

That's What She Said!: Putting Women in the Centre of SRHR

The Asia Safe Abortion Partnership's Digital Campaign for the International Day of Action for Women's Health

Context and Background

The International Day of Action for Women's Health is commemorated on the 28th of May, every year. The day is marked by activists, advocates, and allies as a day to take action and stand up for sexual and reproductive rights for what they are: an indivisible and inalienable part of our human rights. Although the campaign initially focussed on preventing maternal mortality and morbidity, and called attention to significant gaps in the research data on women's health, it has since expanded to address issues such as the feminisation of poverty, access to safe and legal abortion, health sector reform and more.

As we do every year, the Asia Safe Abortion Partnership also marked International Day of Action for Women's Health 2018. This year, the global theme for the International Day of Action for Women's Health was Our Health, Our Rights, Our Lives, and the global hashtags were #WomensHealthMatters and #OurHealthOurLives.

The theme for the Partnership's campaign this year was #ThatsWhatSheSaid, a play on the commonly used colloquial joke phrase. The phrase 'That's What She Said' is often used as a punch line to jokes as a way of making the preceding statement sexual innuendo. The format of the joke sees women as devoid of having any sexual agency and a subject-body. Through our campaign, we reclaimed the phrase, #ThatsWhatSheSaid, to center women in the demand for their sexual and reproductive health and rights.

Our campaign tied into the global theme that sought to highlight the imperative to create safe spaces for women to talk about their health needs without stigma and judgement. We went a step further to argue that these safe spaces are useful only if they mainstream women's voices in the demand for comprehensive sexual and reproductive health and rights.

Our campaign this year was conceptualized and developed by our cohort of Youth Champions at the [India Safe Abortion Youth Advocates \(I-SAY\)](#). They developed a series of images with pithy captions. These images and captions formed the backbone of our campaign, and were used to create a second set of images, and effectively fronted the messages that we shared on the day.

The Asia Safe Abortion Partnership's Campaign

Campaign Posts

The Partnership's campaign was live on the 28th of May between 9:00 am and 8:00 pm, IST on all our social media platforms – [Facebook](#), [Instagram](#), and [Twitter](#).





A list of all the posts and the accompanying messages can be found in Appendix 1. All the campaign images can be viewed [here](#). Our campaign was well received and garnered substantial amount of attention in the online space.

Boosting Campaign Messages

The Partnership adopted a two-fold strategy towards the dissemination of campaign messages.

We did this by reaching out to Youth Champions and our Country Advocacy networks and encouraging them to share this amongst their networks, especially in local languages where possible. We drew up a schedule to ensure that we would receive visibility for as long as possible across the subcontinent. Youth Champions were also encouraged to share the images amongst their personal groups – especially the ones in which they featured.

On the left: Sarah Soysa shares the campaign image that features her with her personal networks.



On the right: YouthCAN, our Country Advocacy Network in Nepal shares our post with their network.



In addition, we reached out to our Youth Champions and partners in specific contexts such as Lebanon and China, encouraging them to use their internal or national networks to disseminate our messages.

On the left: The A Project, Lebanon boosts our campaign in their networks in the Middle East.

Below: Yu Yang, our Youth Champion in China shares our messages on Chinese social media platforms with translated captions.



Our second approach to boost organic views was to share a resource toolkit with partner organisations in the field and encourage them to share our messages. To this end, we received active cooperation from the International Women's Health Coalition and SheDecides. Safe2Choose, Plan C and other organisations also shared our messages as they were being uploaded.

On the right: Our donor-partner, the International Women's Health Coalition, boosts our campaign on their social media.



Below: SheDecides, a global campaign for female agency and autonomy in healthcare decision-making, boosts our campaign on their social media.



Reaching out to organisations was especially useful because it had the inadvertent bonus of also extending the reach of messages beyond the day. As the 28th of May was a holiday for all organisations in the US and the UK – most of these organisations began their sharing and posting on the 29th of May. This meant that our campaign was being actively shared and viewed till the 30th of May.

Evaluating the Campaign

The digital campaign was widely well received. Given the manner in which the Partnership defines successful impact for social media messaging, the campaign met the target on each post. For a detailed breakdown of how the campaign did vis-à-vis the SMART goals defined, please see Appendix 2.

There were a few lessons to be learnt that could be useful for future ASAP campaigns:

On Reach

- This campaign highlighted the value of having content in a range of languages. The first step to this would be ensure that the messages accompanying the posts are available in a range of languages, but to ensure reach it would be more useful to have the image text also translated into the languages of the nation's the Youth Champions are from. While it would be difficult to ensure authenticity and credibility of the translated text, having the images in vernacular go a long way in ensuring reach. The second aspect of translation would also be to ensure that the campaign messages, or part thereof, are also made available in Spanish and French – both of which would ensure reach and longevity.
- What also worked in the campaign's favour was writing to organisations and asking them if they would be interested in boosting our campaign. It would be useful to compile a list of key organisations by continent – for instance, while we were able to reach a European and American audience this time, we were not able to reach Africa and Latin America.
- The second thing that the Partnership would be well off ensuring is that shareable resources – either in the form of a toolkit or a release – are available ten days or a week before the campaign goes live. This ensures a certain amount of interest in the campaign and is also an avenue for passive collaboration with organisations.

