Organizing for Women and Children: Advocating for the ‘Reach Every Mother and Child’ Campaign

Laura E. Leslie
SIT Graduate Institute

Follow this and additional works at: https://digitalcollections.sit.edu/capstones

Part of the Family, Life Course, and Society Commons, Maternal and Child Health Commons, and the Politics and Social Change Commons

Recommended Citation
Leslie, Laura E., "Organizing for Women and Children: Advocating for the 'Reach Every Mother and Child' Campaign" (2016). Capstone Collection. 2864.
https://digitalcollections.sit.edu/capstones/2864

This Thesis (Open Access) is brought to you for free and open access by the SIT Graduate Institute at SIT Digital Collections. It has been accepted for inclusion in Capstone Collection by an authorized administrator of SIT Digital Collections. For more information, please contact digitalcollections@sit.edu.
Organizing for Women and Children:
Advocating for the ‘Reach Every Mother and Child’ Campaign

Laura Leslie

PIM74

A Capstone Paper submitted in partial fulfillment of the requirements for a Master of Intercultural Services, Leadership, and Management: Policy Analysis and Advocacy at the SIT Graduate Institute in Brattleboro, Vermont, USA

April 2016

Advisor: Rachel Slocum
Consent to Use of Capstone

I hereby grant permission for World Learning to publish my capstone on its websites and in any of its digital/electronic collections, and to reproduce and transmit my CAPSTONE ELECTRONICALLY. I understand that World Learning’s websites and digital collections are publicly available via the Internet. I agree that World Learning is NOT responsible for any unauthorized use of my capstone by any third party who might access it on the Internet or otherwise.

Student name: Laura Leslie

Date: April 15, 2016
List of Abbreviations

EPIC – Engage, Problem, Inform, Call
Reach – Reach Every Mother and Child Campaign
REF – RESULTS Educational Fund
The Reach Act – The Reach Every Mother and child Act of 2015
MOC – Members of Congress
UN – United Nations
UNICEF – United Nations Children’s Fund
USAID – United States Agency for International Development
WHO – World Health Organization
To my Papi and Tio, two men who travelled the world, touching many hearts. I will miss your laughter, wisdom, and adventurous souls. Infinity and Beyond.
# Table of Contents

Abstract ................................................................................................................................. 1
Introduction ............................................................................................................................ 2
Campaign Overview ............................................................................................................... 4
  Context ............................................................................................................................... 4
  Policy ................................................................................................................................. 6
  Politics ............................................................................................................................... 10
Strategy ................................................................................................................................. 11
  Methods and Tactics ....................................................................................................... 12
  Messaging/Framing ........................................................................................................... 13
Personal Contributions ........................................................................................................ 16
  Media ................................................................................................................................. 16
    Letter to the Editor 1 .................................................................................................... 16
    Letter to the Editor 2 .................................................................................................... 16
    Letter to Congressman Takano .................................................................................. 17
    Op-Ed ............................................................................................................................ 18
Outreach Event ..................................................................................................................... 20
Evaluation ............................................................................................................................. 21
  Media ................................................................................................................................. 21
    Letters to Congressman Takano .................................................................................. 22
    Outreach Event ............................................................................................................. 22
    RESULTS Lobbying ..................................................................................................... 23
    Campaign Goals .......................................................................................................... 24
Lessons Learned .................................................................................................................... 25
  Toolkit/Resources .......................................................................................................... 26
  Diversity of Partners ....................................................................................................... 27
  Grassroots Action ............................................................................................................ 27
  Media ................................................................................................................................. 27
  Managing Expectations ................................................................................................. 28
Bibliography .......................................................................................................................... 29
Appendix A: Letter to Representative Welch ................................................................. 32
Appendix B: Letter 1 to Congressman Takano ................................................................. 33
Appendix C: Letter 2 to Congressman Takano ................................................................. 34
Appendix D: Op-Ed ........................................................................................................... 35
Appendix E: Outreach Event PowerPoint ....................................................................... 36
Abstract

Every day families are left without mothers and children. Not only does this affect the family but it can have ramifications on the community. There is a link between the wellbeing of moms and that of their children, yet we lose thousands of women to maternal complications each year. Moreover, Each day, thousands of children die before reaching their fifth birthday. The most tragic part is that most of these deaths are preventable. While these deaths have been halved in the last 15 years, there is still a lot of work to be done. There have been several initiatives which focus on reducing the under-five and maternal mortality rate, including those of the United Nations: first the Millennium Development Goals and now the Sustainable Development Goals.

RESULTS, an organization that fights poverty, teamed up with a diverse group of 14 organizations with the purpose of addressing two of the worst aspects of impoverishment: global maternal and under-five deaths. With the launch of the ‘Reach Every Mother and Child’ campaign, the coalition added to an international movement to end child and maternal mortality. Although the campaign has done a good job of increasing issue awareness and getting support for the bill it created, its choice in policy does not truly address the key causes of maternal and child mortality, poverty. This capstone paper will introduce and analyze the campaign, RESULTS’ strategy, and my contributions to the campaign. As an Organizing and Advocacy Intern for RESULTS, my duties included increasing awareness and securing co-sponsorship for the bill proposed by the campaign. In my efforts to fulfill these responsibilities, I created several pieces of media, wrote letters to members of Congress and had an outreach event. After evaluating my contributions and RESULTS’ campaigning, I will share insights I gleaned from my experience.
Introduction

RESULTS (RS) is an international anti-poverty organization that fights poverty by creating the political will to end hunger and the worst aspects of poverty. It is engaged in policy advocacy and campaigning on different levels. It consists of two nonprofit organizations: 1) RESULTS, Inc., a nonprofit, grassroots advocacy 501(c)(4) organization which pushes for specific policies and legislation to address poverty and trains individuals to become advocates against poverty and 2) RESULTS Educational Fund, a nonprofit 501(c)(3) organization which performs research and educates and mobilizes the public, policy makers, and the media (RESULTS, 2016a). RS USA is one of 8 affiliates. This paper will focus on RESULTS’ global campaigns and their policy advocacy work done here in the USA.

RESULTS aims to reach its overarching goal (to end the worst aspects of poverty) by taking on issues that are connected to poverty. Its global issues US-based campaigning aims at creating changes in legislation that will contribute to moving people out of poverty and saving lives around the world. RS recognizes that certain structural factors keep people from accessing the resources they need to live and thrive. A person or family cannot often escape poverty by their own efforts because of a poverty trap, also called “structural poverty” (Smith, 2010, p. 11). For example, an undernourished person too weak to work productively earns an insufficient pay. This means she cannot afford sufficient food to become properly nourished, so she continues with low productivity for a low wage, thus creating a cycle that she alone cannot get out of (Smith, 2010). Knowing individual efforts are not enough, RS aims to end poverty by supporting US partnership with the countries where the most vulnerable people are. RS believes the lack of political will is what impedes progress in eliminating poverty and hunger so it focuses on influencing U.S. congressional decisions and supporting programs that create country
commitment in the countries receiving resources. Although passing legislation that affects global poverty does not help each political actor on a personal level, as public officials make public decisions “they are looking to see how their image appears to their constituents, the media, campaign contributors, their colleagues, and the other audiences they play to (Shultz, 2002, p. 157). RS knows this and it works to make issues it cares about visible and compelling. It does this by mobilizing people to influence political decisions that will bring an end to poverty.

