “The U.S. and other rich nations must stop the active recruitment of trained African health care workers. What is needed is more resources in Africa to guarantee adequate wages and benefits - not an additional drain on the already weak structures,” said Meghan Gallagher, an SGAC member at Clark University.

The Student Global AIDS Campaign is invested in an ongoing campaign across the U.S. to engage and mobilize students around universal access of AIDS medications by 2010. The health care worker crisis facing Africa, Asia, and Central America is a significant barrier to achieving universal access in four years time.

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