On Partnering with the Country Advocacy Networks:

- It could work to enhance the CANs' visibility as partner's if each CAN were to take responsibility for one campaign each year. For instance, this year, ISAY helmed the May 28th campaign, next year we ask for one of the other CANs to volunteer. Given that each CAN is usually running a local campaign anyway, this would

also help streamline efforts. The second aspect of working with the CANs that requires some thought is how each team should run simultaneous campaigns while not crowding the other out of the space.

On Campaign Content

- While the picture image format is highly attractive – it would also be effective to mix that with a set of other formats – such as content infographics (to substantiate campaign messages with data), short video clips or comics, etc.

Appendix 1: List of campaign messages

Post 1:

[#Ireland](#) has shown that when women stand together and raise their voices to demand [#SRHR](#), we can no longer be ignored, because [#WomensHealthMatters!](#) This [#May28](#), we join the push for women to be taken seriously when they demand access to their [#SRHR](#).

[#ThatsWhatSheSaid!](#) Put women at the centre of their health!



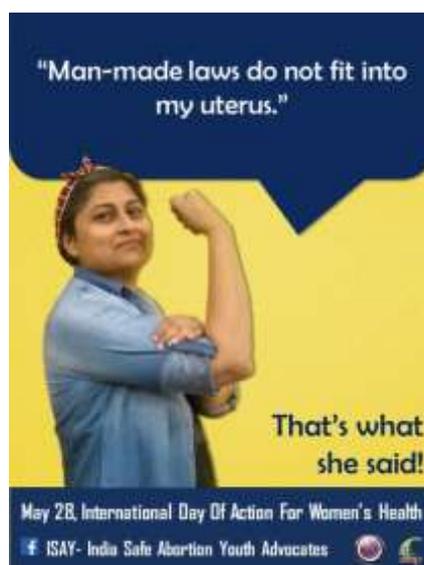
Post 2:

An elephant in the room when it comes to making [#SRHR](#) policy is that men have always been at the forefront of decisions about women's bodies and their rights!

This was perhaps most evident in the infamous photo of [#Trump](#) signing the reinstatement of the devastating [#MexicoCityPolicy](#) with NOT A SINGLE WOMAN IN THE ROOM!

We've had enough! Put women at the centre of their [#SRHR](#).

It's [#OurHealthOurRights](#), [#ThatsWhatSheSaid](#) this [#May28](#)



Post 3:

Women are not 'selfish' for choosing to be child-free.

Women are not 'murderers' for having an abortion.

Women are not 'going to change their minds when they meet the right man'.

#WomansHealthMatters and it's high time we listen to what they have to say!#ThatsWhatSheSaid



Post 4:

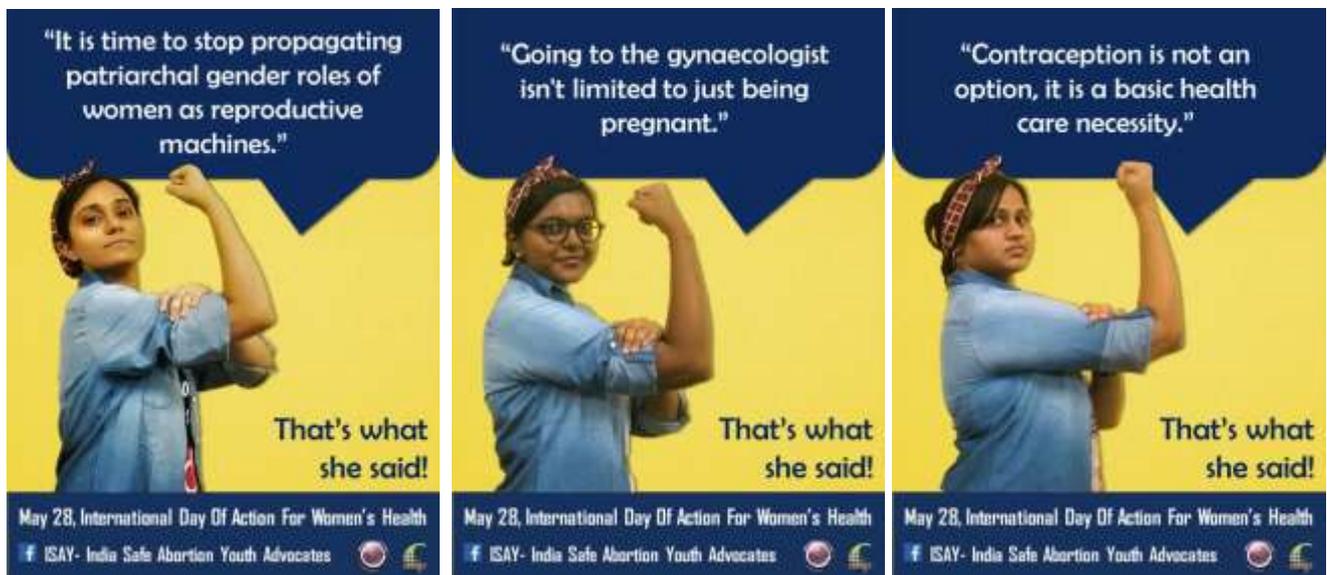
This [#May28th](#), our message is simple, really. Listen carefully, because we'll break it down for you.