I joined RS in December of 2015, as an Organizing and Advocacy Intern. My primary responsibility has been to support the ‘Reach Every Mother and Child’ campaign (Reach). The main goal of the campaign is to lower global child and maternal mortality by raising awareness of global maternal and child health, educating people about maternal and under-five mortality, and passage of the Reach Every Mother and Child Act of 2015 (the Reach Act). The Reach Act aims at reducing global maternal and child deaths by strengthening current maternal and child programs. As part of my support for the Reach campaign I produced media, wrote letters to congress members, and hosted a community event. This paper critically examines advocacy work which I was involved in, with special weight on my own contributions.

First this paper gives an overview of the ‘Reach Every Mother and Child’ campaign, including the context, policy, politics, and strategy in which I produced my product. Then, it examines RESULTS’ strategy for campaigning, with emphasis on its message/framing. Next it presents the contributions I have made and it explains the strengths of those contributions and how they have aided the campaign thus far. I end with lessons that can be learned from my experience.
Through my role as an Organizing and Advocacy Intern, I used analysis of web sites, participant observation, and reflections of my own experiences to gather my data. I supplemented it with research and informal conversations with colleagues.

**Campaign Overview**

**Context**

According to the United Nations, poverty (a denial of choices and opportunities and a lack of basic capacity to participate effectively in society) is one of the factors that influences under-five mortality levels and therefore the reduction of child mortality is a sign of sustainable development (The World Bank, n.d.). Smith explains that in 2010 the under-five mortality rate was 126 per 1,000 live births in low-income countries, 39 per 1,000 in middle-income countries and 6 per 1,000 in high-income countries (2010, p. 2). In developing countries, about 30,000 children die from preventable causes such as dehydration and diarrhea, deaths avertable by inexpensive immunization or antibiotics. Ewbank said in developing countries child deaths have multiple causes; for example, the death of “a child who is moderately malnourished, has a case of measles, and dies shortly afterward from acute diarrhea and pneumonia,” can be attributed to any of these conditions (1993, p. 17). It is important to note that all of the above causes can be either prevented or treated by appropriate medical intervention (Ewbank, 1993). However, according to the World Bank, in 2012, 896 million people lived on less than two dollars a day (Poverty Overview, n.d.). In these conditions, proper nourishment and medical treatment are luxuries; poverty means early death (Smith, 2010). Since the UN describes poverty as clinic to go to, by fighting to increase access to health and end preventable deaths, RS is working toward its overarching goal of illuminating the worst aspects of poverty (The World Bank, n.d.).
Ensuring that mothers live and are healthy contributes to healthy children and communities. The consequences of women dying or becoming ill/injured shortly after birth include the potential to affect the family and her community in a variety of ways (Reed, et al., 2013). This includes possible “family or household economic costs associated with illness and death, including changes in labor allocation, productivity, consumption, investment, and direct costs, such as medical or funeral expenditures” (Reed, et al., 2013 p. 3). Specific effects on children include death, malnutrition, and reduced education. According to a study done in Bangladesh, children (0 to 9 years of age) whose mothers died were much more likely to die than those who did not experience an adult death (Reed, et al., 2013). Furthermore, most deaths were among children under 1 year old (Reed, et al., 2013). Given “Maternal health and newborn health are closely linked,” it is important that all births are attended by skilled health professionals; timely management and treatment can save the lives of both the mother and baby (World Health Organization, 2015). While almost all women in high-income countries have a least four antenatal care visits, are attended by skilled health workers during childbirth, and receive postpartum care, poor women in remote areas receive inadequate health care. By aiming to do away with this consequence of poverty, Reach is on the right track to decrease maternal and child mortality.

The Reach campaign is part of an international movement to save lives. At the 2000 United Nations Summit, world leaders committed themselves to a set of eight time-bound targets (Millennium Development Goals, MDG) that, when achieved, would end extreme poverty worldwide (Kehoe, et al, p xiii). These goals aim to end the worst aspects of poverty. Although one could argue that the MDGs are more concerned with the connection between healthy, thriving environments and peaceful territories than that of saving the most vulnerable, two of the
goals do directly address maternal and under-five child deaths: 4) reducing under-five mortality rate by two-thirds between 1990 and 2015 and 5) reducing maternal mortality ratio by three-quarters, between 1990 and 2015 (Kehoe, et al, 2010, p xiii). In the last 15 years a lot of work has been done to reduce maternal and under-five child deaths. Although the number of children who die each year before the age of five was cut from 12 million (in 1990) to just under 6 million (in 2015), there are still millions of preventable deaths occurring each year (United Nations Children’s Fund, 2015). Furthermore, the targets of the MDGs four and five were not achieved. To build on the MDGs and keep fighting poverty, the United Nations adopted the Sustainable Development Goals (SDGs) in 2015. Two of the SDGs also address maternal and under-five mortality: 3.1 aims to reduce the global maternal mortality ratio to less than 70 per 100,000 live births by 2030 and 3.2 aspires to end preventable under-five deaths, “with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births” (United Nations, n.d.). According to WHO, almost all maternal deaths (99%) occur in developing countries (World Health Organization, 2015). RS believes that those in poverty must be given outside help, and that the USA should provide part of that help.

Policy

RESULTS’s choice to join the maternal and child health movement aligns with its values. RS believes in fighting poverty by increasing access to health, education, and economic opportunity. Smith says “impoverished people frequently suffer from malnutrition, poor health, and illiteracy” (Smith, 2010, p. 11). Knowing that in the field of international development there has been a move from providing relief, to working in communities, to trying to develop systems – all with an ultimately realization that you have to influence policies if you’re going to make
your work sustainable, RS decided to work with former partners to promote legislation that if passed would contribute to preventable maternal and child deaths (Interview with Jeff Unsicker, 2012). RS, along with a coalition consisting of 12 partners (Care, Save the Children, American Academy of Pediatrics, PATH, Pathfinder International, Change: Center for Health and Gender Equity, The United Methodist Church - General Board of Church and Society, Global Health Council, Food for the Hungry, World Vision, Bread for the World, and Management Sciences for Health) made a decision to formulate and secure adoption of a helpful policy: Reach Every Mother and Child Act of 2015. The following is a policy analysis of the bill proposed by the Reach campaign.

The Reach Act is in line with current best practices for fighting poverty. It calls for a “strategic approach for providing foreign assistance in order to end preventable maternal, newborn, and child deaths globally within a generation” (H.R. 3706, 2015). It focuses on enhancing transparency and accountability; scaling up the most effective, evidence-based interventions, including for the most vulnerable populations, with a focus on country ownership; establishment of a child and maternal survival coordinator; and expanding the use of innovative funding sources (H.R. 3706, 2015). The strategy consists of recommended procedures. For example, the Award Cost Efficiency Study (ACES) Blue Ribbon Advisory Panel strongly recommended the establishment of a maternal and child health coordinator. Also, focusing on the poorest and most vulnerable is recommended. Smith says that “as general policy, shipping food as part of foreign aid is not effective” because of its perverse effect on the rural population, where poverty is concentrated (2010, p. 33). Food shipments tend to lower the price of food in the cities where better-off people usually live while very little food aid will reach the rural areas. Similarly, providing vaccines or skilled birth attendants without reaching out to the most
vulnerable or getting commitment from the target country, would not be sustainable or end the worst aspects of poverty.

