

# BCO Communication Strategy: An initial set of proposals

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James Deane

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# Overview

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- ❑ Objectives
- ❑ Assumptions
- ❑ Expected recommendations from BCO Impact Assessment
- ❑ Some proposed messages
- ❑ Target Audiences
- ❑ Risks
- ❑ Some strategic options

# Process

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- ❑ ToR drawn up for Communication Strategy by BCO partnership and subcontracted by ICTDA.
- ❑ Initial presentation and discussion at Hague Meeting;
- ❑ Concept document and questionnaire circulated for completion by BCO partners in October 2006, responses from nearly all partners;
- ❑ Discussion with BCO IA Team and incorporation of feedback.
- ❑ Distribution of draft initial BCO Communication Strategy.
- ❑ Discussion at December 2006 Johannesburg meeting.

# Objectives of the BCO Communication Strategy

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- ❑ Increase understanding, recognition and funding support from donor and development organisations for ICD interventions;
- ❑ Increase name recognition and respect for the BCO partnership;
- ❑ Help achieve recognition among senior level policymakers (international and country based) that compelling and credible evidence exists of the impact of ICD programming.
- ❑ Increase learning by the broader ICD community on what works and what does not work in ICD support, based on BCO experience.

# Assumptions of the BCO Communication Strategy

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- ❑ Rooted in the Impact Assessment; where communication activities not rooted in IA, to be clear that this is the case and the rationale;
- ❑ Impact Assessment will produce a detailed report - the central pillar of the communication strategy.
- ❑ Current Component 1 report sufficiently substantive in its conclusions to provide a strong basis for determining the Communication Strategy.
- ❑ A series of suggestions and options for a BCO Communication Strategy are proposed here - decisions need can be made now to enable timely implementation.
- ❑ Residual lack of clarity over whether a *promotional rather than a learning strategy is principal rationale for BCO Communication Strategy.*

# Assumptions: Expected recommendations of the IA Report

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- ❑ Not possible to conduct a meaningful impact assessment of BCO as a partnership as this is not what it has primarily achieved;
- ❑ Lack of clarity on how partners themselves want to highlight the value of the BCO partnership.
- ❑ Importance of long term perspective in impact evaluation;

# Assumed target audiences in order of priority

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- Decisionmakers/funders at international level.
  - Senior Bilateral agency figures (heads of agencies, economists, heads of sector desks)
  - African and other regional development banks, NEPAD, African Union, OAU, regional multilateral organisations (UNECA) etc etc.
  - Senior Multilateral agency figures and World Bank
- Decisionmakers/funders at country level:
  - Government decisionmakers (particularly non ICD related, such as Finance/Agriculture/Health Ministries)
  - Bilateral staff at senior level.
  - Multilateral staff at senior level, particularly those involved in PRSP and related processes.
  - ICD practitioners and organisational peers of BCO partners.
  - Broader civil society/social movements

# The Communication Strategy:

## Three sets of messages

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- ❑ Messages from the BCO Partnership
- ❑ Messages through the BCO Partnership
- ❑ Messages produced in synthesis with other partners and processes to maximise impact.

# The Communication Strategy: Messages from the BCO Partnership

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- ❑ ICD is central to meeting the MDGs;
- ❑ Collectively the BCO has the evidence and experience to demonstrate this;
- ❑ We know what works and what does not in providing support to ICD programming.

*These messages only credible if there is clear evidence to back them up. That depends on ultimate finding of IA study.*

# Messages *through the Partnership*

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- ❑ Messages drawn from individual BCO partners which, although not resulting from a partnership approach, demonstrate the long impact and value of ICD.
- ❑ *The Best of BCO or The BCO Experience;*
- ❑ Case studies/descriptions of long term impact achieved by key iconic programmes/activities of the BCO partners: e.g.
  - ❑ Community radio in Nepal (Amarc);
  - ❑ Roundtables (IICD);
  - ❑ GEM (APC)
  - ❑ Global AIDS Programme (Panos);
  - ❑ Advocacy centres (Oneworld)
  - ❑ Civil Society networks (Hivos, APC)

# The Impact of ICD *as a field:*

## *Synthesis messages*

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- ❑ Rooted in the needs of senior level decision-makers to have clear, coherent and if possible *consistent evidence of the impact of ICD*.
- ❑ *Several other processes of significant stature also measuring the evidence of ICD*
  - ❑ *Gamos and partners: A major Dfid funded study designed to collect, organise and disseminate evidence of impact of ICD;*
  - ❑ *Infodev study, focused on impact of ICTs on livelihoods;*
  - ❑ *World Bank study on impact of ICTs on development;*
  - ❑ *World Congress on Communication for Development*
  - ❑ *CI summaries, Panos case et al;*

# The Impact of ICD *as a field:* *Synthesis messages*

- ❑ Rooted in the needs of senior level decision-makers to have clear, coherent and if possible *consistent evidence of the impact of ICD.*
- ❑ *A sceptical audience.*
- ❑ *Several other processes of significant stature also measuring the evidence of ICD*
  - ❑ *Gamos and partners: A major Dfid funded study designed to collect, organise and disseminate evidence of impact of ICD;*
  - ❑ *Infodev study, focused on impact of ICTs on livelihoods;*
  - ❑ *World Bank study on impact of ICTs on development;*
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  - ❑ *CI summaries, Panos case et al;*

# The Impact of ICD *as a field:* *Synthesis messages*

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- ❑ Strong recommendation to develop linkages and if possible joint reports and joint communication activities designed to communicate a simple, evidence based message to senior level policymakers:
- ❑ *The ICD community is a strong, professional sector, capable of producing collective, coherent and evidence based arguments and experiences;*
- ❑ BCO is reasonably well positioned and has much to gain from taking the initiative in producing such a product.

# Strategic choices

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- ❑ How much BCO Communication Strategy needs to serve a promotional purpose;w much the strategy needs to be rooted solely in the IA study, and how much augmented by other experiences?
- ❑ Prioritisation of target audiences?
- ❑ How much branded as BCO?

# Outputs: suggestions and option

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- ❑ IA Study itself;
- ❑ Production of *The Best of BCO or the BCO Experience*;
- ❑ *BCO: What we learned: a summary of learnings*
- ❑ *ICD: The Evidence - a synthesis study produced with other organisations*;
- ❑ *A two page summary of the IA Study*
- ❑ *A leaflet*
- ❑ *A conference/event*