[#WomensHealthMatters](#).

That's it. Not because they're mothers, or sisters, or wives.

But because they're women. And when they talk, we listen.

Stand with us to demand [#SRHR](#) that puts women's health needs first. [#ThatsWhatSheSaid](#)



Post 5:

Women's access to life-saving [#healthcare](#) shouldn't depend on your moral standards! [#ThatWhatSheSaid](#)
[#WomensHealthMatters](#) [#May28](#)



Post 6:

Women aren't asking for much - just unhindered access to their [#SRHR](#)! [#ThatsWhatSheSaid](#)
[#WomensHealthMatters](#) [#May28](#)



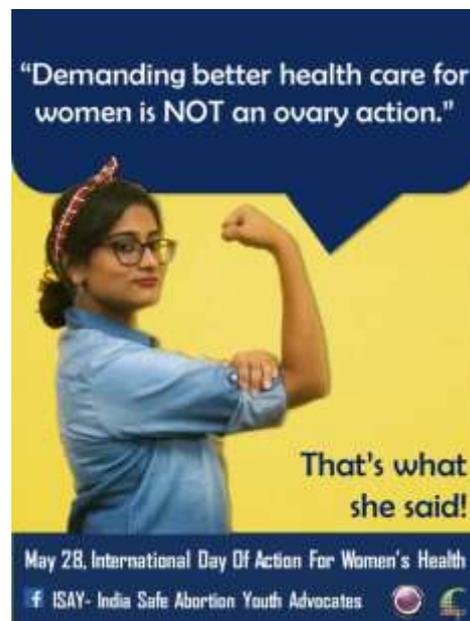
Post 7:

This [#May28](#), stand with us to put [#women](#) at the centre of decisions about their [#healthcare](#), and to put [#patriarchy](#) in the bin, where it belongs. [#ThatsWhatSheSaid](#)
[#WomensHealthMatters](#) [#OurHealthOurRights](#)



Post 8:

Women don't owe you their bodies. It's really that simple. [#ThatsWhatSheSaid](#)
The right to [#SafeAbortion](#) puts the power to make decisions where it belongs - with women.
[#WomensHealthMatters](#) [#May28](#)



Post 9:

Wondering how to be a good ally? It's simple! Listen to what we have to say! [#ThatsWhatSheSaid](#)
Put women at the centre of [#SRHR](#) decision-making. [#WomensHealthMatters](#) [#OurHealthOurRights](#) [#May28](#)



Post 10:

Reminder on [#May28](#), not all those who are [#women](#) have uteri, and not all those with a [#uterus](#) are women! [#ThatsWhatSheSaid](#)
Keep the [#patriarchy](#) out of [#SRHR](#) and ensure that [#healthcare](#) is [#comprehensive](#) and [#sensitive](#). [#OurHealthOurRights](#)



Appendix 2: Evaluating Metrics for the Posts

| | Facebook | | Twitter | | Instagram | |
|---------|---|---|--|-----------------------|--|----------|
| | Intended* | Achieved | Intended | Achieved | Intended | Achieved |
| Post 1 | A successful post is defined as having 3 likes/one share/2 comments /reach of a 100 | 15 likes, 5 shares, 1150 people reached | A successful post is defined as having 2 retweets/1 like | 12 retweets, 16 likes | A successful post is defined as 15-20 likes. | 29 likes |
| Post 2 | | 19 likes, 5 shares, 1571 people reached | | 8 retweets, 8 likes | | 55 likes |
| Post 3 | | 8 likes, 1 shares, 354 people reached | | 7 retweets, 9 likes | | 37 likes |
| Post 4 | | 7 likes, 104 people reached | | 18 retweets, 23 likes | | 27 likes |
| Post 5 | | 8 likes, 1 shares, 488 people reached | | 4 retweets, 5 likes | | 24 likes |
| Post 6 | | 7 likes, 2 shares, 788 people reached | | 1 retweets, 3 likes | | 30 likes |
| Post 7 | | 10 likes, 2 shares, 372 people reached | | 5 retweets, 12 likes | | 24 likes |
| Post 8 | | 7 likes, 108 people reached | | 10 retweets, 6 likes | | 32 likes |
| Post 9 | | 10 likes, 4 shares, 1018 people reached | | 2 retweets, 1 likes | | 23 likes |
| Post 10 | | 8 likes, 2 shares, 261 people reached | | 4 retweets, 5 likes | | 20 likes |

*The intended goals are defined by the ASAP Communications Strategy.