Supporting USAID maternal and child survival programs is a good approach to fighting maternal and child mortality. First, the Agency for International Development (USAID), has programs that focuses on Reach’s key population: (A) women during pregnancy, childbirth, and post delivery; (B) newborns in their first 28 days; and (C) children under the age of five, particularly among the most vulnerable populations. Since 2008, the maternal and child survival efforts of USAID have saved the lives of nearly 2.5 million children and averted the maternal deaths of almost 200,000 women in its 24 priority countries (United States Agency for International Development 2015). Next, to avoid the perverse effects Smith says direct services can cause, it is pivotal that the Reach campaign supports approaches that focus on the most vulnerable populations; USAID’s maternal and child health programs aim to do this by focusing on the 24 countries that represent more than 70% of maternal and child deaths (United States Agency for International Development 2015). The Chair of the (ACES) Blue Ribbon Advisory Panel Ray Chambers, United Nations Special Envoy for Financing the Health Millennium Development Goals and For Malaria, said “We applaud USAID for its commitment to improving efficiency and effectiveness in its quest to save more lives and improve health among the world’s most vulnerable people.” By asking for strong congressional oversight, Reach is trying to ensure that USAID will stay in track with implementing the updated strategy which it stated in its Acting on the Call: Ending Preventable Child and Maternal Deaths Report. The plan includes (ACES) Blue Ribbon Advisory Panel recommendations.

An area of weakness for the policy could be that it does not explicitly address the challenge of targeting care to match need (Kehoe, et al, 2010). “The ‘where, who and why’ of
maternal deaths are inextricably linked” so data on who is dying, why, and where, is considered fundamental ingredients in the successful reduction of maternal mortality (Kehoe, et al, 2010, p. 20). The Reach Act does mention ascertaining baseline data relevant for each target country and requires a report describing how the interventions or programs are designed to reach underserved, marginalized, and improvised populations (H.R. 3706, 2015). Still, it does not say how it will ensure the poorest women, who are most likely to die at home and without a trace, are included in the health system (Kehoe, et al, 2010).

Although it was a good choice to create legislation that would improve current maternal and child health programs, the coalition’s policy does not openly address certain factors that influence poverty, early death. For example, “6.6 million children under the age of five perished in 2012, and forty-five percent of these deaths were attributed to malnutrition,” yet the Reach Act does not directly talk about a plan to address malnutrition (Catalano, 2014, p. 10).

Furthermore, pre-pregnancy health can impact maternal and child health. For instance, malnutrition can lead to a deficiency in iron or vitamin levels, causing anemia. Indirect causes, such as anemia, account for twenty percent of maternal global deaths (Reed, et al., 2013). Moreover, anemia increases the risk of having preterm or low-birth-weight baby, a baby with anemia, and a child with developmental delays (WebMD. 2014, 2014). This shows pre-pregnancy care is imperative, yet USAID’s child and maternal programs focus on women during pregnancy, childbirth, and post delivery. “The United States Center for Disease Control and Prevention (CDC) estimates that 29,000 Somali children under the age of five had died within a ninety day time period” because of drought, high food prices, and political conflict between 2011 and 2012 (Catalano, 2014, p. 10). Again, the act lacks any mention of political unrest but political conflict is a significant factor in the death of under-five children. Finally, capitalism and
lack of regulation leads to multinational companies producing their products for wages that keep people in poverty. This is the trap mentioned in my introduction, a cycle of being underpaid and undernourished. So although if successful the advocates change in policy is likely to lead to greater social justice, it is not addressing preventive measures that could save more lives and efforts in the long run.

**Politics**

The coalition behind the Reach campaign has been strategic in creating, introducing, and pushing the Reach Act. The partners created both a House version (H.R.3706) and a Senate version (S.1911) of the bill to aid the process since either bill would have to go through both legislative chambers. Both bills have the same goal, to end preventable maternal and under-five child deaths by 2035. The primary targets are the Obama Administration and US Congress. Since it is harder to get Republicans to co-sponsor the bill because they tend to question if the US should engage in international development work and if US resources are best spent at home, it was strategic that the campaign got both versions of the Reach Act to be sponsored by a Republican. The bill has been assigned to the Foreign Relations Committee (in the Senate) and the Foreign Affairs Committee (in the House). This means those committee members are now primary targets and the coalition has to educate and influence them.

For RS, a failure of the campaign was not having the bill introduced when planned. The campaign had both ‘Reach Every Mother and Child Act of 2015’ bills introduced in Congress in 2015. Originally, the bills were meant to be launched before July 2015 so that RS could have its advocates lobby them in Capitol Hill during its International Conference which takes place every summer. However, they were held up in congressional offices and the bills were not introduced until the second half of 2015. Although the delays were out of the coalition’s control, for
example an original co-sponsor candidate decided to run for president, not being able to use their key lobbying tactic (lobbying though grassroots advocates at Capitol Hill) can be seen as a reason for why more support has not been acquired for the Reach Act.

Although there is not a specific group or movement who has come out against the Reach campaign, the advocates are aware of possible opponents. Just as the above viewpoints which make Republican Congress Members harder to get on board, other oppositional positions could arise in disagreement with family planning, especially abortion. While the legislation does not address abortion, women/maternal health can be a buzzword for religious conservatives who are sensitive to the abortion debate.

Allies include legislators who are in support of maternal and child survival programs and RS initiatives. Although when one looks at the bill online, it is the name of a Republican that appears as the sponsor of the legislation, both bills actually have both Democrats and Republicans as original sponsors. Allies also include The U.S. Fund for UNICEF and the United States Agency for International Development (USAID).

**Strategy**

Though the main goal of Reach is to end preventable maternal and child deaths, RS has additional goals. It intended to build congressional champions in maternal and child health and other aspects of global health; build leadership and skills within grassroots advocates, and build stronger relationships amongst coalition members. I will discuss RESULTS’s progress made in these areas in the Evaluation part of this paper.

For RS, the universal goal is ending poverty. Its strategy consists of eliminating the effects poverty causes, rather than the roots that cause poverty. By being part of Reach, RS is aiming to do away with two direct consequences of poverty – preventable maternal and under-
five child deaths. Shultz said advocacy efforts normally begin with general goals but “campaigns have to be organized around short-term objectives that are clear, specific, and attainable” (Shultz, 2002, p.72). The most important objective for Reach is getting the Reach Act passed. This section will analyze RESULTS’ strategy for changing government policy.

**Methods and Tactics**

RS uses several tactics to move legislation forward. For the Reach campaign, the legislation proposed has to pass through both chambers so the coalition started by introducing similar bills in both the House and the Senate. RESULTS’ model of campaigning consists of an accurate power analysis and a toolkit of tactics to maximize influence. These tactics include lobbying, building allies, traditional media, digital media, literature, grassroots mobilization, and influential (grass tops) engagement.

Lobbying is RESULTS’s main tactic. It lobbies in different ways but focuses on grassroots efforts. First it educates its advocates on its current issues, for Reach those issues are global maternal and child health and the Reach Act. Then it informs volunteers of actions they can take to influence congress members to cosponsor the Reach Act. Training consists of webinars and other resources that can be found on its website. RS likes for all of its advocates to be trained on giving “laser talks,” short and compelling talks that describe RS issues. The format for these is defined by the acronym EPIC, which stands for Engage your audience, State the problem, Inform about the solutions, and Call to action. As part of RESULTS’ campaigning model, advocates use EPIC to reach out to media outlets, local community members, and congress members.

A strength of RS is that it guides volunteers by telling them the steps they must take for each tactic. RS has a toolkit online that has instructions for different advocacy tactics. For
Reach, activists raise awareness of maternal and child health and ultimately ask Congress members to cosponsor the Reach Act. Specific requests are important because it puts more pressure on the legislator that is mentioned in a piece of media or asked directly on the phone or a letter. By having a variety of online resources, RS is a tremendous advantage because it does not have to limit its communication and media pieces to a few samples created by it. Instead by providing step by step instructions, grassroots advocates can create their own media and letters.

**Messaging/Framing**

An essential element of RESULTS’ strategy is their use media advocacy. VeneKlasen and Miller say that media advocacy is very important because it informs the public about the issue and proposed solution, gets it on the political agenda, and influences decision makers and opinion leaders (2007). RS encourages all of its volunteers to produce media or have media written, for example, a letter to the editor, an op-ed, or an editorial. When it comes to talking about global poverty problems and solutions, RS is careful to train its members about messaging since “how you frame your issue and solution is one of the most critical factors in advocacy” (VeneKlasen and Miller, 2007, p. 235). Because RS understands the importance of using real life stories and quotes to make a problem real, it encourages all of its members to personalize their story, to say why the issue matters to them. From my experience this step can require the help of an experienced member because a new volunteer does not always know how to express their interest in global poverty with a personal story. RS makes an effort to make sure individuals feel comfortable telling ‘their’ story. Finally, RS ensures that real life stories are translated into larger social and political problems. Shifting the frame from episodic to thematic is a strength RS has. It trains volunteers to describe issues in a “me, us, now” form; first the individual talks about
why s/he is interested, then why a group of advocates/US government is needed, and finally why acting now is important.

Independence, shared values, and partnership are the themes of the Reach Campaign frame. This differs from the dominant frame of taxpayer money is wasted on international development and that foreign aid is a hand out which does more bad than good. In an effort to change the narrative and create a broader base of public support for global issues, 15 organizations (Bill & Melinda Gates Foundation, RESULTS, Care, Save the Children, Bond for International Development, United Nations Foundation, The Global Poverty Project, OXFAM, U.S. Global Leadership Coalition, Comic Relief, InterAction, Welt Hunger Hilfe, PATH, DSW, and One) created The Narrative Project: a research and communication effort focused on changing the development narrative in the United States, United Kingdom, France, and Germany. The project determined that certain themes and language are most effective in building support for development among the “Engaged Public” - people who follow global issues, talk about them with others and feel that it’s important to improve the lives of the world’s poorest people. According to The Narrative Project, “the theme of ‘independence’ as the end goal of development is the most critical idea to communicate to the public” (Gates Foundation, 2014, p. 11). The two following core themes are “shared values” and “partnership”. The idea of “progress” is good for educating the public on what has been achieved and serves as a valuable supporting scheme but was not shown to be persuasive on its own (Gates Foundation, 2014, p. 11). The project gives examples of specific language that can be used with each theme; for example, “build the foundations” for independence, “opportunity” for shared values, and “join forces” for partnership. The results from The Narrative Project are introduced to RS volunteers to ensure “the best” messaging is being used.
The results from the Narrative Project might promote support for foreign aid but they do not address structural causes. Independence, shared values, and partnership sound good but do not bring light to the fact that the US is contributing to the poverty that its programs claim to alleviate. Multinational companies do not only seek to pay their workers the minimum possible, but they seek tax havens. This contributes to a small fraction of people owning the majority of the world’s wealth, allowing 85 individuals to hoard an amount of wealth equal to that of the 3.5 billion poorest among us (Brewer, n.d.). Furthermore, “structural adjustment programs imposed by the World Bank and International Monetary Fund require money to be spent on debt repayment before it ever gets into budgets for public expenditures like education and healthcare” (Brewer, n.d.). Although Narrative Project’s messaging/framing might be effective in getting support for the Reach campaign, it does not actually advance progress on the structural issues at the heart of poverty.

For the Reach campaign, RESULTS’ message is logical but it implies more than what is certain. The message is that an end can be put to preventable child and maternal deaths if our government implements the Reach Act. It frames the problem as an issue of values. Just as we value the lives of our mothers and children (here in the US), we should show that lives of moms and children globally; they deserve the right to live and thrive (like we do here in the US) and we can ensure this by having the US work in partnership with developing countries. The idea that all humans should have access to appropriate healthcare so that they do not die from preventable deaths is logical. However, not all mothers and children in the US have great healthcare/medical care experiences. Also, the message that all preventable deaths will end because of the passage of the Reach Act is not true. USAID’s maternal and child health programs focus on 24 countries, meaning that there are countries being left out of this initiative. The bill does emphasize working
in partnership with target countries which is important in building sustainable foundations.

However, the passage of the bill does not ensure its proper implementation or that programs are truly being tailored to each country’s needs.

**Personal Contribution**

With an understanding of the ‘Reach Every Mother and Child’ campaign and RESULTS’ strategy and framing, I planned activities that would move the campaign forward in different aspects. While all of my products were meant to raise overall awareness of maternal and child survival, my ultimate goal was to increase the number of co-sponsors for the Reach Act. This section presents pieces of media that I submitted for publishing, letters I wrote to congress members, and an outreach event I held.

**Media Work**

In December, I started my media work. First, I submitted a letter to the editor (LTE) in the Press-Enterprise, a newspaper in Riverside, CA. Then as a request from RS because it has no RS group in Vermont, I submitted an LTE to the Brattleboro Reformer. Both followed RS EPIC format focused on the Reach Act, and asked the local Representative to co-sponsor the bill. Because one of the letters was published, I was able to follow up with the paper and get an Op-Ed published.

**Letter to Editor 1 - Press-Enterprise**

This month, when Syed Rizwan Farook and his wife, Tashfeen Malik, killed 14 people at the Inland Regional Center in San Bernardino, several children were left without a parent including the attacker’s six month old daughter. These types of tragedies are unimaginable and our leaders are scrambling to figure out how to prevent these senseless deaths in the future. Unfortunately, the unnecessary deaths of mothers is a daily tragedy for many families. Globally, 289,000 families lose a mother to preventable pregnancy complications every year. These women don't choose to risk their lives. They are innocent victims who want to live and be with their children but are limited by their circumstances. While we’re struggling to find solutions to prevent needless deaths in our own country,
we do know what it will take to end preventable deaths of moms across the world. The bipartisan Reach Every Mother and Child Act lays out a coordinated and strategic plan to make that happen. If passed, we can save 600,000 women’s lives by 2020. I hope Rep. Takano will recognize the values of mothers everywhere and be part of this lifesaving effort by co-sponsoring the Reach Act.”

My first LTE was not published. I later learned that the RS group in the area had been having a hard time getting media published since the paper was bought by the Orange County Register. Also, I realized that the editorials were on the conservative side. Although it would be great to have media published in both left and right leaning newspapers, it is harder to get RS issues covered in conservative papers. Strategically, RS encourages publications in any media because all media belongs to a district and therefore has a legislator that it can be connected to. Furthermore, when the media pieces are looked at as a whole, they represent support from the public, regardless of the paper.

Letter to Editor 2 – Brattleboro Reformer

Re: Trump taps into undercurrent of America
It might be true that among Trump’s supporters there are feelings of government dissatisfaction. But it is not true that our leaders in Congress can’t come together to do anything good. In 1990, over 12 million children under the age of 5 were dying every year. That number has been cut by more than half, largely due to our government’s efforts. Furthermore, the number of women who lose their lives to preventable pregnancy complications every year has been cut by 40 percent.
Although Republicans and Democrats are fighting over becoming the next president, in Capitol Hill they are working together to save lives. The bipartisan Reach Every Mother and Child Act lays out a coordinated and strategic plan to end preventable deaths of moms and children across the world. It is an example of how good things can happen and are happening because people set aside their differences to do what is right for the world. We have 61 co-sponsors already, with 26 of those being Republican. If passed, we can save 600,000 women’s lives and 15 million child lives by 2020. Rep. Welch can add to this bipartisan effort to do something good by co-sponsoring the Reach Act.

My second LTE was published on the 23rd of December 2015. As part of RESULTS’ strategy, once published, I wrote the legislator I had addressed my call to action to. I sent Rep. Welch my published LTE with a note about my interest in the issue and a request for him to co-sponsor the
bill. This letter can be found in Appendix A. Toward the end of February 2016, I received a letter from Rep. Welch thanking me for bringing the Reach Act to his attention and saying he was becoming a co-sponsor. Shortly after, I saw his name on the co-sponsor list on congress.gov.

Getting members of Congress to co-sponsor the Reach Act is a win because the bill is in the process of authorization, creating or continuing a federal agency or program. Although, authorization does not actually set money aside, it does authorize the expenditure of funds from the federal budget. The Reach Act does not specify how much money should be spent on the initiative but it does set forth the duties and functions of those involved establishing and executing a comprehensive five-year strategy to eradicate preventable maternal and under-five child deaths. Co-sponsors, like Rep. Welch, are helpful because they show general support for a bill and this facilitates the passing of a bill. RS is constantly working on getting legislators to co-sponsor bills that represent issues it cares about.

**Letters to Congressman Takano – Appendix B & C**

In December of 2015, I wrote my Representative, Rep. Takano. I informed him of the preventable global maternal and under-five child deaths, told him about the Reach Act, and asked him to co-sponsor. On Feb 5th, I received a letter from Rep. Takano thanking me for passing along my concerns on foreign aid; saying that “The aid that the U.S. sends around the world saves lives and contributes to our security at home and aboard;” and saying he would work with his colleagues to ensure this legacy continues. However, Rep. Takano has yet to co-sponsor the Reach Act. I responded to this letter, asking again for Congressman Takano to co-sponsor the Reach Act.
Op-Ed – Appendix D

Using RESULTS’s strategy of building relationships, in January I reached out to the Brattleboro Reformer, the paper that published my letter to the editor. I thanked it for publishing my letter, acknowledged the role media plays in society, and asked for permission to submit an Op-Ed regarding maternal and child health. The newspaper accepted. I had already thought about writing the Op-Ed with a colleague (Stephanie Rapp) who works in Haiti, one of the countries with the highest mortality rate for preventable child and mother deaths around the world. My colleague is an American, studied in Brattleboro, and could shed light to her experience with maternal and child health. Furthermore, Haiti is one of the 24 countries that USAID focuses on. These were all factors that made the Op-Ed piece strong, both for publishing appeal and audience appeal.

Writing the letter was a process that I worked through with my RESULTS supervisor. The idea of writing the Op-Ed came from the toolkit that RS has. After getting my LTE published, I was excited to get something else published, something more personal and in-depth about maternal and child health. First I reached out to Stephanie to confirm that she would be interested and then asked the newspaper. The Op-Ed was formatted to introduce Haiti’s maternal and child context through Stephanie’s experience. She gave some statistics to increase credibility and give a better picture of the situation in Haiti. I linked her section to the Reach campaign by talking about the progress that has been made globally in reducing the deaths of mothers and under-five children. Furthermore, I introduce the Reach Act and explained how Haiti was one of the countries USAID focuses on. Comparing Haiti’s under-five child mortality rate to the USA’s rate was important to me because it helps put the severity of the situation in context. Finally, I said how members of Congress need to take action to promote the Reach Act. Since I had
already written Rep. Welch about the Reach Act, I focused on Vermont’s senators. Moreover, because Senator Leahy is on the Appropriations Committee, RS asked me to expand my request to mention how he could use his position to make sure programs that RS supports get the funding necessary to continue. This was important for RS because I specifically talked about The Global Fund to Fight AIDS, TB, and Malaria which is another campaign RS is working on. It was good that I worked on the Op-Ed with my supervisor because we were able to maximize its purpose.

**Outreach Event – Appendix E**

In order to raise awareness of RS and the Reach campaign, I organized a community event in Riverside. I planned the logistics and recruited participants. I created a posting on VolunteerMatch, an organization that connects volunteers with possible volunteer opportunities. Upon RESULTS’ suggestion, I also made cold calls to organizations in Riverside who I thought would have members interested in volunteering with RS, or at least attending the event. My event was called an ‘Advocacy Action Workshop.’ I wanted to inform people about maternal and child health, the Reach campaign, and give them an opportunity to take action.

The turnout for my event was 6 people, two of which were under 18. RS does not stop people from volunteering because of their age but we know that minors are not as influential because they cannot vote. The workshop consisted of an introduction to RS, an explanation of the Reach campaign (including the Reach Act), and taking a lobbying action. The action consisted of calling a member of Congress and asking her to cosponsor the Reach Act. Before the call to action, I talked about framing and EPIC with the participants. That day seven of us called a left a message for Senator Boxer telling her why we cared about the Reach Act and asking her to sign on.
Evaluation

Media

Two of my media pieces followed RESULTS’ strategy and what literature says is necessary to have good media. To make sure that the information was clearly laid out, I followed the EPIC format for all my media. Since “numbers begin to shed light on an issue when you use them to make comparison,” I used the statistic of how much progress has been made (Shultz, 2002, p. 89). In the two pieces published, I used numbers to make “before and after” comparisons of child mortality. Following RESULTS’ example, I credited USAID and its global partners for its decrease. My first letter to the editor, which made a link between domestic terrorism and maternal deaths, was not published although reviewed and supported by RESULTS’s staff. I credit this to it not being easy for the audience to relate to. Not only is the newspaper I submitted it to right leaning but it is a far reach to try to connect the needless deaths produced in both situations. I was warned of the fine line in making associations with certain topics but from my experience RS encourages creative connections even when they do not have an intuitive relationship.

My media pieces serve different purposes. First, the letter published in Vermont was used to get Rep. Welch to co-sponsor the bill. The strategy of following up with media pieces by sending them to specific legislators proved to work in this case. Next, my media as well as others is available on RESULTS’ website, serving both as a sample and as motivation for other advocates. This is important because lobbying campaigns that aim to mobilize large numbers of people need to have specific materials and tools to equip the people involved (Shultz, 2002, p. 166). As mentioned in the strategy section of this paper, RS has many resources available on its website: both regarding the policy topic and the information they need about the lawmakers they
will need to lobby. The final explicit purpose of my media pieces is to use them with the compilation of all the media written for Reach, as proof of public support.

**Letters to Congressman Takano**

My letter to Congressman Takano left out one of Shultz four rules to letter writing. I followed three of the rules, 1) made it clear and to the point, 2) made the letter personal, and 3) made sure I was his constituent. Even though I got a positive reply, I did not get the result I wanted, as Rep. Takano did not co-sponsor The Reach Act. I think this is part because of a weak ask. In my letter to Rep. Welch I asked a yes or no question about him co-sponsoring the bill. In Congressman Takano’s letter, I asked for a specific action but there was no yes or no question. The rule that I failed to implement and would probably have added the pressure/convincing needed is making sure the legislator receives as many letters as possible. I did not organize a letter-writing campaign or even tell any other constituents to write him. RS knew I was writing the letter and did not encourage me to reach out to the local RS chapter to build support. After receiving Rep. Takano’s reply, I wrote him back, thanking him for his reply and commenting on how his agreement that foreign aid is worth the small price we pay to help others. I then made a direct request, asking if the congressman would co-sponsor the bill? I have yet to get a reply to my second letter.

**Outreach Event**

My outreach event was a good lobbying tactic but like my letter, it lacked support in numbers. Although there were only six participants, one of the purposes of my event - to raise awareness of maternal and child health - was achieved. All advocates left with more knowledge of the Reach campaign. They had read about Reach through a VolunteerMatch post and I had talked to them on the phone about it, but the outreach event gave them more thorough
information and had them take an advocacy/lobbying action. The latter was another goal of the event, to have participants call a member of Congress and ask her to co-sponsor the bill. To achieve this goal, I personalized a RESULTS PowerPoint and presented it to the group. I made sure they understood the EPIC format, saw a sample message, and practiced. Toward the end of the meeting, we all called Senator Boxer and asked her to co-sponsor The Reach Act. Because of my individual success in convincing Rep. Welch to sign onto the bill, I naively thought that seven people would convince Senator Boxer. However, as of April 11th, she has yet to add her name to the list. Shultz says contacting officials can have an “enormous impact if done in large numbers in a concentrated way” (Shultz, 2002, p. 166). Seven people is not a large number, especially not for California.

**RESULTS Lobbying**

Overall RS lobbying efforts are effective. The coalition behind Reach is diverse so it can bring “the kind of broad appeal that can help win support from lawmakers across the political map (Shultz, 2002, p. 162). RESULTS’ skills and resources lie in the lobbying area. It has both inside (all those actions that take place inside the corridors of government) and outside (all those activities carried out beyond the halls of power) lobbying skills (Shultz, 2002). For instance, RESULTS’ relationship with congress members facilitated finding lead sponsors for the bills. On the other hand, its activist toolkit guides letter writing, visiting lawmakers in their districts, media work, and other tactics Shultz refers to (Shultz, 2002). RS has a large membership base that it has mobilized for Reach. Across the country, it has had 241 pieces of media published regarding maternal and child health, including five on radio. This is significant because as mentioned earlier pieces of media can be used to call on specific congress members and is complied as evidence of public support.
Not specifying certain information is a key to RESULTS’s success. First, Shultz said in lobbying it is critical to acknowledge the strongest argument on the other side and then refute it. From my observations, RS does not seek to call attention to opposing viewpoints. It will admit that there is hesitance from conservatives or those who are against big governments and foreign aid spending but it does not say this unless asked. This could be considered a tactic since conservatives have done a good job of framing USAID as a waste of tax payers’ money and it is not recommended to explicitly reject the dominant frame. George Lakoff said negating a frame evokes the frame and evoking the frame reinforces the frame (Unsicker, 2013, p. 193) Next, as mentioned in the strategy section, the Reach Act does not specify how much money should be spent on the initiative. This is tactical because it reduces arguments about tax payer dollars being spent on international development. Although money is and will be needed to fund USAID maternal and child health programs, avoiding the topic of money in the bill helps the bill be more acceptable across the board.

**Campaign Goals**

RS has made progress regarding most of its goals related to the Reach campaign. Regarding its main goal of advancing the movement for ending preventable maternal and child deaths, advancement been achieved. Regardless of the weaknesses of the policy choice, the campaign has been successful in introducing policy and building support for it. Beyond the passage of the Reach Act, RS had additional goals it has been working toward: 1) building congressional champions in maternal and child health and other aspects of global health; 2) boosting leadership and skills within grassroots advocates, and 3) strengthening relationships amongst coalition members. From RESULTS’ strategy to follow up with MOC, it is clear that it has been working to build relationships with decision makers. Being able to get grassroots
activists to follow up with MOC shows that RS is doing a good job of building skills among its advocates. I would have never written a media piece and sent it to Rep. Welch if it were not for RS. I know that local group leaders have regular meetings with regional coordinators to build their leadership ability. However, I think more can be done to build this skill among non group leaders. There could be more opportunities given for advocate to take on tasks that are connected to the group and/or require facilitating a specific activity. Finally, I cannot say much about the relationship between coalition partners because of my lack of work in this area. However, I talk about the importance of working with such a diverse group in the next section.

Lessons Learned

My experience as an Organizing and Advocacy Intern with RESULTS taught me some general lessons that I would like keep in mind in future advocacy/policy work. I hope they are helpful to you as well.

Toolkit/Resources

Providing activists with as many resources as possible is essential to RESULTS’ grassroots lobbying success and to any campaign. As an intern new to the Reach campaign, the idea of creating material and communicating with strangers made me nervous. Luckily, I had a supervisor that could/would look at the work I created and give me feedback. This helped me to learn RESULTS’ strategy for lobbying and feel confident. When preparing advocates (I had recruited) to take action, I could see how nervous they were to create their own message. I am convinced that without the EPIC format and guides for writing media, letters to MOC, and making calls to MOC, RS advocates would not be as active or influential. The organizers work does not end at recruiting people for the cause. It must be able to teach skills to newcomers and keep people motivated. I like that RS has a monthly webinar where all members from across the
country can come together to get updated information and inspiration for taking actions.
Moreover, the support that local RS groups can provide is pivotal to the organization. The group supplements the readings and videos; it creates relationships which keep people engaged.

**Diversity of Partners**

Working with partners that have different strengths and appeal is very helpful. When I first came across the Reach campaign, I did not know it was the initiative of a coalition. I heard “we” a lot but no one said “we” consisted of specific partners (Care, Save the Children, American Academy of Pediatrics, PATH, Pathfinder International, Change: Center for Health and Gender Equity, The United Methodist Church - General Board of Church and Society, Global Health Council, Food for the Hungry, World Vision, Bread for the World, and Management Sciences for Health). Working with a coalition is said to be hard because of competition for resources and credit for work/progress. This might explain why there is not much explicitly said about who sponsors Reach. From my experience with RS, the advocate speaking about it simply talks about the problem, the solution, and what the listener can do. An advantage to working with a coalition is that if it is diverse; it can bring support from lawmakers across the political map. The coalition behind Reach is made up of organizations with different backgrounds and expertise, from religion to science. Furthermore, each organization brings specific skills to the table. For instance, RS brings the power of grassroots advocacy and media work while the Academy of Pediatrics can bring credibility, medical testimonies and commitment. Although not always necessary, I hope in future work I recognize opportunities to build networks and coalitions.
Grassroots Action

Keeping expectations practical helps avoid disillusionment. As mentioned, I asked three members of Congress to cosponsor the Reach Act and only one actually signed on. Prior to my work with RS, I had not written a personal letter (not a letter online where I just add my contact information) or made a call to a legislator. RS trained me on how to organize and message a letter and motivated me to contact my members of MOC. Although prior to my work with RS I was pessimistic about influencing my MOC, RS convinced me that my efforts were instrumental. It did not clarify the importance of taking actions in numbers or emphasis that a legislator could say s/he agrees with everything one says and still not sign on to the bill being proposed. I was encouraged to have as many people as possible use my published media pieces to write MOC, but I did not hear this urgency when it came to writing a letter or making a call not attached to media. When working with new advocates, I would like to make an effort to be optimistic but realistic so that individuals create reasonable expectations. The reality is that an individual action can make a difference (like my letter to Rep. Welch) but it is the group impact (all the letters, calls, and visits legislators get) that makes a greater difference.

Media

RS insists on making connections between their campaigns and almost any newspaper article or theme, but I now see one has to be wise about this. Shultz (2002) said linking a story to something else big that is already in the news can make it newsworthy. However, I now realize we should be more careful with the ties we try to make; I would not write another media piece linking a local terrorist attack to global maternal and child deaths, or any other current RS issue. Not only was my piece not published but later I did not feel good about the association I tried to create and the emotions I appealed to. It is harder to create a relationship between local and
global issues but not impossible. Waiting for the right article/piece to reply to or building a relationship with the newspaper in a different way are better strategies than simply feeling a sense of urgency and looking for any link, even if it does not really exist.

**Managing Expectations**

It is important to make sure information is accurate. While Reach talks about ending preventable deaths as a worldwide statement for all, the Reach Act focuses only on certain countries. The Reach material I came across always referred to the possibility of preventable global maternal and child deaths being adverted by 2035, making it seem like the passage of a bill (the Reach Act) could eliminate these two extreme consequences of poverty. However, in reality the USAID maternal and child health program, which is a considerable part of the Reach Act’s approach, only focuses on 24 countries. Some media I wrote used definite words such as ‘will’ instead of ‘might.’ I understand that using such powerful statements creates a moral imperative to act, yet it is not correct to make blanket statements that do not take into consideration that there are certain causes not being addressed - making the elimination of a problem impossible.

In conclusion, the Reach campaign’s strategy for raising awareness and building support of maternal and child health (including that of the Reach Act) aligns with literature. It includes key suggestion for organizing and lobbying. However, their choice in policy leaves out key causes of child and maternal mortality, poverty. While the advocates change in policy is likely to lead to more saved lives, structural problems will remain. Even if the Reach Act is passed, it will not end all the preventable deaths it claims because its strategy is not fighting the powers that put and keep people in poverty.
Bibliography


Appendix A - Letter to Representative Welch (Sent to his Foreign Policy Aide)

Dear Patrick Satalin,

I am a student at SIT Graduate Institute (SIT) in Brattleboro. I want to pass along this letter to the editor that the Brattleboro Reformer just published, which I wrote. I know other students at SIT and community members care about international issues and want to make the world a better place. I ask Rep. Welch to show that he values mothers and children everywhere by cosponsoring The Reach Every Mother and Child Act of 2015, H.R. 3706. If this bill passes, we will be on our way to ending preventable mom and child deaths by 2035. I thank you for taking the time to read my concerns. Is the Reach Act something Rep. Welch will sing onto?

Sincerely,
Laura Leslie
413-325-5154
Appendix B – Letter 1 to Congressman Takano

Dear Mr. Yuri Beckelman,

Rep. Takano celebrated the passing of the Every Student Succeeds Act (ESSA) because he knows the importance of education. I too know its importance and as a teacher I want all to have an opportunity to be successful.

My godson, Zavier, was a premature baby, so he was more likely to suffer from birth asphyxia. Thankfully, his mother and him had good healthcare and they are both alive and well today. Dying from oxygen deprivation at birth is preventable but without the knowledge of how to properly give breathing support, nothing can be done. Today alone, 16,000 children will die from treatable causes like birth asphyxia, diarrhea, and pneumonia.

In 1990, over 12 million children under the age of 5 were dying every year. That number has been cut by more than half, largely due to our government’s efforts. Furthermore, the number of women who lose their lives to preventable pregnancy complications every year has been cut by 40 percent. Education can give life, literally, but the lack of it constantly kills individuals around the world, depriving them of a chance at success.

As Rep. Takano said in his statement after President Obama signed the ESSA into law, Congress has been defined by gridlock and inaction but it can still work together. The bipartisan Reach Every Mother and Child Act lays out a coordinated and strategic plan to end preventable deaths of moms and children across the world. It too is an example of how good things can happen and are happening because people set aside their differences to do what is right for the world. We have 62 co-sponsors already, with 27 of those being Republican. If passed, we can save 600,000 women’s lives and 15 million child lives by 2020.

During this time of gratitude and resolutions, I thank Rep. Takano for his support of the Gavi Resolution this past year. I ask him to continue to recognize the value of mothers and children everywhere and be part of the lifesaving effort by co-sponsoring the Reach Act. I would appreciate your reply, and would also like to thank you taking the time to read my concerns.

Sincerely,

Laura Leslie
4245 Kingsbury Place
Riverside, CA 92503
Appendix C - Letter 2 to Congressman Takano

Dear Mr. Yuri Beckelman,

I want to thank you for taking the time to read my letter and for Congressman Takano's reply. I was moved by Rep. Takano's understanding of how our foreign aid spending is outsized compared to its share of our budget and how it saves lives and contributes to our security at home and abroad. In his letter, Rep. Takano said he will work with his colleagues to ensure this legacy continues.

When I wrote you last, the Reach Every Mother and Child Act (H.R. 3706) had 62 cosponsors. Now it has 80 cosponsors, with 36 of those being Republican. However, Rep. Takano has yet to sign on to the Reach Act.

Congressman Takano said he agrees that foreign aid is worth the small price we pay to help others. Can you please tell me if he will cosponsor to the Reach Act? Also, can you please tell me if there is anything I can do to aid this process? [Here is a link to the bill.]

Thank you for your time.

Sincerely,

Laura Leslie
4245 Kingsbury Place
Riverside, CA 92503
Another view

SIT students work to help women, children in Haiti

By Stephanie Rapp and Laura Leslie

Haiti faces a challenging landscape when it comes to maternal and child mortality. "Children who have lost their mothers are up to 10 times more likely to die prematurely than those who have not" (UNFPA, 2012). Yet in 2013, 380 women died in childbirth for every 100,000 live births (WHO, 2015). Roughly 90 percent of births in Haiti take place in rural areas, and around 70 percent are done at home without a skilled birth attendant.

The State of the World's Midwifery (2016) reports there are only 201 nurse midwives and 400 OB-GYNs for a population of 10.2 million, meeting only 10 percent of the need for maternal and newborn health.

Stephanie Rapp, an SIT student, has been working in this context for the last 8 months as a program coordinator in Hinche, Haiti for Midwives for Haiti (MFH), a U.S. nonprofit that increases access to skilled maternity care for women in Haiti. While there are many ways to reduce maternal and child mortality, MFH focuses on providing and cultivating midwifery care in Haiti's rural Central Plateau. MFH's central program is a 12-month training program for Haitian nurses to become skilled birth attendants. Six graduates of this program operate a mobile clinic in 22 sites across the Central Plateau. Others staff the maternity wing of the Ministry of Public Health hospital in Hinche or work for clinics across eight of Haiti's 10 regional departments. Without their presence in these locations, nurses without training in obstetrics would often be expected to manage deliveries.

Most maternal deaths, which are caused by eclampsia, sepsis, and postpartum hemorrhage, are preventable when adequate care, supplies, and medicines are available (UNFPA, 2012). Although our graduates make childbirth safer for tens of thousands of mothers and babies in Haiti each year, maternal and child health in Haiti cannot be addressed by midwives for Haiti alone.

Much of my work with MFH is developing local partnerships to further our mission. As a result of these networks, more women and children will survive and live healthy lives in rural Haiti.

While Haiti's progress is halting, we have seen, overall, that much progress is being made around the world, despite pervasive messages that seem to dominate community discourse. With the support of the U.S. Agency for International Development and its global partners, the number of children under the age of 5 dying annually has fallen by more than half, from 12.6 million in 1990 to 6.9 million today.

Fortunately, this year we have survival life-changing opportunities. There is currently bipartisan legislation in both the Senate and House called The Reach Every Mother and Child Act (S. 1011 and H.R. 2706) which seeks to put the US on track to ending preventable deaths by 2035. The Reach Act focuses on ensuring that our global health dollars are more effective. The legislation supports doing more of what we know works, including quality prenatal care, management of labor and delivery, and basic treatments necessary for mother and child health.

These steps will present returns measured in lives saved and healthy thriving communities in the places that need it the most. With an under-5 child mortality rate of 69/1000 (compared to 7/1000 in the USA), Haiti is one of the top 24 priority countries for the USAID Maternal and Child Health programs.

As students at SIT Graduate Institute, we are working on these issues, but members of Congress need to take action to promote these critical life-saving programs. One way is to cosponsor the Reach Every Mother and Child Act, enshrining into law the need for a more centralized and coherent strategy, including scaling up the most effective, evidence based interventions.

Vermont Senators Leahy and Sanders have a special place of leadership in this effort. As a leader in the Senate Appropriations Committee Senator Leahy can make a profound difference by using his position to make sure critical programs promoting vaccines, TB, nutrition, and maternal and child survival get critical funding to continue to move this work forward, including The Global Fund to Fight AIDS, TB, and Malaria which has saved 17 million lives since 2002. And Senator Sanders can use his national spotlight to bring light to the powerful leadership role that US can continue to play.

As students committed to improving the world in which we live, we will continue to do our part to save lives and improve communities. We ask that legislators do the same.

Stephanie Rapp is currently a candidate for MA in Intercultural Service, Leadership and Management at SIT Graduate Institute. She lives full-time in Hinche, Haiti, working as the In-Country Coordinator with Midwives for Haiti. Laura Leslie is currently an MA candidate at SIT Graduate Institute and an Advocacy and Organizing Intern with RESULTS (results.org), a group that advocates for proven, cost-effective and accountable solutions to global hunger, disease and poverty.
Appendix E - Outreach Event PowerPoint Slides (Double click on image to be taken to PowerPoint presentations)

Building a Movement to End Global Poverty
Why I Advocate
For a chance to live and thrive
“We stand by as children starve by the millions, because we lack the will to eliminate hunger. Yet we’ve found the will to create missiles capable of flying over the polar cap and landing within a few hundred feet of their target. This is not innovation. This is a profound distortion of humanity’s purpose on Earth.”

—Former Senator Mark Hatfield
Why RESULTS?

All of the solutions to poverty already exist, yet...

- **3.1 million children under 5 die of malnutrition each year**
  - 165 million are developmentally stunted

- **57 million children of grade school age are not in school**
  - 38% of grade school age kids can’t read or do math

- **5.9 million children die each year of preventable causes**
  - 1 million babies die their first day of life, 2 million newborns die in their first week. Most of these deaths are readily preventable
The government makes decisions about EVERYTHING
Taxes
Investments
Voting
Personal

Yet, many people don’t know who works for them in Congress. Many will never contact their member of Congress or hold them accountable to their decisions.

Why RESULTS?
Empower you to have breakthroughs in exercising your power for change.

Work together to create the world you want to live in.

We Have a Vision: Video
Everyday citizens…
Using our voices…
To change the world.

Meet Regularly … Take Action
• Relationship with MOC
• Face to Face Meetings
• Media & Social Media
• Community Mobilization

RESULTS Everyday Heroes: Video
RESULTS Success on Maternal & Child Survival
RESULTS Success on Child Survival

US pledge of $1 billion to Gavi, The Vaccine Alliance

Lifesaving vaccines to 300+ million children

5+ million lives saved

Solid foundations for health and vaccine infrastructure
RESULTS Advocacy on Gavi

369 Total Meetings with Decision Makers

**Senate**
- 25 Face to Face
- 64 Foreign Policy Aide

**House**
- 105 Face to Face
- 175 Foreign Policy Aide
Media Across the Country Pushes for U.S. Investment in Gavi, the Vaccine Alliance

Media coverage

108 Letters to the Editor
14 Editorials
27 Op-eds
13 News and Features
RESULTS Success on Child Survival

US pledge of $1 billion to Gavi, The Vaccine Alliance

Lifesaving vaccines to 300+ million children

5+ million lives saved

DID WE REACH OUR GOAL?
Who in California is Inspiring Your Members of Congress?

Issue Training: Maternal and Child Survival
Advocacy Training: Powerful Speaking
Take Action: Make a Phone Call

Senator Barbara Boxer

Let’s Take Action Today!
Reach Every Mother and Child Act Video
Reach Every Mother and Child: Ending Preventable Deaths by 2035

• **Problem:**
  • 5.9 million kids under 5 die each year from preventable causes
  • 300,000 women die each year from preventable, pregnancy related causes
  • We can put an end to preventable deaths, but not on track

• **Opportunity:**
  • Child Survival Call to Action: Global movement to put an end to unnecessary deaths by 2035

• **Goal:**
  • USAID: Save 15 million children, 600,000 women by 2020
  • End preventable deaths by 2035

• **Plan:**
  • Necessary reforms to USAID to put us on track to reach goals
  • Reach Every Mother and Child Act in Senate & House
Reach Every Mother and Child Act
S. 1911

• **Coordination:**
  • USAID global health programs work in silos
  • Calls for Maternal and Child Health Coordinator
  • Better coordination w/in USAID and between outside partners

• **Strategy & Reporting:**
  • Develop strategy with clear goals, targets, and regular reporting on progress

• **Targeting:**
  • Target moms and babies in under-served areas, not just low hanging fruit

• **Best Practices:**
  • Invest in programs proven to save the lives of moms and kids
    • Vaccines, breast feeding, trained birth attendants, malaria treated bed nets, 100+ interventions recommended by UNICEF
What is inspiring you to act?

**Care for Mom**
- Access/Education on Early Breastfeeding
- Counseling on Pregnancy Complications
- Skilled birthing attendants and emergency care
- Reducing adolescent pregnancy

**Care for Baby**
- Vaccines
- Preventive treatment for Malaria
- Post-natal care and checks
- Registration at birth
- Malnutrition intervention
Powerful Speaking

- **E**ngage: something to capture attention
- **P**roblem: frames the problem
- **I**nform: informs about the solution
- **C**all to Action: ask for concrete action
Engage: UNICEF just released data saying we’ve saved 50 million children’s lives since 2000.

Problem: Yet, 5.9 million children still die each year from mostly preventable causes.

Inform on the solution: Evidence shows that we can end preventable maternal and child deaths by 2035. The Reach Every Mother and Child Act S.1911 will put us on track to reach this goal. The legislation will call for three key reforms:

• A coordinated strategy for ending preventable deaths
• Clear targets that focus on the poorest populations and accountability for reaching them
• Scaling up of the most effective, evidence-based interventions

Call to action: Will you help us make sure all kids and moms have a healthy start by supporting S1911 and becoming a co-sponsor?
Let’s Call Senator Boxer to Action!

Washington DC Office:
(202) 224-3553

1. Introduce Yourself
2. Say you’re a constituent
3. Briefly-Why you care
4. EPIC Message
5. Thank you and contact information
Let’s Call Senator Feinstein to Action!

Washington DC Office: (202) 224-3841

1. Introduce Yourself
2. Say you’re a constituent
3. Briefly—Why you care
4. EPIC Message
5. Thank you and contact information
Join RESULTS Riverside/Inland Empire

- Meet twice a month
- Take powerful action
- Influence members of Congress
- Make a difference

This is just the beginning …